

PROTECTION OF VULNERABLE ADULTS (PoVA) LIST

The Manager
Ground Floor Area E
Mowden Hall
Staindrop Road
Darlington DL3 9BG
Advice Line: 01325 391328
Fax: 01325 392178



PRIVATE AND CONFIDENTIAL

The Protection of Vulnerable Adults scheme acts as a workforce ban on those professionals who have harmed or put at risk of harm vulnerable adults in their care. It will add an extra layer of protection to the pre-employment processes, including Criminal Records Bureau checks, which already take place and stop known abusers from entering the care workforce.

This form is for the referral to the Secretary of State requesting that consideration be given to an employee/ex-employee being placed on the POVA list. To be completed in line with:

- The Protection of Vulnerable Adults Scheme’s ‘A Practical Guide’, and
- The Social Care Institute for Excellence’s ‘Practice guide 7: Making referrals to the PoVA List’.

Please note this is the maximum information required, therefore, please complete as much as possible but it is appreciated that a referral may only be at suspension stage. If any more information is required we will be in touch; we have no investigatory powers and are reliant on the information provided by referring organisations. Please also note that the text boxes can be expanded or you can add continuation sheets.

1. Details of person being referred (“the person”):

Surname	
Forename(s)	
Maiden name or alias	
Title	Mrs/Ms/Miss/Mr/Other:
Date of birth	
National Insurance Number (if known)	
Position held Please include a copy of the job description, application form and references.	
Dismissed, suspended or resigned? If resigned or retired please state if the individual would have been dismissed or considered for dismissal.	<i>Please enclose a copy of the dismissal / suspension / resignation letter and the disciplinary procedures.</i>
Last Known Address	
Post Code	
Telephone Number	

Note: If there are any documents you do not want the referred to see, clearly mark them or anonymise them. Please use an extra sheet if necessary, clearly labelling the section it refers to.

INCIDENT AND RELATED DETAILS

<p>2. Evidence attached of the person's employment in a care position, e.g. copy of letter of employment and/or application form. Include details of the person's normal duties (e.g. personal care of vulnerable adults).</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> <u>Details:</u></p>
<p>3. Length of the person's employment with your organisation (including dates and positions held).</p>	
<p>4. Details of the person's employment history. Including details (post/length of service) of previous/other jobs (where known) and of any previous disciplinary action or complaints against the person.</p>	
<p>5. Details of any disciplinary action taken whilst with your organisation.</p>	

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<p>6. Details of the person's relevant skills, qualifications and training received; e.g. RGN/NVQ Level 2 etc.</p> <p>Please confirm what the induction covered and provide any signed documents for training and supervisions.</p>	
<p>7. Summary of alleged misconduct, to include the nature of the abuse (physical, sexual, financial, neglect etc).</p> <p>Please note you need to be specific with the allegations, ideally what, when, where and how.</p> <p>Please make it clear which misconduct was the reason for dismissal or would have led to dismissal if the carer left without dismissal.</p>	
<p>8. Explanation of how the person harmed, or put at risk of harm, the vulnerable adult(s), i.e. the conduct/misconduct.</p>	
<p>9. Impact of the alleged abuse on the victim(s). E.g. physical – injuries, STDs, pregnancy; emotional – changes in eating and sleeping patterns; or behavioural – dress or attitude. Give details of whether the victim(s) has given those details or whether it is based on an assessment of the impact - with details of who was involved in that assessment.</p>	

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<p>10. Background details on the victim(s), e.g. age; medical condition; level of care needed to assist his/her daily life; level of capacity; and, mobility.</p> <p>Where possible please provide a copy of the victim's care plan. If not, the dates these were sent and the signing-off officer details.</p>	
<p>11. Details of the care relationship between the person and the victim (e.g. personal/domiciliary carer, care assistant, adult placement carer, nurse, home manager, volunteer). Include details of the care usually provided (e.g. help with getting up, dressing, medication etc.)</p>	
<p>12. Evidence of alleged misconduct. List of documentation provided: e.g. Witness statement, hearing notes, etc</p> <p>Please number documentation according to the list and remember that the evidence has to be of specific incidents – what, when, where and how.</p>	<ol style="list-style-type: none"> 1. 2. 3.
<p>13. Witness Details.</p>	<p>This information is not required at this stage. However, please note that in the event of an appeal against inclusion on the PoVA List we will need details of all witnesses. Where possible, please keep an up-to-date list of these witnesses, their current addresses and whereabouts, in case we need to contact them.</p>

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<p>14. Details of investigations, and their conclusions, carried out to date. Include copies of relevant papers (statements, minutes of meetings, notes from disciplinary hearings), signed if possible.</p> <p>In the case of suspension pending investigation, describe planned investigation activities.</p>	<p>1.</p> <p>2.</p> <p>3.</p>
<p>15. Details of the action taken against the person, e.g. suspension, dismissal or transfer to alternative employment not involving contact with vulnerable service users.</p>	
<p>16. Information of Police Involvement.</p> <p>Please give details of current position of any civil or criminal proceedings.</p> <p>Please note we are reliant on you to inform us of the progress and conclusion of any proceedings.</p>	<p>Police Contact:</p> <p>Crime ref:</p> <p>Station and address:</p>
<p>17. Information of any other agency involvement, e.g. CSCI, NMC, Local Adult Protection Team, Social Services, voluntary or independent sector agency.</p>	

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18. Details of proposed further action, e.g. give dates of any scheduled Adult Protection investigations and/or disciplinary hearings.	
19. Any other information considered relevant to the referral. Include here brief details of any other employees involved in the abuse, and complete additional referral forms for them as appropriate.	

20. Employer Details:

Contact Name	Mrs/Ms/Miss/Mr/Other:
Position	
Address	Post code:
CSCI registration number	Note: Please enclose a copy of the certificate with referral
Type of Establishment, e.g. care home, adult placement. Include details of the number and nature of service users, and of the care provided.	
Contact Number	
Fax Number	
Email Address	
Signed	
Date	

Tick here to confirm CSCI certificate enclosed with referral form

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Guidance for completion:

Please provide as much information at this stage as you can as missing information may delay consideration of the case. Additional sheets may be used to provide extra information and/or supporting evidence, but must be clearly labelled as to which section it relates to on the form.

In addition to the above information, a referral to the POVA list from a provider of care should be accompanied by a copy of either:

- a. their registration certificate issued by the Commission for Social Care Inspection or the Care Standards Inspectorate for Wales; or
- b. the standard letter from the Commission for Social Care Inspectorate saying that the provider's application for registration has been received and is being processed.

Once completed, the form and all its supporting papers should be sent (hard or electronic copy) to:

The Manager
Protection of Vulnerable Adults List
Ground Floor E
Mowden Hall
Staindrop Road
Darlington
County Durham
DL3 9BG

Email: pova.mail@dcsf.gsi.gov.uk

Advice line: 01325 391328

Fax: 01325 392178

Note: When sending material through the post, those making referrals should have due regard to the confidential nature of the material. If the individual is provisionally listed pending consideration for full listing on PoVA (and the PoCA list where it applies) full details of information will be copied to the individual to enable them to make direct written representation to the Secretary of State. You should also be prepared to assure yourself that the material safely reaches the Manager of the POVA list.

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