Safeguarding Adults where a Crime may have been committed.

1. INTRODUCTION

The guidance supplements the London Multi-Agency Adult Safeguarding Policies & Procedures (November 2025) also the Department of Health Care and Support Guidance.

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The Care Act 2014 states:
'Everyone is entitled to the protection of the law and access to justice. Behaviour which amounts to abuse and neglect, for example physical or sexual abuse or rape, psychological abuse or hate crime, wilful neglect, unlawful imprisonment, theft and fraud and certain forms of discrimination also often constitute specific criminal offences under various pieces of legislation. Although the local authority has the lead role in making enquiries, where criminal activity is suspected, then the early involvement of the police is likely to have benefits in many cases.' (Care Act 2014, section 14.70).

2. Emergency situations.

In all emergency situations where a crime is currently being or about to be committed, the person raising the concern should call 999 immediately. An emergency is defined as:

- A situation where life and limb is at risk
- A situation when an unknown suspect / alleged perpetrator might escape
- A situation where there is a need to preserve forensic evidence.

If there is any doubt about whether there is an emergency, call 999 and seek Police advice. Staff in frontline or caring roles should be empowered to dial 999 in an emergency without seeking prior approval from any other person.

In all non-emergency situations then 101 should be called – the system will then direct you to the local Police (the Metropolitan Police when calling from Enfield) so you may have to specify if you need to speak to Police from another area.

3. Police Involvement when a Safeguarding Concern is first received.

All safeguarding concerns should be considered as to whether they are a crime and require action by the Police. If it is clear that a crime has been committed, there is a public interest, or in alleged domestic

violence where there is an emergency, these can be sent immediately to the Police for discussion. Staff should also consider their own safety in these cases in terms of any home visits – considering joint visits with colleagues or partnership agencies.

The only way to report a crime is via calling **101** or by dialing **999 in an emergency.** There are some online routes for specific crime types here Report a crime | Metropolitan Police

Any time you contact the Police switchboard then you will be given a CAD (Computer Aided Dispatch) number – please take a note of this number as it will allow you or another member of staff to follow-up at a later date. Please also note the name and contact details of the officers that you speak to.

To request Police assistance with an enquiry or to discuss if something is a potential crime then you can also call **101** or send the concern through to the Police Officers who sit with the Multi-Agency Safeguarding Hubs (if you do not have the contact details for this team then please contact MASH or the Strategic Safeguarding Adults Team).

In cases where a crime has been committed, consent should be obtained from the adult at risk to send the concern to the police – if at all possible. It is important that the individual leads in identifying their desired outcomes and feels that their views have been respected and taken into account. However, you will also need to consider their mental capacity to make this decision and if there is a public interest or vital interest concern.

The Multi Agency Safeguarding Hub, or another relevant adult social care team holding the enquiry, should aim to undertake initial conversation with the adult at risk on the same day as the concern is received – as long as safe contact can be arranged. These discussions should include if the adult at risk wishes Police to be informed. It is important to be clear about the limitations of a Local Authority Enquiry as opposed to a criminal enquiry during these discussions – for example the Local Authority do not have power of arrest/ prosecution.

It is not the job of a Local Authority employee to make a judgement about if allegations of crime are true or likely. If an allegation is made of something that would amount to a crime then Police referral must be considered.

If the Enquiry Officer and SAM feel that there is sufficient public or vital interest (or concern about mental capacity) that they will have to inform Police, despite the Adult at Risk not wishing this, then this decision needs to be carefully communicated and explained to the adult unless there is a risk in doing so. If an adult at risk does not want any action to be taken this does not preclude the sharing of information with a relevant professional colleague on the basis of mitigating risk.

It may be that an adult at risk changes their mind about Police involvement at a later date and they should be supported in this. Professionals should also make it clear to service users how they would be supported throughout a Police investigation – for example a suitable person could accompany them to Police interviews etc – as the adult at risk may be intimidated. It may also be that an officer would be available to discuss the process and advise prior to a formal report but this needs to be discussed with officers at the time and in relation to the specific circumstances.

It is a guiding principle for adult social care staff that adults at risk who have been abused should be supported to get justice and redress as much as possible.

In any case where it is alleged that an adult has died due to abuse or neglect, no matter what credence the individual staff member places on that allegation, this must be discussed with Police as soon as possible.

