## SOLIHULL LOCAL PRACTICE GUIDANCE No 19

## **Protection Plans**

Working Together to safeguard adults in Solihull

## 19.1 What is a Protection Plan?

The purpose of a protection plan is:

- Stop the abuse or neglect that has occurred
- Remove risks and prevent further abuse or neglect
- Minimise risk or keep the risk of abuse or neglect at a level that is acceptable to the person being abused or neglected and the agencies supporting them
- Support the individual to continue in the risky situation if this is their choice and they have the capacity to make that decision
- Monitor situations where a person declines/refuses to engage but the risks are deemed to be high or
- Support anyone who has been abused or neglected to recover from that experience.

A protection plan will <u>not</u> include any outcomes related to:

- the person causing harm
- general issues for the service provider
- policies, procedures or practice.

Protection plans are person specific – other actions to safeguard adults at risk such as changes to an organisations procedures, referring staff unsuitable to work with vulnerable people etc must be recorded as action in Case Conference minutes but NOT within an individual personal protection plan.

## 19.2 When will a Protection Plan be put in place?

A protection plan can be put in place at any stage of the Safeguarding Adults procedures:

- **Referral stage** this is usually when an emergency protection plan is implemented.
- Strategy discussion or meeting stage
- Investigation stage
- **Case conference stage** this is normally the stage at which a protection plan is agreed.

# 19.3 When MUST a Protection Plan be put in place or considered?

A protection plan MUST be developed when:

- Its is believed someone has suffered significant harm
- It is believe some is likely to suffer significant harm
- When the risk assessment harm category Red 9.
- Individuals are the victim of repeat safeguarding incidents

### 19.4 When SHOULD a protection plan be considered?

A protection plans SHOULD be considered when:

- It is believed someone has suffered harm
- It is believed someone is **likely** to suffer harm
- When the risk assessment harm category is Amber 5-8.

#### **19.5** Protection plan roles and responsibilities

Someone must be identified to oversee the plan. Generally this will be the individual's social worker but can be someone else.

Everyone with a protection plan must have a named social worker.

The individual's allocated social worker is responsible for ensuing the protection plan is implemented and reviewed at the required frequency based on the risk assessment. If the protection plan is not effective in eliminating or reducing the risks or abuse then a review should be convened. They are also responsible for ensuing the protection plan is clearly recorded on Carefirst.

The social workers Team Manager is responsible for chairing protection plan review meetings and signing off protection plans.

All agencies or individuals identified in protection plans are responsible for implementing their area of the plan, feeding back areas of concern or requesting an early review if the need is identified.

#### **19.6 Developing protection plans**

The protection plan must set out what needs to be done, why, when and by whom.

Protection plan must be proportionate to the risk and will be unique to the different types of abuse or neglect.

Protection plans may have a number of inter-related components:

- Actions to make the adult at risk safe
- Actions to support carers to continue to care
- Actions to monitor risky situations.

The individual subject to the protection plan must be fully involved in the development of it unless they are assessed as not having mental capacity to do so.

Where the individual is assessed as not having mental capacity to participate in the development or acceptance of the protection plan – Best Interest principles must be adhered to. Also an IMCA must be instructed whether or not the family or friends of that person are actively involved with them.

Actions to protect a person should firstly consider making changes to the behaviour of the person causing the abuse or neglect. Changes to the daily life of the person at risk should be kept to a minimum unless there are no other options or unless they themselves see such changes as the best option.

Any actions taken to protect a person that involves a change to the level of services they will receive or where they live must be carried out with that person's consent or as a Best Interest decision.

Any actions taken as part of the protection plan must be proportionate to the risk of abuse or neglect.

If any person does not have mental capacity and may be affected by the Deprivation of Liberty Safeguards as part of the protection plan, then the process for making a DoLS application must be followed.

When a protection plan is developed the multi agency meeting MUST agree who else should be informed of the plan. The organisations or individuals who may need to be informed could include:

- providers of services
- the individuals GP
- the police
- local hospital
- landlord
- children's services etc.

## **19.7 Procedure if a protection plan is refused**

If it is identified that a protection plan is needed but the individual (with capacity) refuses the protection plan the following must be followed:

- Multi agency meeting should be organised to explore all possible ways to engage with the individual.
- The case must not be closed just because the individual is refusing to accept the protection plan. Legal advice should be taken if required.
- The risk assessment must take account of the individual decision to refuse the plan which may mean senior managers accept responsibility of the risks.
- The plan should be amended to require regular monitoring/contact to enable the individual to change their decision and accept a plan and to identify any change in the situation.
- The individual's refusal to accept a protection plan must be fully recorded as must a mental capacity assessment.

