

Multi Agency Public Protection Arrangements (MAPPA) Policy

Board library reference	Document author	Assured by	Review cycle
P128	Head of Safeguarding	Quality & Standards Committee	3 Years

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Introduction

This policy is to ensure that the Trust complies with the National MAPPA guidance (MAPPA Guidance 2012 (updated 2017) and reinforces the Trust's commitment to effective risk management.

The purpose of the Multi Agency Public Protection Arrangements (MAPPA) is to minimise the risk of sexual and violent offences to the public posed by identified high-risk individuals usually living in the community, through the sharing of relevant information.

The responsibility for identifying MAPPA Eligible Offenders falls to each agency that has a statutory role in their supervision or care. The MAPPA process brings together the Police, Probation and Prison Services, Social Care, Health, Housing and Education Services.

The Trust, as a Duty to Cooperate agency, is member of the local MAPPA Partnerships, and in a small number of cases where the offender is solely managed by mental health services has the lead role in managing the service user's risks under MAPPA.

2. Purpose or aim

This overarching policy is to assist staff in effectively meeting their duties to minimise the risk of sexual and violent offences to the public.

This policy should be considered in conjunction with the National MAPPA guidance 2012 (Updated 2017) and the Trust's Mappa procedure [OurSpace MAPPA safeguarding](#)

The policy also describes the support, advice, procedures, and guidance available to staff, both internally and externally, in the effective management of the risks of violent of sexual offending within their practice.

3. Scope

This policy applies to all staff (including bank and agency staff) and volunteers working with adults in the Trust.

4. Policy statement

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The Trust is committed to ensuring that all staff meet their duties to help identify the immediacy, severity and the likelihood of dangerousness and to cooperate effectively with other partner agencies to:

- Minimise and manage dangerousness
- Ensure public protection
- Develop defensible practice
- Operate proactive rather than reactive risk management plans for the benefit of the service user and carers
- Share effectively confidential information across agencies, within existing policies and protocols (e.g. Caldicott NHS Code of Confidentiality (2003))
- Work within Section 115 Crime and Disorder Act (1998) and the Data Protection Act (1998) to promote effective protection of the public.

5. Definitions

5.1 Multi agency MAPPA Procedures

- The section sets out multi agency and internal arrangements to protect service users, their children and the general public from sexual, violent and other offenders who pose a risk to the public.
- Full details of multi-agency MAPPA procedures are available in the National MAPPA guidance, which is available in all local [OurSpace MAPPA safeguarding](#) pages.
- The Multi Agency Public Protection Arrangements have a wide membership from agencies. These are Police, Probation, Prison Service (known as the Responsible Authorities) and Local Authorities, Housing, Education, Jobcentre Plus, PCT's, Health Commissioners, Acute and Mental Health Trusts, Youth Offending teams and the voluntary sector (known as Duty to Co-operate Agencies).
- Each MAPPA area develops a strategic plan to reduce the harm, risk and frequency of sexual or violent offending and abuse in its area, by developing preventative and effective response strategies.
- The Trust covers two MAPPA areas:
- Avon & Somerset MAPPA Strategic Management Board covers North Somerset, Bristol, South Gloucestershire, and Bath & North East Somerset
- The Wiltshire MAPPA Strategic Management Board covers Swindon and Wiltshire.

However, staff may work with other MAPPA areas where they border the core AWP area (such as Dorset) or where AWP provides services (such as Bournemouth).

5.2 MAPPA Categories

There are three categories in MAPPA that define who is eligible to be managed under MAPPA:

Category 1: Sex Offenders who are required to register under part 2 of the Sexual Offences Act 2003

Category 2: Violent offenders sentenced to 12 months imprisonment or more, convicted offenders subject to a Hospital or Guardianship Order under Part 3 of the Mental Health Act, or other sexual offenders (generally those individuals who do not meet the requirement for the Sex Offenders Register)

Category 3: Other dangerous offenders who fall outside Category 1 or 2 who may have the potential to cause serious harm to the public. Establishing that a previous offence demonstrates a capability to cause serious harm can be complex.

