



Person in Position of Trust Policy

THIS IS A CONTROLLED DOCUMENT

Whilst this document may be printed, the electronic version maintained on the policy portal is the controlled copy. Any printed copies of this document are not controlled. It is the responsibility of every individual to ensure that they are working to the most current version of this document.

Document Information	
Version	1.0 2023
Owner	Cath Gormally, Director for Adult Services and Wellbeing
Author(s)	Jo Sutherland, Principal Social Worker
Contact(s)	Zakera Pandor, Policy & Procedures Officer
Approved by	Corporate Leadership Team (CLT)
Date of approval and commencement	11/05/23
Last review date	
Last reviewer	
Next Review date	12 months
Supporting Documents	

Amendments			
Version:	Review Date:	Reviewed by	Description
1.0	27/02/24	Sophie Wrafter	Safeguarding team email address updated

Contents

.....	1
Person in Position of Trust Policy	1
Section 1: Background	4
Section 2: Scope	5
Section 3: Principles	6
Section 4: Legal framework	6
The 7 Golden Rules to Information Sharing	9
Section 5: Key roles and responsibilities	10
Section 6: Case examples	13
Case example 1:	13
Case example 2:	14
Case example 3:	14
Appendix 1: Questions to Assist in Decision-Making Regarding Disclosure to the Employer	15
Appendix 2: The Employer / Student Body Risk Management Arrangements	17
Appendix 3: Adult PiPoT Processes:	19
Acknowledgements	23

Section 1: Background

1.1 The Care Act 2014 introduced a single new statute to replace most existing adult social care law. Sections 42 to 47 of the Care Act put adult safeguarding on a statutory footing for the first time, requiring local authorities to set up a Safeguarding Adults Board. The Care and Support Statutory Guidance formalised the expectations on local Safeguarding Adults' Boards to establish and agree a framework and process for how allegations against people working with adults with care and support needs (i.e., those in a Position of Trust) should be notified and responded to.

1.2 While the Care Act outlines clear legal duties on the local authority to undertake enquiries in certain circumstances where adults with care and support needs are identified as experiencing or being at risk of abuse or neglect, the Care Act does not set out any primary legal duties on the local authority associated with managing allegations against people who work in a position of trust with adults with care and support needs. However, if an adult at risk has allegedly been harmed or neglected by a person in a Position of Trust an Adult Safeguarding Enquiry must be carried out. Other processes, including Police criminal investigation or employer's disciplinary processes, will also be considered. All risk assessments and subsequent actions must be carefully coordinated and take account of the well-being and safety of the adult at risk. If no adult at risk has been harmed Adult Safeguarding processes are not required.

1.3 The Care and Support Statutory Guidance ([Chapter 4, paragraph 102](#)) states: *'When commissioning services, local authorities should pay particular attention to ensuring that providers have clear arrangements in place to prevent abuse or neglect. This should include assuring themselves, through their contracting arrangements, that a provider is capable and competent in responding to allegations of abuse or neglect, including having robust processes in place to investigate the actions of members of staff. Local authorities should be clear what information they expect from providers (for example, where there are allegations of abuse, what action the provider is taking or has taken and what the outcome is) and where providers are expected to call upon local authorities to lead a Section 42 enquiry (where the management of the provider is implicated for instance), or to involve the ICB (for health matters) or police (for example, in the case of potential crimes). There should be clear agreement about how local partners work together on investigations and what their respective roles and responsibilities are.'*

1.4 As such, this framework builds upon existing relevant statutory provision; particularly legislation that governs the lawful sharing of information, employer responsibilities to risk assess and manage the safety of their service and staff, and the Human Rights Act when balancing one right against another, or one person's rights against the interest of society. Any actions and interventions taken to address concerns or allegations that a person in a Position of Trust poses a risk of harm to adults with care and support needs must be lawful and proportionate, and accord with any relevant statutory provision, for example, Data Protection Act 1998, Human Rights Act 1998 and Employment Legislation.

1.5 Allegations against people who work with adults should not be dealt with in isolation. Any action necessary to address corresponding welfare concerns in relation to an adult involved should be taken without delay and in a coordinated manner.

1.6 The Care Act 2014 Statutory Guidance also requires that Employers, Student Bodies and Voluntary Organisations should have clear procedures in place setting out the process, including timescales, for investigation and what support and advice will be available to individuals against whom allegations have been made [5].

1.7 The Care Act 2014 Statutory Guidance reinforces the requirement that if an organisation removes an individual (paid worker or unpaid volunteer) from work with an adult with care and support needs (or would have, had the person not left first) because the person poses a risk of harm to adults, the organisation must make a referral to the Disclosure and Barring Service. It is an offence to fail to make a referral without good reason [6].

[4] Care and Support statutory guidance: Chapter 14.