4. On- going Police Enquiries & Communication.

When Police are investigating a case then you should be given a reference number and the details of the Officer in the Case (sometimes referred to as the OIC). It is the responsibility of the Officer in the Case to

keep you updated so please correspond with them directly (and be aware that they may be working unusual shift patterns that mean you may need to wait for a response).

It is important when there is an on-going Police enquiry that you receive regular feedback on how it is progressing. It can be helpful to agree with the Officer in the Case how and how often you will be updated (or at least when next). This could be via in-person or virtual meetings or e-mail updates. The regularity of this will greatly depend on the complexity of the enquiry. The OIC should also be updating the adult at risk but it may also be useful to discuss this with them – it may be more appropriate for you to update them or for an advocate to be updated.

The Officer in the case may also require your assistance with a number of issues, such as capacity assessments and communication aids as well as historical records. On occasion, though not often, it has been helpful to have a social worker attend a meeting with the Criminal Prosecution Service to discuss specific specialised elements of a case (for example where issues of mental capacity come into play or understanding the impact of neglect). Staff should support Police Enquiries in any way that they can.

Escalation where there is lack of feedback or disagreement.
If you have attempted to contact the OIC a number of times with no response then you may e-mail the Police Officers within MASH to escalate.

If you have made multiple attempts to get in touch with the OIC and MASH Officers have also prompted without response, then please get in touch with the Safeguarding Adults Board officers who will be able to contact the Police representative for the Enfield Safeguarding Adults Board for an update.

If there is concern about the decisions made by Officers in the case or by the Crown Prosecution Service, then this also can be escalated through Board Officers. In order to support such decision making from the start, it is important that Police colleagues are offered all information and support around understanding the capacity and communication needs of the adults involved.

The Strategic Safeguarding Adults Team and Operational Team managers meet monthly with a DS from the North Area, Metropolitan Police, to ensure information sharing about cases where either agency is concerned. If you have struggled to receive an update about a case or wish to discuss Police decision making about a case – and have not been able to get a response from the OIC – then please discuss attending this meeting with your team manager.

5. Interaction between Police Investigations and Safeguarding Adults Enquiries.

Police investigations can continue alongside the Safeguarding Adults enquiry. Please refer to London Wide Adult Safeguarding Policy & Procedures 'Stage 2: Enquiry'. A multi-agency approach should be agreed to ensure that the interests and the personal wishes of the adults will be considered throughout, even if they do not wish to provide any evidence to support a prosecution. The welfare of the adult and others, including children, is paramount and requires continued risk assessment to ensure the outcome is in their interests and enhances their well-being.

It should be remembered that the aims of a Safeguarding Adults Enquiry under Section 42 (2) are:

- Establish the facts;
- Ascertain the adult's views and wishes and preferred outcomes;
- Assess the needs of the adult for protection, support and redress and how these might be met;
- Protect the person from the abuse and neglect, in accordance with the wishes of the adult where possible;
- Enable the adult to achieve resolution where possible.
- Wider potential risk to other adults to be considered

The SAM in the case will need to decide if a Police Enquiry will meet all these aims. Whilst the Police will take some actions aimed at enabling resolution and finding the facts of what happened – their enquiries will be limited to the investigation of crimes (whereas there may be allegations of abuse that do not meet the criminal threshold but nevertheless need to be considered) and will not necessarily cover all aspects of safeguarding planning. It may be that parallel enquiries need to take place – however, if this is the case

then careful planning needs to take place to ensure that the other enquiries do not compromise Police investigations.

It may be that Police are unable to prove an abuse as a crime beyond reasonable doubt or to the satisfaction of the Criminal Prosecution Service. For example, a financial abuse concern where the adult's capacity at the time is not able to be established or a neglect case where the threshold of 'wilful neglect' is impossible to prove. In these cases, the Local Authority still have an obligation to take safeguarding actions – an employee of an external or internal agency may still have committed misconduct and be subject to disciplinary processes and DBS reporting for example or you may wish to consider financial Deputyship on the basis of the adult's current mental capacity in this area. There may well be quality improvement issues for a provider to be addressed also.

Police closure of a case does not necessarily mean that there are no further actions for the SAM and Enquiry Officer. There should be evidence of internal discussion of any outstanding matters before closure. The Local Authority should not redo an enquiry that the Police have completed but there may be quality issues around a provider for example.