Category 2 and 3 may include counter terrorism related cases.

Additionally there is a separate police led process for Potentially Dangerous Persons (PDP). PDP cases cannot be lawfully managed using the MAPPA procedures and cover a person who has not been convicted of, or cautioned for, any offence placing them in one of the three MAPPA categories, but whose behaviour gives reasonable grounds for believing that there is a present and/or imminent likelihood of them committing an offence or offences that will cause serious harm. Advice on a potential PDP case or on information sharing in these cases should be obtained from the Trust Safeguarding Team as they sit outside the MAPPA legal framework.

There will be occasions when a person fall outside the criteria for inclusion under MAPPA or PDP but still poses a risk of harm to others. The management of these cases should be approached using a multi-agency risk management approach.

5.3 MAPPA Levels

MAPPA has three levels of management of individual cases whatever the category (see Section 10 on definitions) of the offender:

Level 1: Ordinary management

This level of management means that it is likely the case is being managed by one or two agencies who are communicating well together in order to manage the risks to the public. This case could be a high risk of harm to the public, but the nature of the risk means that it is manageable at this level. The majority of MAPPA eligible offenders are managed by a single agency at level 1.

Level 2: Active multi agency management

This level of management requires active multi agency conferencing in order to manage the risk of potential harm to the public.

Level 3: Active multi agency management

This level of management means that the case is particularly complex and/or it has potential media interest, and as such requires multi agency working at a senior level . This may require significant extra resources requiring high level sign-off such as extra security on the Trust estate to manage risks.

It is vital, given the high-risk threshold for these meetings that practitioners provide information as requested, in order to demonstrate meeting the duty of care to protect service users, their children, carers and family as well as the wider public.

5.4 Multi- Agency MAPPA Meetings

MAPPA meetings are held for those cases managed on a multi-agency basis. These are:

MAPPA Level 2 Meetings

These meeting are held in cases where there is the active involvement of a number of agencies in order to share information between agencies, and assist in developing effective plans around the persons being discussed to reduce their risk of re offending and to protect the public.

MAPPA Level 3 Meetings

These meeting are held in cases where there is the active involvement of a number of agencies. This level of management means that the case is particularly complex and/or it has potential media interest, and as such requires multi agency working at a senior level.

5.5 Information sharing and recording

All information sharing must:

- have lawful authority (this includes authority derived from the Data Protection Act1998, Human Rights Act 1998, Section 115 Crime and Disorder Act 1998, Section 325 Criminal Justice Act 2003, Common Law, and Statutory Duties of Confidence
- Be necessary
- Be relevant and proportionate to the purpose for sharing the information
- Ensure the safety and security of the information shared
- Comply with the [HM Government Information sharing guidance for practitioners and managers](#)

Full direction and guidance in relation to sharing information on Multi Agency Public Protection Arrangements are set out in the relevant local multi agency procedures and related information sharing protocols. These protocols are underpinned by the legal duty to share information set

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out in the Crime and Disorder Act (1998) to prevent crime, and the duties set out in the Criminal Justice Act 2003 and the Domestic Violence, Crime and Victims Act 2004.

Given that the purpose of sharing information within MAPPA is to prevent the repetition of a serious criminal offence, consent from the service user is not required to share or receive information that is relevant and proportionate to managing the risks of further sexual or serious violent offences.

Information obtained at MAPPA Level 2 or 3 meetings in relation to non-AWP service users whilst acting in the role providing advice or signposting at such meetings should not be retained or recorded.

Advice on what information might be relevant is available from the Trust Safeguarding Team.

Advice on confidentiality is available from the Trust Caldicott Guardian . Contact details are available [here](#).

VISOR and Intelligence recording

All information in relation to MAPPA subjects is held in the national VISOR (Violent & Sex Offenders Register) . This database is managed by Police, Probation and Prisons. This records the referral, planning and update information for MAPPA including Level 1 information sharing.