[5] Paragraph 14.126 Care and Support Statutory Guidance

[6] Paragraph 14.127 [Care and Support Statutory Guidance / DBS Webpage](#)

Section 2: Scope

2.1 This framework and process applies to concerns and allegations about:

- A person who works with adults with care and support needs in a Position of Trust, whether an employee, volunteer or student (paid or unpaid)
- Where those concerns or allegations indicate the person in a Position of Trust poses a risk of harm to adults with care and support needs

These concerns or allegations could include, for example, that the person in a Position of Trust has:

- Behaved in a way that has harmed or may have harmed an adult or child.
- Possibly committed a criminal offence against, or related to, an adult or child.
- Behaved towards an adult or child in a way that indicates they may pose a risk of harm to adults with care and support needs

2.2 This framework applies whether the allegation relates to a current or an historical concern. Where the allegation or concern is historical, it is important to ascertain if the person is currently working with adults with care and support needs or children and if that is the case, to consider whether information should be shared with the current employer.

2.3 The policy does not cover complaints or concerns raised about the quality of the care or professional practice provided by the person in a Position of Trust. Concerns or complaints about quality of care or practice should be dealt with under the relevant agency or individual complaint, competence or representations processes.

Section 3: Principles

3.1 This framework builds upon existing relevant statutory provision. There is no primary statutory duty associated with the position of trust framework so any actions taken must be in line with other relevant statutory provision, e.g., Data Protection Act 2018, Human Rights Act 1998 and Employment Legislation. Any actions and interventions must be lawful and proportionate in line with statutory provision.

3.2 As with all adult safeguarding work the 6 Statutory Principles should inform this area of activity:

- **Empowerment:** people being supported and encouraged to make their own decisions and informed consent
- **Prevention:** it is better to take action before harm occurs
- **Proportionality:** the least intrusive response appropriate to the risk presented
- **Protection:** support and representation for those in greatest need
- **Partnership:** local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse
- **Accountability:** accountability and transparency in safeguarding practice

3.3 It is important to remember that the person in the Position of Trust is entitled to ask to see any information held about them. It would be best practice to seek the views of the person whose information you hold unless to do so will endanger an adult with care and support needs or child.

3.4 It is also good practice to seek the individual's consent to share the information, provide the individual the opportunity to share the information themselves, and to give them the right to reply.

Section 4: Legal framework

4.1 Confidentiality

4.1.1 The rules on Confidentiality, Privacy and the need to Safeguard Personal Information arise from both Legislation and Case Law. These enshrine the need for fair and ethical treatment of information where there is a duty of confidence, issues of privacy or where personal information is involved.

4.1.2 The common law duty of Confidentiality is not a written Act of Parliament. It is "common" law. This means that it has been established over a period of time through the Courts. It recognises that some information has a quality of confidence, which means that the individual or organisation that provided the information has an expectation that it will not be shared with or disclosed to others.

For information to have a quality of confidentiality it is generally accepted that:

- It is not “trivial” in its nature
- It is not in the public domain or easily available from another source
- It has a degree of sensitivity
- It has been communicated for a limited purpose and in circumstances where the individual or organisation is likely to assume an obligation of confidence. For example, information shared between a solicitor / client, health practitioner / patient

In such circumstances the information should only be disclosed:

- With the permission of the provider of the information
- If the confidentiality requirement is overridden by legislation
- If an effective case ‘that it is the public interest’ can be made

4.1.3 Decisions on sharing information must be justifiable and proportionate, based on the potential or actual harm to adults or children at risk and the rationale for decision-making should always be recorded [7].

4.1.4 When sharing information about adults, children and young people at risk between agencies it should only be shared:

- Where relevant and necessary, not simply all the information held
- With the relevant people who need all or some of the information
- When there is a specific need for the information to be shared at that time [8]

4.2 General Data Protection Regulation (GDPR) & Data Protection Act 2018 (DPA 2018)

4.2.1 The General Data Protection Regulation (GDPR) and the Data Protection Act 2018 introduce new elements to the data protection regime, superseding the Data Protection Act 1998.

4.2.2 Information relevant to Adult Safeguarding will often be data that the Act categorises as “Special Category Personal Data”, meaning it is **sensitive and personal**. Wherever possible, individuals and agencies should seek consent to share information, and be open and honest with the individual from the outset as to why, what, how and with whom, their information will be shared. If consent is not given or cannot be gained, the GDPR and DPA 2018 do not prevent, or limit, the sharing of information for the purposes of keeping adults with care and support needs safe.

4.2.3 The Data Protection Act 2018 allows for sharing of “Special Category Personal Data” without consent of the data subject for the purpose of safeguarding adults with care and support needs [9].