## **19.8 Procedure if a protection plan is cancelled**

If a protection plan is agreed and put in place but subsequently it is cancelled by the individual or another person the following must be followed:

- It must be established who is cancelling the protection plan and why.
- A multi agency meeting must be organised to explore why the plan is being refused, what the risks are and how ongoing engagement with the individual can be achieved.
- The case must not be closed just because the individual or another person is cancelling the protection plan. Legal advice should be taken if required.
- Immediate action may be required if the alleged person causing harm is cancelling the plan.
- A new risk assessment must be carried out and senior managers may be required to accept responsibility of the risks.

• The notification that a protection plan is being cancelled must be fully recorded and if the individual is cancelling the protection plan, a mental capacity assessment must be undertaken and fully recorded.

## **19.9** Reviewing Protection Plans – (Stage 6)

When the protection plan is first set up and at subsequent reviews the frequency of review will be agreed. It should be no less than every 6 months. Situation that have been identified as HIGH RISK using the Safeguarding Adults risk matrix should set a review date at no less then 3 months.

The purpose of the review is to ensure that the actions agreed in the protection plan have taken place and whether any further action is needed.

If the protection plan is not protecting the person at risk, a review should take place as soon as possible. Where abuse is escalating this must be taken as a sign of serious risk.

The Team who had lead responsibility for the original Safeguarding process will organise and chair the review meeting.

A review can be brought forward at the request of the person at risk, someone acting in the best interests of a person at risk who does not have mental capacity to request a review, anyone involved with the current protection plan or any of the people who were invitees to the original case conference.

If there are new concerns of abuse or neglect e.g. about different types of abuse or from a different cause these should be considered as a new alert/referral.

The review should be attended by all those involved in the current protection plan and any services that may be able to provide changes.

#### The review should:

- Always include the adult at risk of abuse unless it is not safe to do so. The person at risk must be supported to take a lead in deciding whether the protection plan is working and given information about other options that may improve it.
- Ascertain the adults at risks feedback before the review meeting if it is not safe to invite them.

- Included and invite the person acting in the best interest of the adult at risk who lacks capacity. If the person does not have mental capacity to make decisions about the protection plan then an IMCA must be instructed and they should represent their views at the review.
- Include the adult at risks carer if consent from the adult at risk has been ascertained and they are not the person causing the harm.
- Decide responsibility for ongoing management of the protection plan (if needed).
- If it is known that the protection plan will need to be changed at a particular date (e.g. when the person who caused the harm is released from prison) then a date should be set to review the plan before that happens in time to meet that contingency.
- There may be some information about the person causing the abuse that the adult at risk does not have the right to hear e.g. past criminal offences in which case that information must be shared before the person joins the meeting and a decision made about what, if any, of that information can be shared
- It may sometimes form part of a protection plan to involve the person who has caused the abuse or neglect to attend the review meeting. This must only take place with the explicit consent of the person who has been experiencing abuse/neglect. If the person at risk does not have mental capacity to give such consent an IMCA should be instructed to decide in their best interests.
- The chair of the review must ensure minutes of the meeting are made and the revised protection plan is sent to all organisations that have a role in the protection plan. Unless this would put them at greater risk of abuse a copy should also be sent to the individual at risk and with the individual's consent it can also be sent to another person e.g. a carer. If the individual does not have mental capacity to give that consent a best interest's decision should be made. Where there is information that cannot be shared with them e.g. about the person alleged to have caused harm this should be deleted before being sent.
- If the minutes and protection plan cannot be sent to the person or their representative – e.g. because this would put them at greater risk - a person from one of the agencies must be designated within the protection plan to ensure that the person receives feedback about the decisions that have been made and given the

chance to make their views about this known.

- If relevant a person from one of the agencies must be designated within the plan to give direct feedback to the alleged person causing the harm this must be done within the boundaries of any ongoing or proposed investigation and with due regard for the alleged person causing harm Human Rights. If the alleged person causing harm does not have mental capacity to understand the feedback this will be given to the person acting in their best interests. If the suspected abuse has taken place in the course of a person's employment then the feedback will normally be given by their employer. Care must be taken not to share information that could increase any potential risk.
- Decide whether or not a further review is needed and if so to set a date.

## 19.10 Closing a Protection Plan – (Stage 7)

The Safeguarding process will be closed if there is no longer a need for a protection plan or if the protection plan has been incorporated into other case management processes.

If a case is closed but later the risk increases or abuse or neglect occur then a new alert/referral should be made.

All organisations and individuals involved with the adult at risk should be notified when a protection plan has ceased and the Safeguarding Adults procedures closed.

#### 19.11 Tools and checklists

The following pro-forma's, checklists, aide memoirs and specific agency procedures are contained within Solihull's Safeguarding Adults Toolkit and have been produced to help staff with all the different stages and assessments in the Safeguarding Adults Procedures.

- Organising a protection plan review meeting checklist
- Protection plan review agenda aid memoire
- Example letter to GP notification of a protection plan
- Example letter to GP notification of a protection plan review
- Example letter to GP informing a protection plan has ceased
- HEFT notification of a protection plan procedure.