Other risk information that is not held in the VISOR database, but relates to a high risk of violent or sexual offending is held in the relevant Police Intelligence systems

5.6 Trust MAPPA Procedures

The Trust has arrangements in place to help practitioners and teams work effectively with MAPPA, and to manage the risks related to violent or sexual offending.

The Trust Safeguarding Team can provide advice in relation to managing risks related to violent or sexual offending, including under MAPPA. Information on managing these risks is also available on all local the [OurSpace MAPPA safeguarding](#) pages .

5.7 Assessing and managing risks of violent or sexual offending

Care co-ordinators and practitioners should always ensure that they consider, and where appropriate ask the service user, when assessing or re-assessing them, whether they have committed any sexual or violent crimes, as set out in the core risk assessment on RiO or other clinical record/assessment. There must also consider if this also involve other required safeguarding actions, such as child protection, safeguarding an adult at risk or referral to MARAC.

Where care co-ordinators identify a relevant concern they must record the concern in the clinical record and assess the level of risk, in relation to those concerns.

This assessment should include obtaining all relevant corroborative evidence from notes and from other people who may have relevant information in relation to risk.

The focus of the assessment is to determine the level of risk to others, and:

- whether the service user is on MAPPA
- whether the service user has MAPPA eligible offences **and** are currently at high risk of further offending and therefore should be referred for management under MAPPA.
- what information can and should be shared with other agencies or persons in order to manage the risks identified.
- whether there are victim disclosure requirements in the case

MAPPA and public protection issues should be routinely discussed as part of the supervision arrangements for all practitioners as set out in the Trust [Staff Supervision Policy](#), and the

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practice outcomes from supervision in individual cases recorded in the relevant service user health and social care record.

5.8 Identifying service users on MAPPA

Although on many occasions, services will be aware of whether a service user is currently being managed by other agencies under MAPPA; it is possible that AWP services will not always be aware that this is the case, particularly if the service user does not tell a practitioner.

If there are concerns that a service user may be under MAPPA management (normally evidenced by evidence or observed concerns about a risk or history of violent or sexual offending) but it is not possible to confirm this, the Police may be contacted and information in regard to such risks and MAPPA status and history requested by submitting a request under s29 (3) Data Protection Act 1989 request to the relevant Police Constabulary.

Further advice can be sought from the Trust Safeguarding Service [here](#)

5.9 MAPPA eligibility and referrals

In order for a person to be managed under MAPPA, they must:

- have MAPPA eligible offences (these are defined sexual offences or serious offence involving violence set out in the national MAPPA guidance). A full list of mappa eligible offences can be found [here](#).
- have a current high risk of re-offending

Where a service user meets these criteria, and multi-agency working is required to manage the level of risk, a multi-agency MAPPA referral should be made .

Whenever an AWP member of staff makes a MAPPA referral it must also reported as an adverse incident in line with the Trust [Incident Policy](#). Selecting 'Safeguarding' as the 'cause group' on the electronic form enables staff to view the types of incident in a drop down list.

Certain service users detained under the Mental Health Act following MAPPA eligible offences, often through court orders and subject to restriction orders (e.g. s37/41) are managed by AWP at level 1 or on a multi-agency basis at higher levels. All known Level 1 cases should be immediately registered on the VISOR .

This database is managed by Police, Probation and Prisons and into which Mappa Form I updates, which are provided by clinician. Mappa form I should be completed by on admission to hospital following detention, or as soon as it is identified that they are MAPPA eligible and high risk.

This records the referral, planning and update information for MAPPA including Level 1 information sharing within within 3 days of the conviction.

Further national guidance and information on eligibility and working with mentally disordered offenders is available [here](#) .

5.10 Information sharing and exchange

The sharing of information, including disclosure, is underpinned by the National [MAPPA guidance](#) and by local MAPPA information sharing protocols.

Guidance on information sharing in relation to MAPPA is available from the Trust Safeguarding Service [here](#) or the Trust Caldicott Guardian. Contact details for the Caldicott Guardian are available [here](#) .

MAPPA referrals are made using the national MAPPA referral form (Form A) that is available on Ourspace in the relevant MAPPA pages.