Information **can be shared legally without consent** if:

- A practitioner or agency is unable to gain consent from the data subject
- A practitioner or agency cannot be reasonably expected to gain consent from the data subject

- Gaining consent could place an adult with care and support needs (or child) at risk

4.2.4 Individuals and agencies should consider the following information sharing principles to help when making decisions about sharing personal and sensitive information [10]:

- ✓ **Necessary and proportionate:** When taking decisions about what information to share, you should consider how much information you need to release. Not sharing more data than is necessary to be of use is a key element of the GDPR and Data Protection Act 2018, and you should consider the impact of disclosing information on the information subject and any third parties. Information must be proportionate to the need and level of risk.

- [7] Paragraph 14.131 Care and Support Statutory Guidance.
- [8] Paragraph 14.132 Care and Support Statutory Guidance.
- [9] Data Protection Act 2018, Schedule 1, Para 18.
- [10] Content abridged from "Information Sharing: Advice for Practitioners providing safeguarding services to children, young people, parents and carers". HM Government, July 2018

- ✓ **Relevant:** Only information that is **relevant** to the purposes should be shared with those who need it. This allows others to do their job effectively and make informed decisions.
- ✓ **Adequate:** Information should be adequate for its purpose. Information should be of the right quality to ensure that it can be understood and relied upon.
- ✓ **Accurate:** Information should be accurate and up to date and should clearly distinguish between fact and opinion. If the information is historical then this should be explained.
- ✓ **Timely:** Information should be shared in a timely fashion to reduce the risk of missed opportunities to offer support and protection to adults with care and support needs. Timeliness is key in emergency situations, and it may not be appropriate to seek consent for information sharing if it could cause delays and therefore place an adult with care and support needs at increased risk of harm. Practitioners should ensure that sufficient information is shared, as well as consider the urgency with which to share it.
- ✓ **Secure:** Wherever possible, information should be shared in an appropriate, secure way. Practitioners must always follow their organisation's policy on security for handling personal information.
- ✓ **Record:** Information sharing decisions must be recorded, whether or not the decision is taken to share. If the decision is to share, reasons should be cited including what information has been shared and with whom, in line with organisational procedures. If the decision is not to share, reasons for this decision should be recorded and discussed with the requester. In line with each organisation's own retention policy, the information should not be kept any longer than is necessary. In some rare circumstances, this may be indefinitely, but if this is the case, there should be a review process scheduled at regular intervals to ensure data is not retained where it is unnecessary to do so.

The 7 Golden Rules to Information Sharing

1. Remember that the General Data Protection Regulation (GDPR), Data Protection Act 2018 and Human Rights legislation are not barriers to justified information sharing but provide a framework to ensure that personal information about living individuals is shared appropriately.
2. Be open and honest with the individual (and / or their family / representatives where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
3. Seek advice from other practitioners, or your Information Governance Lead / Caldicott Guardian if you are in any doubt about sharing the information concerned, without disclosing the identity of the individual (s) where possible.
4. Where possible, share information with consent, and where possible, respect the wishes of those who do not consent to having their information shared. Under the GDPR and Data Protection Act 2018 you may share information without consent if, in your judgement, there is a lawful basis to do so, such as where safety may be at risk. You will need to base your judgement on the facts of the case. When you are sharing or requesting personal information from someone, be clear of the basis upon which you are doing so. Where you do not have consent, be mindful that an individual might not expect information to be shared.
5. Consider safety and well-being: base your information sharing decisions on considerations of the safety and well-being of the individual and others who may be affected by their actions.
6. Necessary, proportionate, relevant, adequate, accurate, timely and secure: ensure that the information you share is necessary for the purpose of which you are sharing it, is shared only with those individuals who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely (see Information Sharing Principles above).
7. Keep a record of your decision and the reasons for it – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.

4.3 The Crime and Disorder Act 1998

4.3.1 Any person may disclose information to a relevant authority under Section 115 of the Crime and Disorder Act 1998, 'Where Disclosure is Necessary or Expedient for the Purposes of the Act (Reduction and Prevention of Crime and Disorder)'. 'Relevant Authorities', broadly, are the Police, Local Authorities, Health Authorities – Integrated Care Board (ICB'S – formerly CCG's) and local Probation Boards.

4.4 Human Rights Act 1998 (HRA)

4.4.1 Human rights are freedoms which belong to all individuals regardless of their nationality and citizenship. They are fundamentally important in maintaining a fair and civilised society.