Police enquiries and the resulting court processes can take a long time – it may be that the SAM and Enquiry Officer decide to keep the case open whilst this is on-going in order to support the adult at risk and ensure that the safeguarding plan is regularly and appropriately reviewed. In other cases, the SAM and Enquiry Officer may be satisfied that the adult at risk is safe, and the safeguarding plan stable/ sufficient, so it would not be appropriate to keep the Enquiry open for this period of time. Where this decision is taken, it is important to feed back to the adult at risk and their representatives that they can still get in touch if they need require further support around court.

6. Information requests to Police

The Police are able to support enquiries lead by health and adult social care where a background check on the person alleged to have caused harm is required. All requests for background checks on individuals should be sent by email to the MASH Police Officers.

Please ensure that you include, in all such requests:

- All identifying information that you have that may help the Police identify the individual – for example name and aliases, date of birth and address as well as any reference numbers.
- A very clear explanation about what the reasons for requesting disclosure are – information is shared, in safeguarding, on the basis of reducing risk so details of the enquiry are important.

You can find ways to access information for members of the public and others here.

Please be aware that most employers review Disclosure and Barring Scheme clearances on a 3-yearly-basis and also that not all contacts with the Police will show on this (a case that is still being investigated or is in the courts will not show either – neither will cases that received a community resolution). Therefore, you may need to consider requesting a Police disclosure as well as a DBS check if you have specific concerns. More information on this may be found in the Allegations against Members of Staff Practice Guidance and Enfield Safeguarding Adults' Board's Persons In a Position of Trust (PIPOT).

Disclosures under 'Claire's Law' or the Domestic Violence Disclosure Scheme will be made directly to the individual deemed to be at risk (so the person in the relationship with the perpetrator). In order to make an application under the Domestic Violence Disclosure Scheme people should contact the Police. You can do this by:

- visiting a police station
- phoning 101
- speaking to a member of the Police on the street
- Or by going online at Request Information under Clare's Law.

Please see the Domestic Abuse Practice Guidance for more information on this.

If information sharing is required around cases that are relevant for either the MARAC (Multi-Agency Risk Assessment Conference - Domestic Abuse) or the Community MARAC then referrals to those meeting may also be appropriate. Representatives of the Police, Community Safety, Adults and Children's Social Care, Health and other relevant agencies attend these meetings to share information and risk assess.

The meeting usually referred to as MARAC relates to high-risk cases of domestic abuse. For further details of this, please refer to the Domestic Abuse Practice Guidance.

The second is the Community MARAC and discussions are held around cases which have some aspect of anti-social behaviour. These might include:

- Anti-Social Behaviour
- Drug/Alcohol fuelled behaviour
- Hoarders
- Mental Health Cases with an ASB overlap
- Complex Neighbourhood Disputes
- Repeat Callers to emergency services.

There is now also a specific Cuckooing MARAC to manage this specific problem.

If you require more information about the Community MARAC or the Cuckooing MARAC then please either check the Enfield Intranet or contact the Strategic Safeguarding Adults Team for the current Terms of Reference and referral form.

7. Missing People.

There is separate Missing Person's guidance that adult social care staff should refer to in these circumstances.

8. Requesting Police Support for visits to check on welfare.

The Police use a Right Care, Right Person approach to decide if it is appropriate for them to attend a home. Please ensure that you have tried all appropriate ways to check on the welfare of the adult before calling the Police.

It is possible to request that Police check on an individual if we are concerned about their life or limb and we have been unable to gain safe access to them. It may be that a relative is refusing access or there is something else considered unsafe about the home. These requests would need to be made via **101.**

It may be appropriate to Police to do a joint welfare visit so that social work or other professional skills can be used also.

It is very important to make these requests proportionately – Police will only visit if there is genuine concern about life and limb and will make all attempts to gain access when they do visit (for example forcing entry). This is a visit to check on welfare – Police will respond appropriately if they witness a crime, may call an ambulance and report on the condition of the person but they will not be empowered to take other actions without a specific order from the court.

For example, Section 136 of the Mental Health Act may be used by Police to take someone that they believe to have a mental illness to a place of safety (usually a specialised suite at a hospital) but it cannot be used to take someone from a dwelling or private area.

If the need is for an adult without capacity to be removed to a place of safety then Adult Social Care staff will need to make an application to the Court of Protection. Please consult with Legal Services and the

Mental Capacity Manager around such cases. The Court may grant an order that would give Police additional powers in a specific situation – but only within the principles of least restrictive option and best interests.

