

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?

The code of practice is clearer with regards to outlining the principles. The expansion on guidance for those who have problematic alcohol and drug misuse is particularly helpful. However the definition of safeguard is very closed, this is probably due to use of the dictionary definition of 'safeguard'.

Within this chapter guidance is provided for risk assessments and large scale inquiries. The guidance in this area is very limited and refers to the need for local procedures rather than providing a national framework for these two areas.

The last point in relation to Chapter 1 is the guidance given relating to transition. Again the guidance in this area is very limited and is still not clear regarding the status of young people age 16-18 on children's hearings supervision orders. It is considered that more clarity in this area is required.

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?

The guidance in this area strengthens the need to consider advocacy at each stage in the process. This chapter also references resources that can be utilised to involve the adult at risk.

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?

The insertion of guidance on the large scale inquiries is very limited. It does not provide any detailed guidance in this area. The proposed code outlines the need for local procedures/CHCP to have a protocol to use with large scale inquiries and have a mechanism to gather information about concerns. However it provides no guidance beyond this. It would have been beneficial to have the national guidance in this area. Particularly as there is other cross boundary issues in these areas. Defining a large scale inquiry and large scale investigation would have strengthened local protocols. It would also have been useful to outline the responsibilities of partner agencies in such processes e.g. Care Inspectorate.

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?

The guidance is useful in highlighting the importance of multi-agency decision making. However the guidance is very limited and refers to need for local multi-agency procedures in this area. This does not provide further guidance than was provided in the previous code of practice. It would have been useful to develop the code for other agencies i.e. health colleagues etc. This would assist Council Officers and other agencies involved in ASP processes.

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.

The code is clearer with regards to this area. The rights of and the need to involve clients and carers in the process is threaded throughout the code.

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.

The code is an improvement in providing guidelines to carry out professional duties. The areas that could be improved are to provide more detailed guidance for the issues of transition and large scale inquiries. It would have also been useful to develop the guidance on risk assessment and risk management.

Lastly it would have been useful to define what an inquiry is and what an investigation is as this continues to be unclear.

Any further comments

While the change in legislation has made it possible for NHS staff to be the lead officers in ASP investigations, this continues to be an area that the APC considers concerning, for example if the lead officer is a NHS staff member who is responsible for providing legal advice and are they appropriately skilled to deal with this.

The code of practice makes specific reference to the role of the care inspectorate. In particular, it suggests that the care inspectorate 'may' nominate someone to attend the APC. We are concerned that this is not happening routinely and that the government should consider sending a clearer message with regard to the interface between ASP/APC's and the care inspectorate. We also believe that more robust guidance concerning the care inspectorate's role in investigations would be helpful. This is an area where there is on-going ambiguity.