4.4.2 In cases of concern or allegations against people who care for adults with care and support needs, the HRA is relevant where decisions have to be made which consider balancing one right against another, or an individual's rights against the interest of Society. These rights are fundamental and the most important of them are:

- **Article 3 Prohibition of Torture:** No one shall be subjected to torture or to inhuman or degrading treatment or punishment
- **Article 6 Right to a Fair Trial:** A person has a right to a fair and public hearing within a reasonable amount of time. This applies both to criminal charges against them and to cases concerning their civil rights and obligations. If it is a criminal charge, the person is presumed innocent until proven guilty according to law and has certain guaranteed rights to defend themselves
- **Article 7 No Punishment Without the Law:** A person normally has the right not to be found guilty of an offence arising out of actions which at the time they committed them were not criminal
- **Article 8 Right to Respect for Private and Family Life:** A person has the right to respect for their family life, their home and their correspondence. This right can be restricted but only in specified circumstances.

Section 5: Key roles and responsibilities

5.1 The information owner

5.1.1 The owner of the information relating to the concern or allegation is expected to:

- Consider if the information indicates any immediate risk management actions are needed, or referrals into adult or children safeguarding processes
- Consider whether the allegation or concern indicates a criminal offence has occurred or may occur – if so, the allegation or concern must be reported to the police (early liaison with police should take place to agree on next steps and to avoid contamination of evidence – if a criminal investigation is required this may take primacy over an agency or organisation's internal investigation)
- Refer to the relevant Local Authority Local Areas Designated Officer (LADO) where the information indicates the person also works with and could pose a risk of harm to children
- Make a decision whether the information should be disclosed to the person in a position of trust's employer [see appendix 1 questions to assist in decision making regarding disclosure to the employer for additional guidance]
- Consider any known history of conduct (when making a decision), complaints, cautions or convictions that may be relevant to the potential risk

If disclosing, manage this disclosure in line with legal and best practice requirements for information sharing. The Care and Support Statutory Guidance states that Local Authority's relevant partners, and agencies providing universal care and support services should have clear policies in line with those from the Safeguarding Adults Board to deal with this area of activity (see section 1.3 above). Some agencies may

have well established protocols for sharing information in these types of circumstance – such as the [Common Law Police Disclosure](#) process – whereas other agencies may not deal with these issues on a frequent basis and may need to have senior management oversight, and gain legal advice as required, on a case by case basis.

- Where a disclosure is made, notify the relevant service commissioners and regulatory agencies
- Record the information and decisions clearly, including the rationale for any decision made
- Records should be maintained in line with internal agency record keeping policies and requirement

5.2 Employers, Student Bodies, or Voluntary Organisations

5.2.1 Any Employer, Student Body, or Voluntary Organisation who is responsible for a person in a Position of Trust where there is a concern or allegation raised are expected to:

- Respond in individual cases where concerns are raised about people working in a position of trust, ensuring that the risk is assessed, investigated where appropriate through internal employment processes, and that risk management actions are identified and implemented as appropriate to the individual case [see appendix 2 the employer student body risk management arrangements to support good practice in decision making but must not be used as a substitute for an organisations own policies and procedures]
- Ensure all adult or child safeguarding concerns that result from a concern about a position of trust are reported
- Where appropriate, notify and refer to external agencies; to the CQC (where the person in a position of trust is working or volunteering in a CQC regulated organisation), statutory and other bodies responsible for professional regulation (such as the General Medical Council (GMC), the Nursing and Midwifery Council (NMC), Social Work England (SWE), The Charity Commission) and the DBS
- Provide feedback at regular intervals to the relevant Local Authority (if there is a related safeguarding enquiry) and to their commissioning agency (if they have one)
- Ensure the safety and protection of adults with care and support needs is central to their decision making
- Share information in line with these procedures where it is known the person in a position of trust also has other employment or voluntary work with adults with care and support needs or children
- Record the information and decisions clearly, including the rationale for any decision made

If an organisation removes an individual (paid worker or unpaid volunteer) from work with an adult with care and support needs (or would have, had the person not left first) because the person poses a risk of harm to adults, the organisation must make a referral to the Disclosure and Barring Service. It is an offence to fail to make a referral without good reason [12].

At the conclusion of any Position of Trust enquiries, consider if the findings demonstrate the following:

1. Is there evidence of a theme or pattern in the context of past and historic Position of Trust concerns
2. The identification of potential themes or system wide issues within the organisation
3. Ensure that appropriate action is taken by their organisation so that learning from past events is applied to reduce the risk of harm to adults with care and support needs in the future.

Records should be maintained in line with internal agency record keeping policies and requirements.

Employers, Student Bodies and Voluntary Organisations should have clear procedures in place that are consistent with this framework:

1. Setting out the process, including timescales, for investigation
2. Any allegation against people who work with adults should be reported immediately to a senior manager within the organisation
3. Employers, student bodies and voluntary organisations should have their own sources of advice (including legal advice) in place for dealing with such concerns [11].
4. Identification of what support and advice will be available to individuals against whom allegations have been made.

