## **CONSULTATION QUESTIONS**



This consultation questionnaire sets out the consultation questions from within the relevant sections of the revised Adult Support & Protection Code of Practice.

The revised Code of Practice is a larger and more comprehensive document than the original Code and we welcome your views on any of the changes made. In particular, we would appreciate your views on the following matters.

Please insert your response to the questions in the text boxes provided.

### **Question 1: Chapter 3**

This chapter of the Code sets out the principles of the Adult Support and Protection legislation and the definition of an adult at risk.

Does this chapter help in your understanding of the legislation and whom it applies to?

If not, what changes would you suggest?

Comments Broadly it does improve understanding but it doesn't set out whose responsibility to act and when.

Sections regarding those with addictions and transitioning YP welcome. I remain concerned however regarding the view point that ASP would not normally apply to those suffering from addictions (unless additional disability/mental health/ARBD) continues to put this group at risk of harm from failure to act in a timely fashion.

Highlighting the need to make further/new inquiries with each new referral regarding an individual under ASP may go someway to ensure that some action may be possible with deteriorating health but it is a shame that the act doesn't really support early intervention...

As regards YP the changes afford them the chance of ongoing support under the act and the clarity here is important to help prevent a YP "falling under the radar".

# **Question 2: Chapter 5**

This chapter of the Code considers the principle of ensuring full regard is given to the wishes of the adult, and ensuring that the adult participates in decisions as fully as possible.

Does this chapter adequately covers the issues arising from ensuring as far as possible full participation by adults in decision making?

If not, what changes would you suggest?

Very comprehensively discusses the importance of involving the adult concerned and ways in which ensure this is best done.

## **Question 3: Chapter 6**

This chapter includes new guidance on large scale inquiries. Does this provide sufficient clarity for this type of inquiry or are there additional matters you would wish considered?

Commentsyes, in addition the guidance regarding the non participation of an adult at risk is also clear....investigations are still required and the importance of considering different legislation in order to safeguard the adult is also highlighted.

# **Question 4: Chapter 11**

This chapter is a new addition to the Code and considers a multi-agency approach. Does this provide sufficient clarity and support for your organisation in handling multi-agency assessments and practice?

Are there other matters that you consider should be included in this chapter?

CommentsUseful guidance on the need for multiagency involvement and how best to ensure that adult is part of the process, clear guidance regarding chairing and minuting meeting should help ensure that appropriate records are kept. The standards laid out in para 7 could be used to audit the functioning of meetings in each council area.

#### **Question 5: Users and Carers**

The Code seeks to develop and articulate good practice as regards service user and carer involvement, particularly in chapters 5 and 16. Does it succeed in this? If not please suggest ways in which this area could be improved on.

I think it sets out to achieve this, yes.

#### Question 6:

Do you consider this revised Code of Practice will enable you to carry out your professional responsibilities effectively? Please feel free to comment on any areas of the Code which you consider could be improved in any way.

Yes it does, the consideration of specific groups (YP and those with Addictions) is helpful

BUT I feel that specific guidance/examples around GBV issues ,particularly domestic abuse would be helpful. Eg a woman who is controlled in an abusive relationship would not come under the auspices of this act unless she is affected by a disability/mental health impairment.

Adults controlled in this way will not be able to safeguard themselves and could benefit from support through this act eg use of barring orders, however the tight definitions will continue to exclude highly vulnerable adults from such support.

# Any further comments