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MAPPA Form I is used to update and inform the local police of any significant risk changes (including changes to leave conditions), for service users that are already registered on the VISOR database

Advice is available on the use of these forms or on contacting the Police for information on persons who may have MAPPA eligible offences from the Trust Safeguarding Team.

5.11 Single Point of Contact

The Trust has joint single point of contact arrangements with the Police to manage the transmission of documents, including referrals, checks and MAPPA minutes and plans between the Trust and the Police.

Completed MAPPA referrals, Form I's or other forms must be sent to the Safeguarding Team administration at awp.safeguardingadmin@nhs.net. They should not be sent directly from practitioners to MAPPA. The practitioner must ensure all MAPPA referrals are also recorded using the Trust's Incident Reporting System.

Full information on recording and storing documents is set out on the MAPPA pages on Ourspace.

The received forms will then be checked and forwarded to the relevant MAPPA administrator by secure e-mail. Data on referrals and Form I's contacts is recorded for governance and reporting purposes.

Requests to attend MAPPA meetings are also sent through the single point of contact to the relevant Team Managers and practitioners, to ensure that case attendance is maximised and attendance data recorded for governance purposes.

Transmission of minutes and other documents arising from meetings are transmitted through the single points of contact.

5.12 Using and recording MAPPA information

All MAPPA referrals must also be recorded using the Trust's online Incident Reporting System. Full information on recording and storing documents is set out in "recording safeguarding information" pages which linked to all local [MAPPA pages in OurSpace](#)

In all cases, care co-ordinators or lead practitioners must then review the [CPA] risk assessment and risk management plans in RiO or the clinical record to incorporate the information provided at the MAPPA meeting.

Interventions and protection plans shared at MAPPA meetings remain in the ownership of individual agencies.

However, following a MAPPA meeting, the delivery and outcome of such interventions and plans will be reported back to a further meeting until the issue of continued offending behaviours and abuse is resolved. Individual practitioners and agencies are accountable for implementing their agreed actions under MAPPA and ensuring effective inter-agency communication between meetings.

All MAPPA minutes and other documents should be uploaded into RiO or the clinical record, as third party information, and should never be password protected.

5.13 Disclosure

There is a requirement under the National [MAPPA Guidance](#) to consider if disclosure is required to victims and potential victims in order to help them manage risks to themselves. In Level 2 and 3 meetings the decision to disclose (or not) is taken by the Chair

At Level 1, disclosure should be considered at points of review (e.g. CPA reviews) and at any point where there is a significant change in risk, including access to leave, and the decision of the Responsible Clinician and outcome recorded. However, if disclosure is considered required,

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then the need for referral to Level 2 or 3 multi agency management should be also considered. This requirement for disclosure is in addition to the disclosure requirements to past victims set out in the Mental Health Act 1983.

6. Roles and responsibilities

Within AWP, safeguarding adult issues are managed through the terms of reference of the Trust critical Incident Group, chaired by the Clinical Executive Directors, which reports to the Quality and Standards Committee and Board.

6.1 Director of Nursing

The Director of Nursing and Quality is the responsible Executive Director MAPPA and reports to the Trust Board in this area of responsibility.

6.2 Associate Director of Nursing

The Associate Director of Nursing provides Trust wide strategic leadership to ensure the Trust meets its obligations in relation to MAPPA.

6.3 Head of Safeguarding and Named Professionals for Adult Safeguarding

The Trust Head of Safeguarding has responsibility for leadership in ensuring that practice in the Trust ensures effective practice in relation to MAPPA, working in collaboration with a variety of healthcare professionals and other agencies to develop systems and frameworks to improve services for service users. Their role is to ensure the Trust provides safe effective and well led services which safeguard the vulnerable and protect the public, and to ensure effective reporting to the Trust, Commissioners and the Local SMB on MAPPA performance, including reporting and assurance on all relevant standards.

They are responsible for providing leadership, support and expert advice on MAPPA, working in the Trust Safeguarding Service to manage the Trust Safeguarding Adult team and Named Professionals for Adult Safeguarding.