5.3 Support for the Person in a Position of Trust Investigation.

1. Where concerns have been raised that a person in a Position of Trust may pose a risk to people with care and support needs, the experience is likely to be very stressful for them. Alongside the duty of care towards the Adult at Risk, there must be a duty of care to the Employee, Volunteer or Student concerned.
2. The Employer / Student Body will need to provide support to minimise stress associated with the process, this may need to include where possible:
 - Support for the person to understand the procedures being followed
 - Updates on developments
 - The opportunity to respond to allegations / concerns
 - Support to raise questions or concerns about their circumstances

There may be limitations on the amount of information that can be shared at a particular time in order not to prejudice any Enquiry / Investigation or place any adult or child at risk. This must be agreed following consultation with the Local Authority Adult Safeguarding Operations Manager.

There may also be occasions where there is a need to agree changes to the Person's working arrangements or to the support provided; any changes should be reported to the Local Authority Adult Safeguarding Operations Manager / LADO.

If the Person is a member of a Union or Professional Association or Network, they should be advised that they may wish to seek support from that organisation. The Person may also wish to seek independent advice regarding employment issues. Such advice and support should be supplementary to that provided by the employer.

5.3 Service Commissioners and Regulators

5.3.1 Service Commissioners and Regulators are expected to:

- Use their contract compliance and regulatory processes to ensure that service providers have the right internal policy and procedural frameworks and respond appropriately to manage risk in individual cases
- Monitor the activities of commissioned services in their compliance of this framework
- Record the information and decisions clearly, including the rationale for any decision made
- Maintain records in line with internal agency record keeping policies and requirements

[11] Paragraph 14.126 Care and Support Statutory Guidance

[12] Paragraph 14.127 Care and Support Statutory Guidance

Section 6: Case examples

Case example 1:

A 39-year-old woman is subject to longstanding domestic abuse risks from her partner. Children's Services become involved due to potential impact on the couple's children. As part of their assessment, they identify that the woman works as a care assistant in a care home for older people with dementia.

Children's Services consider the adult Position of Trust issues and framework. Children's Services are the information owner and consider whether they have a duty to make a disclosure to the woman's employer. Children's Services decide that disclosure is not proportionate in the situation – the woman is in a very difficult domestic situation, is engaging well with Children's Services to take steps to protect her children, and there is no evidence that either she or the abuse in her relationship would pose a likely risk of harm to the adults in the care home where she works.

Children's Services have a discussion with the woman and inform her that they will not be disclosing information to her employer but encourage her to tell her employer herself. The woman agrees to inform her employer about her home situation so that her employer can make a risk assessment and provide support for her in the work environment.

Case example 2:

A doctor employed in an NHS hospital is arrested by police for historical child sex offences. The doctor works with a range of adults in their role, some of whom will have needs for care and support.

The police are the information owner and decide they do need to disclose the information to the NHS Hospital Trust as the employer of the doctor. The police inform the NHS Hospital Trust about the arrest for historical child sex offences and notify the CQC as regulator and the local ICB as the commissioner of the hospital trust.

The NHS Hospital Trust acts on the information and decides to suspend the doctor immediately. Their disciplinary process is placed on hold while the police investigation progresses.

Case example 3:

Calderdale Council receives an adult safeguarding referral from a neighbour of an older woman. The concern relates to allegations that the woman's daughter is abusing her mother physically and emotionally.

Calderdale Council makes enquiries under section 42 of the Care Act, and as their enquiries progress, they find out that the daughter lives in York and works as a carer for a homecare agency serving people in that area

Calderdale Council is the information owner and decides that – due to the nature of the treatment alleged, that the daughter works with people of a similar age to her mother, and that she works unsupervised with people in their own homes – that they do need to disclose the information and allegations to the daughter's employer.

By this stage of their enquiries, the daughter is aware that concerns have been raised about the way she treats her mother, so Calderdale Council tries to engage directly with the daughter to provide her with an opportunity to disclose to her employer, or to gain consent to share the information. The daughter refuses to engage, so Calderdale Council informs her they are sharing the information without her consent and make the disclosure directly to the registered manager of the homecare agency.

Calderdale Council notifies City of York Council (CYC) and the CQC. CYC and the CQC can follow up the issue with the homecare agency (under contract compliance/regulatory processes) to gain assurance that the agency has risk assessed the issue properly and managed any identified risk to users of the service.

Appendix 1: Questions to Assist in Decision-Making Regarding Disclosure to the Employer

The overall picture must be considered in decision making and decisions must be made on a case-by-case basis. The list below is not exhaustive.

1. **Does the person work in a setting where there are or are likely to be adults at risk?**
2. **What type of access to adults does the person have?**
3. **How frequently does the person have access to adults at risk?**

Examples:

The person may work for a Health or Social Care provider but be based in a different location from service provision, in a post which has no contact with adults at risk.

The person should be encouraged to disclose to their employer, but disclosure to the employer cannot be made under information sharing about abuse of Position of Trust as no adults are at risk.