9. Connect referrals or Police Risk Assessments (PRAs).

Police will raise a Connect or Police Risk Assessment whenever they have contact with an adult that they believe to be vulnerable. This is not necessarily a Safeguarding Adults concern but may relate to taking the adult to a place of safety, the adult themselves being subject to an allegation or any other contact. A common example would be an individual who has had to be escorted home by Police when found wandering.

Connect referrals are also often raised after Mental Health interventions and therefore duplicate other recording which will already be present on RIO.

The Connect referrals are checked by an Officer within the Police and then sent to the MASH Operational Support Team. This team will then check Eclipse and RIO to establish which team the individual is known to (if known to any). Cases not known to another team are then sent to the Single Point of Access Team for review.

The Single Point of Access team or Mental Health Assessment Service will review to see if there is:

a) Any evidence of abuse or neglect (including self-neglect) – and if so raise a Safeguarding Concern.
b) Any evidence of a change in need that requires either a full assessment under Section 9 of the Care Act (2014) or advice and support.
c) Any evidence of a pattern which may affect the response.

Where both care needs and safeguarding needs are identified then the relevant teams will have a discussion (and record this on the relevant system) to determine the best course of action.

Some individuals have a high number of Police contacts and therefore Connect referrals. It is important to review these to ensure we are appropriately dealing with risk. We can do this by:

- Multi-disciplinary case discussions.
- Referral to an appropriate MARAC.
- Creating a Risk Assessment and reviewing when new contacts coming in.
- Discussion with the placing authority.
- Use of service-specific Police Liaison meetings.

However, it is important to note that a Merlin does not necessarily indicate that someone has been subject to abuse or involved in a crime and responses need to be nuanced and proportionate.

Where you have questions about a Merlin, please contact the Officer in the Case or the MASH Officers.

10. Support for Victims of Crime.

Please be aware that any person who has experienced crime may require support after the fact or with moving through the Criminal Justice System. This support should form part of your Safeguarding Plan for the individual.

It may be that a referral, or signposting, to Victim Support is sufficient. However, it may be that referral to agencies that support around specific types of crimes (for example domestic abuse) are more appropriate – there are specific Practice Guidance documents about Domestic Abuse, Sexual Abuse and Forced Marriage so please refer to those.

You should also consider if they have needs around advocacy (as with all safeguarding). This may also involve working with the Police to discuss communication or other needs around interviews. It is important to liaise with Police as soon as possible around these needs – this may prevent distress and assist Police

colleagues in achieving the best evidence possible in the case.

If a case comes to court then there may be a need for special measures where the adult at risk may be intimidated or require additional support. This could include video statements, screens in court or any number of adjustments.

A victim of crime may also become more anxious than usual and could in these circumstances be encouraged to discuss this with their advocate, carer or perhaps GP.

If there are specific things that they are anxious about – for example, no longer feeling that their home is secure or not wishing to have male staff members visit anymore then the Safeguarding Plan should try to address those things, where possible, e.g. by arranging home security visits or requesting female only carers.

11. Support for Alleged Perpetrators of Crime who are also adults at risk.

It is important that we support adults at risk within the criminal justice system to ensure that they are treated fairly and that the Police, Criminal Prosecution Service and others are fully aware of their needs. Many of the factors in section 10 apply to alleged perpetrators also.

This may include ensuring that the adult at risk has appropriate representation, supporting the Police by facilitating a mental capacity assessment in relation to interview etc etc.

Any risks relating to the individual themselves should be noted on the relevant case management system – making it absolutely clear what is proven fact and what is an allegation only. It is important to note that criminal prosecution occurs when something is proven beyond reasonable doubt and depends on a number of factors. Whilst it is vital that we are fair and non-judgemental in our work with adults at risk, it may be that a risk is identified to other adults at risk or to staff.
There is often some reluctance to report adults at risk to the Police for crimes – this can be for a variety of reasons, including that there is a risk of stigmatising or labelling the adult where they may not have acted with full knowledge of the consequences of their actions. However, this runs the risk of downplaying the impact of actions - thus hampering risk assessment and meaning that victims do not get redress or protection. It can lead an adult at risk to be unclear if their actions are illegal or not which can lead to repetition and escalation. Also, certain therapeutic services are only available if someone has been convicted.