The Head of Adult Safeguarding is expected to give robust, consistent expert advice in partnership with other specialist senior colleagues. Reinforcing the need to deliver high quality safe services in line with legislation and best practise

The Trust Named Professionals for Adult Safeguarding will support the Head of Adult Safeguarding in supporting practice that ensures safe effective and well led services which safeguard the vulnerable, within local partnerships across the Trust area.

6.4 Local Delivery Unit Management teams

Local Delivery Unit Management teams are responsible for:

- MAPPA practice in their geographical area
- Ensuring compliance with relevant standards to support reporting to the Trust and Commissioners on MAPPA performance.

6.5 Team Managers and Volunteer Co-ordinators

The Team Manager (or their delegated safeguarding champion) are responsible for acting as a team reference resource on safeguarding issues, provision of required data, implementation of audits and relevant training planning, cascade of information, safe recruitment and workforce issues, and support and supervision to their team on safeguarding issues. Team managers are responsible for ensuring all referrals have been recorded in the Incident Reporting System.

6.6 All staff working with children and families

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All staff working with children and families are responsible for ensuring that their practice is compliant with the Trust policy on MAPPA, the relevant risk assessment and management elements of the Trust Care Programme Approach and Risk Policy and that they adhere to the local safeguarding procedures, including the duty to report and escalate concerns.

6.7 All staff and volunteers

All staff and volunteers are responsible for ensuring that they understand and comply with Trust and local policy and procedures to safeguard adults.

7. Standards

The standards in relation to MAPPA consist of compliance with the national and local policies and procedures, professional registration standards, and standards in relation to the variety of legislation and statutory guidance to safeguard people from the risks of violent or sexual offenders. These standards and legislation include:

- Essential standards of quality and safety – including CQC Regulation 13 Relevant NPSA and CQC reporting requirement
- Crime and Disorder Act 1998
- Criminal Justice Act 2003
- Domestic Violence, Crime and Victims Act 2004
- Sexual Offences Act 2003
- Safeguarding Vulnerable Groups Act 2006
- Mental Health Act 1983

8. Training

The Trust's overarching policy for training is the [Learning and Development Policy](#) and this should be read in conjunction with this policy.

Additionally the Trust's [Training Matrix](#) describes the minimum statutory, mandatory and required training for all staff groups in respect of safeguarding and public protection

These Trust L&D matrices describe the minimum statutory, mandatory and required training for all staff groups in respect of safeguarding and public protection, including MAPPA.

The Learning and Development Policy also describes the Trust's arrangements for training, in particular how there are processes in place to ensure staff receive the training they require and how non-attendance is followed up. These arrangements are further supported by management supervision and appraisal processes.

The Trust Head of Adult Safeguarding has agreed the training standard with the Learning and Development Team and training standards have been informed by national and statutory requirements, professional standards and national best practice. This also takes into full account the training strategies and standards of the local MAPPA Strategic Management Board in setting standards for training.

The Trust Head of Adult Safeguarding participates in a programme of continuous professional development to ensure they remain up to date and keep abreast of developments in this field.

9. Monitoring or audit

Compliance with the policy will be monitored through a variety of different mechanisms, as follows.

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An annual assurance report on MAPPA will be provided to the Quality and Standards Committee and Board. Exception reports will be made through the Head of Adult Safeguarding as required between annual reports to the Critical Incident Oversight Group.

The Trust Board will make an annual declaration in respect of safeguarding adult, including MAPPA compliance, as part of its declaration on compliance with Care Quality Commission's Essential standards of quality and safety including Regulation 13 (Safeguarding) and other relevant statutory standards in relation to safeguarding adults within the Trust Safeguarding Annual report to the Quality and Standards Committee and board.

The Trust's arrangements for MAPPA will be evaluated annually against various external standards, to include annual reporting from local MAPPA Boards and Serious Further Offending (SFO) Reviews and this performance information is available internally and externally.