Alternatively, the person may have regular contact with adults at risk, not necessarily in a caring role but in the role of cleaner, cook, hairdresser, caretaker or gardener.

If the allegation involves violence, sexual assault or financial / sexual exploitation, there is cause to be concerned that the person may use this position to harm adults at risk. Disclosure to the employer must be considered.

The person may be working directly with adults at risk in an unsupervised setting. Any concern could prompt disclosure as the circumstances in which the person works may increase the risk of harm to an adult at risk.

4. What is the severity of the allegation?

Under most employers' codes of conduct a person in a Position of Trust should inform their employer of arrests or convictions for criminal offences. The person should be encouraged to do so as soon as possible and their disclosure to the employer followed up by the local authority Operations Manager with their knowledge. However, some arrests or convictions, including crimes of domestic abuse, physical and /or sexual violence may need to be disclosed immediately to the employer in order to minimise the possibility of further harm.

5. What would the impact be on an adult at risk if harm were to occur?

The individual or group worked with and their specific vulnerabilities to harm need to factor into any decision. Assumptions must not be made. For example, a person who has perpetrated a sexual assault on a young person may well assault older people too.

6. Likelihood of reoccurrence?

Does the information gathered appear to indicate a one off, and minor event? For example, a Police report of rowdy behaviour at the address of a person during a late- night birthday party, with no other incidents recorded.

Use of alcohol or drugs may be reported by the Police or other professionals. Whilst there may have been no criminal convictions there may be a pattern of behaviour which will begin to impact on the person's place of work and adults at risk. For example, if the person concerned is an unsupervised nurse who works a night shift the need to disclose to the employer will be urgent.

7. Does the incident relate to them as a victim or perpetrator?

Reports are sometimes made which concern a person who is the victim, often of domestic violence. If other agencies, including the Police, are supporting the person they will need to work with the local authority Operations Manager to assess whether the perpetrator of abuse could pose any threat to the person at work as well as supporting the person to disclose to their employer the need for support at work.

If there is no agency currently supporting the person, the person may need to be approached directly by the Local Authority Adult Safeguarding Service. Victims of domestic abuse will not require a safeguarding response if they are not meeting the criteria for adult at risk – however there is a duty of care to support the person.

Appendix 2: The Employer / Student Body Risk Management Arrangements

The following outlines considerations in responding to an assessed risk. This summary of issues is not exhaustive and other responses may be relevant depending on the circumstances of each case.

Review of Working Arrangements:

The possible risk of harm posed by a person in a Position of Trust to adults with care and support needs will need to be assessed and managed effectively, considering the nature and seriousness of any allegation, harm to any patients / service users, and the risk of repeated incidents / ongoing behaviour.

In some cases, the employer will need to consider suspending an employee. Suspension should not be viewed as a form of sanction. It is a neutral act and does not imply guilt. People must not be suspended automatically or without careful thought with the correct processes being followed to support accountable decision making. Employers must consider carefully whether the circumstances of a case warrant a person being suspended until the allegation is resolved. If the person is suspended, the employer must make arrangements to keep the individual informed about developments in the workplace.

Suspension should be considered in any case where there is cause to suspect:

- Adults with care and support needs are at further risk of abuse or neglect
- The allegation warrants investigation by the police or is so serious that it might be grounds for dismissal
- The presence of the person in the workplace will interfere with the enquiry / investigation process.

Suspension may not be required where there are appropriate alternatives. This may sometimes include changes to working arrangements, such as working in a non-patient / service user contact role whilst the allegations are being investigated. The potential for alternative working arrangements will be determined by the nature of the organisation's structure and services and HR policies and procedures.

Advice should be sought from HR advisors and / or employment lawyers who may assist with finding alternative arrangements to suspension. The employer cannot be required to suspend any employee by a Local Authority, police or other agency.