There have been occasions where, for actions with a lower impact, Police have been able to meet with an adult at risk to discuss their behaviour and what risks it may pose. This could be considered and should be discussed with MASH Police Officers in the first instance.

12. Health and Safety prosecutions of registered providers

New regulations came into force in April 2015, widening the Care Quality Commission's powers to bring criminal prosecutions against care providers who are in breach of, or who fail to comply with, its Fundamental Standards (a number of which are related to health and safety issues). The CQC has become the lead inspection and enforcement body for safety and quality of treatment and care involving service users, in receipt of health or adult social care service, from a CQC registered provider. It should be noted, however, that the Health and Safety Executive may continue to prosecute CQC registered providers for health and safety matters involving workers, visitors and contractors.

CQC should be informed of all safeguarding adults concerns which occur in a registered setting as a matter of course. Details of the allegation, including name and postcode of the registered provider should be sent to safeguarding@cqc.org.uk as soon as it is received. You can also send to the named inspector if known but it is important to send to the generic Inbox so the allegation can be logged appropriately.

However, in addition, if you feel that there was a Health and Safety breach that may require CQC input then it is important to invite CQC to early discussions about enquiry planning. Where there is disagreement around which agency should take the lead, then the SAM should attempt to resolve this via an Enquiry Planning meeting. If there are further issues then they may escalate to their own Head of Service or the Head of Service for Safeguarding, Quality and Deprivation of Liberty for support.

It may be that the decision is for the Local Authority to complete their enquiry prior to action from CQC or that the Police and CQC undertake a joint enquiry for a time. It is vital to have these conversations early in order to establish how things will progress, who will keep the family informed and how the information sharing will be managed.

If CQC are considering a prosecution against a provider then a Need to Know for Senior Managers should be completed (so that all working with the provider are informed, because the circumstances are likely to be very serious and also because the information may become public at some point and may be of wider/media interest).

Examples where CQC have investigated and taken action include:

1) Where a service user with a history of sexual offenses was left unsupervised with another service user on multiple occasions which left them vulnerable to assault. The evidence was that proper care planning and risk assessment was not in place which was a breach.

   There was an allegation of sexual assault in this case which could not be prosecuted for evidentiary reasons.

2) Where a service user choked on an unsuitable food which shouldn't have been in reach. There is no evidence about who gave the individual the food but a wealth of evidence that staff were typically giving this person food that was unsuitable according to assessments and care plans. This case is still being investigated at time of writing.

In both these examples, Police and CQC worked together (after some initial fact finding by the Local Authority) until it was determined that the CQC should be the lead agency in the enquiry.

CQC will take action against a Provider and against the Registered Manager or Nominated Individual but will not progress prosecutions against individual care staff. It is always best to discuss cases where you think this might be relevant with the Inspector allocated to that service.

Health and Safety breaches in other settings can be discussed with the Health and Safety Executive.

13. Concerns about Scams and Rogue Traders.

People who have been the victim of scams or rogue traders are often reluctant to report for several reasons – including sometimes embarrassment. There should be discussion with the individual about the importance of reporting fraud to aid enforcement and protect others. As fraud is a crime, it can be reported to the Police like any other crime.

However, you may also want to consider these specialised

Enfield Trading Standards - trading.standards@enfield.gov.uk. Even if the individual does not wish to report formally, it can be helpful to Trading Standards if we report knowledge of where rogue traders are operating.

Action Fraud - https://www.actionfraud.police.uk/ - Action Fraud offers information about avoiding scams and an online reporting mechanism for fraud and cyber crime (amongst other things).

Which? have a webpage dedicated to how to get money back after being victim to a scam.

Citizen's Advice Enfield can also support adults with advice after they have been a victim of scams and with issues such as personal debt.

A referral to Victim Support may also be appropriate.

As with any other concern, there will be a need to consider how the adult at risk might be supported to keep themselves safe in future. Consideration may need to be given about how they were targeted for the scam – simple things such as notices saying that they will not buy and sell at the door might be put in place.

Many people who have mental capacity in the area of finances fall victim to scams each year as they can be very plausible. It is very important that we take care not to shame adults who have been victims of fraud. However, you may feel that a capacity assessment specifically around finances is appropriate – particularly if someone has been targeted due to a learning disability, mental illness or confusion. It may be that Power of Attorney or Deputyship could be considered to reduce risk.

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