Periodically Commissioners, MAPPA Strategic Management Boards, and Multi agency CQC inspections audit the Trust's arrangements for adult safeguarding adults including MAPPA or Serious Further Offending (SFO) Reviews.

The Trust Head of Adult Safeguarding will review patient and staff experience data (e.g. Safeguarding Service contact data and referral rates, and other data) on a rolling quarterly basis to assess feedback on the success of the implementation in practice of this policy.

The Trust's performance in meeting its MAPPA duties and responsibilities is reported annually through the annual reports of the local MAPPA Strategic Management Boards. This information, and the local MAPPA Strategic Management Boards business plans are reported annually to the Quality and Standards Committee.

The Learning and Development department will maintain records of MAPPA training and follow up non-attendees. This information is shared internally and externally though lead commissioners, and reported annually to the Quality and Standards Committee and Board.

At practice level, it is recognised that dealing with dealing with issues in relation to violent or sexual offending may be emotionally upsetting for staff involved.

Managers must therefore ensure that MAPPA issues are considered as a core part of each individual's supervision arrangements, as well as ensuring best practice in working with MAPPA that they ensure support is provided when necessary to the staff involved.

Managers should provide debriefing if required after any particular distressing incident, and consider the use of Occupational Health in relation to work related distress caused by safeguarding issues and incidents.

10. References

[Care Programme Approach and Risk Policy](#)

[Mental Health Act 1983, 2007](#)

[Mental Health Act Code of Practice](#)

[National MAPPA guidance 2012 \[Update 2017\]](#)

[Safeguarding Vulnerable Groups Act 2006](#)

[Staff Supervision Policy](#)

[Safeguarding Adults at Risk Policy](#)

[Safeguarding Children Policy](#)

[Guidance for Working with MAPPA and Mentally Disordered offenders, Royal College of Psychiatrists , 2013](#)

11. Associated and Related Procedural Documents:

[Guidelines on Working to Safeguard Adults](#) [Key modular guidance]

[Safeguarding Children Policy](#)

[Guidelines on working with families to protect children](#) [Key modular guidance]

[Prevent and Pursue Procedure](#)

[Domestic Abuse Procedure](#)

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Version History				
Version	Date	Revision description	Editor	Status
2.0	26 Nov 2008	Approved by Board	MD	Approved
3.0	01 Mar 2011	Approved by the Quality and Healthcare Governance Committee	MD	Approved
3.1	15 Dec 2011	Changes to name to reflect national policy and governance arrangements approved by the Mental Health Legislation and Safeguarding Management Group	MD	Approved
3.2	14 Feb 2013	Admin amendments to reference additional associated and related procedural documents agreed for the Executive Lead	MD	Approved
4.0	13 March 2013	Annual review of policy by Quality and Safety Committee, amended to reflect multi agency policy changes, local arrangements to manage alerts, separation of policy and procedural content, and amendments by the Committee	MD	Approved
4.1	12 May 2014	Annual review of policy with administrative changes only, approved by Acting Director of Nursing	MD	Approved
5.0	15 July 2014	Annual review of policy by Quality and Safety Committee	MD	Draft
5.1	7 August 2014	Further review of policy incorporating legal, process and practice changes agreed by Trust Safeguarding Management Group	MD	Draft
6.0	19 August 2014	Approved by Quality and Standards Committee	MD	Approved
6.1	31 March 2015	Administrative changes to policy to reflect changes introduced by Care Act 2015	MD	Approved
7.0	1 September 2015	Approved by Quality and Safety Committee	MD	Approved
7.1	15 December 2016	Administrative changes to policy to reflect references from updated national legislation and guidance, and amended organisation structures	FM	Approved
8.0	15 December 2017	Administrative changes to policy to reflect references from updated national legislation and guidance	FM	Approved
8.1	03 December 2018	Extended by Associate Director of Nursing to allow for policy review of all safeguarding procedures	AM	Approved
8.2	21 December 2018	Amended to show revision to recording of safeguarding referrals	AM	Approved
8.3	June 2019	Administrative review	AM	Approved