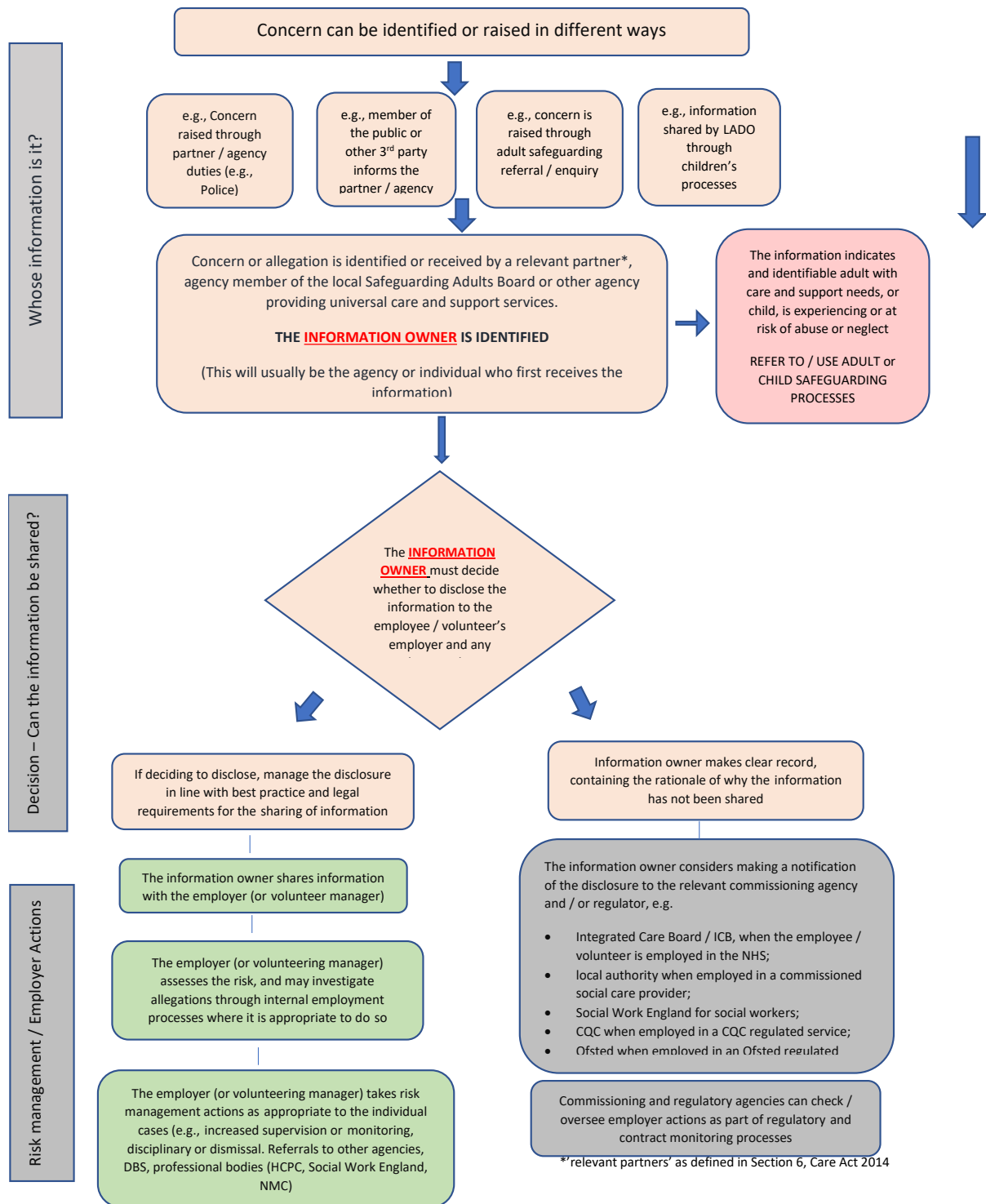
Where a person is suspended, they are entitled to know in broad terms the reasons for the suspension. Whilst an individual has the right to respond to allegations or concerns raised, this must be at an appropriate time and care

should be taken to ensure information is not shared at the point of suspension that may prejudice a subsequent enquiry / investigation or place any person / adult at risk in additional risk.

Where, on conclusion of a case, it is decided that a person who has been suspended can return to work this process should be carefully managed. The employer should consider what help and support might be appropriate e.g., a phased return to work and / or provision of a mentor, and how best to manage the employee contact with the adult concerned, if still in the workplace.

Appendix 3: Adult PiPoT Processes:

Managing Concerns and Allegations Against People who work with Adults with Care and Support Needs
 Figure 1 - Process for dealing with the concern about the person in a position of trust



Appendix 4: Referral Form For a PiPoT:

Calderdale Person in a Position of Trust (PIPOT) Referral Form

Please use this form to share information relating to allegations against people who work in positions of trust (staff, volunteers and carers) with adults who have care and support needs.

A referral should be made if there is reasonable cause to believe that a person who works with adults who have care and support needs has:

- Behaved in a way that has harmed an adult with care and support needs, or may have harmed an adult with care and support needs
- Possibly committed an offence against or related to an adult with care and support needs
- Behaved towards an adult with care and support needs in a way that indicates they may pose a risk of harm to adult with care and support needs.

There are occasions when incidents reported may not be regarding behaviour towards an adult with care and support needs – i.e Domestic Abuse – however, may indicate that the PIPOT may pose a risk to adults with care and support needs

Please send completed referral forms by email to the Safeguarding Adults Team:

Safeguarding.Adults@calderdale.gov.uk

1) Referrer's Details

- Date of referral [Click or tap to enter a date.](#)
- Name of the person completing this referral [Enter name here.](#)
- Position or role [Enter position or role here.](#)
- Organisation or service [Enter organisation or service here.](#)
- Phone numbers [Add phone numbers here.](#)
- Email address [Add email here.](#)

2) Details of the person of concern (PIPOT)

- Full name [Enter name here.](#)
- Date of birth [Click or tap to enter a date.](#)
- Gender [Click or tap here to enter text.](#)
- Home address [Click or tap here to enter text.](#)
- Does the PIPOT have care or support needs? [Choose an item.](#)
If yes, please provide more detail [Click or tap here to enter text.](#)
- In which sector is the PIPOT employed (e.g. local authority, health, voluntary sector)
[Enter work sector here](#)
- PIPOT's occupation / job title / role [Enter occupation, job title or role here.](#)
- Employer's name address and phone number [Add employer's details here.](#)
- PIPOT's work address [Enter PIPOT's workplace address here.](#)
- Employment start date (if known) [Click or tap to enter a date.](#)

3) Reason for the referral

a) In your opinion, what nature of the alleged harm. Please mark below:

Conduct outside work	<input type="checkbox"/>
Discriminatory abuse	<input type="checkbox"/>
Domestic abuse	<input type="checkbox"/>
Financial or material abuse	<input type="checkbox"/>
Inappropriate behaviour at work	<input type="checkbox"/>
Modern slavery	<input type="checkbox"/>
Neglect or acts of omission	<input type="checkbox"/>
Physical abuse	<input type="checkbox"/>
Psychological abuse	<input type="checkbox"/>
Sexual abuse	<input type="checkbox"/>
Sexual exploitation	<input type="checkbox"/>
Other (please describe)	<input type="checkbox"/>

- b) Is the PIPOT aware of the allegations and the referral? [Choose an item.](#)
- c) Provide a full description of the allegation and concerns [Enter details of allegations and concerns here.](#)
- d) Please provide any further information (e.g. dates, times, witnesses etc) [Add any further information here.](#)

4) Does the adult have any role with children or vulnerable adults (if so, in what capacity)

Child / adult details:

Name	Date of Birth	Location
Enter name	Choose date	Enter location
Enter name	Choose date	Enter location
Enter name	Choose date	Enter location

5) Action taken by the employer to date to manage the alleged / identified risk

Please include the following information with as much detail as possible, including names / role / contact details:

- a) Have you informed the police? [Choose an item.](#)
- b) Which regulatory bodies have you informed (e.g. Social Work England, CQC, GMC) [Enter details here.](#)
- c) Has a referral been made to The Local Authority Designated Officer (LADO)? [Choose an item.](#)
- d) Have you informed your HR team? [Choose an item.](#)
- e) Name and role of the person supporting the PIPOT [Enter name here.](#)
- f) Please give any further information [Add any further information here.](#)

6) Alleged victims

Name	Date of Birth	Gender	Ethnicity (if known)	Disabilities (if known)	Address	Legal Status (CoP/DoLS)	Details of IMCA / Advocate / carer support
Enter name	Choose date	Enter gender	Enter ethnicity	Enter disabilities	Enter address	Enter status	Enter details
Enter name	Choose date	Enter gender	Enter ethnicity	Enter disabilities	Enter address	Enter status	Enter details
Enter name	Choose date	Enter gender	Enter ethnicity	Enter disabilities	Enter address	Enter status	Enter details

Thank you for completing this referral form, you will receive an initial response within 24 hours of receipt of your referral (Monday – Friday)

How your information will be used / shared

The Care Act 2014 requires Safeguarding Adult Boards to agree and establish a framework and process to respond to allegations against anyone who works (either paid or unpaid) with adults with care and support needs.

The guidance applies to the local authority, all partner agencies and commissioned services to enable a proportionate and appropriate response to allegations against an employee, volunteer, student etc who works with or cares for adults with care and support needs.

Other procedures or guidance are available which refer to concerns about the quality of care or practice or complaints.

Information contained within this form will be used during the management and oversight of allegations against people who work with adults with care and support needs.

The information provided may be shared within the council and other departments as appropriate, for example the LADO or HR. The information may also be shared with relevant third party organisations include the police, health, voluntary agencies, independent providers of care and support, regulatory bodies such as the Disclosure and Barring Service (DBS), Social Work England, General Medical Council (GMC) etc.

Sharing will only be carried out where necessary and proportionate and where there is an identifiable legal basis for doing so.

Acknowledgements

With thanks to the Devon Safeguarding Adults Partnership, West Midlands Adult Safeguarding Editorial Group, who produced the South-West Region Adult Position of Trust framework which has been adapted to produce this protocol for Calderdale Safeguarding Adults Partnership. Thanks also to Cornwall Safeguarding Adult Board who has provided additional guidance to support decision making contained as appendices within the protocol.