We're Supporting Safeguarding Adults Week!

#SafeguardingAdultsWeek

ann craft trust



Safeguarding is for Everyone.

Know your Role.

3/11/21: Developed by SSP BSU in consultation with Christiane Plaum Service Manager Safeguarding, Mental Health, Mental Capacity & DoLS, Adult Services, Helen Rankin SSP Development Manager and Lin Williams Domestic Abuse Lead.

How to use this document

The aim of this document is to raise awareness about safeguarding and will provide some general information and signposting to additional resources. Please share this resource widely.

If you require more detailed information about reporting safeguarding concerns you should refer to the local policies and procedures available on the Swindon Safeguarding Partnership website.

This is a large document and you can look at it as a whole or dip in and out at your convenience.

Please use the hyperlinks on slide 5 to navigate to the relevant sections.

There are also hyperlinks to external resources such as websites which can be accessed by either ctrl+click on the image/icon or hyperlink. Alternatively you can use your mouse to right click and select open link from the options.

Everyone's responsibility

It is not just about knowing your role in an employment setting, but also knowing your role as a human being in everyday life to promote safer cultures in the community. We want to highlight that **safeguarding is everyone's responsibility** and everyone needs to play their part to effectively create safer cultures.

Every organisation, small group and individual should be aware of their responsibility, in work and society.

We want to encourage you to enhance your knowledge about safeguarding and consider your role.

Safeguarding refers to measures designed to protect the health, wellbeing and human rights of individuals. These measures allow children, young people and adults at risk to live free from abuse, harm and neglect. Individuals and organisations are responsible for working together to protect an adult's right to live free from abuse and neglect.

Never assume safeguarding is someone else's responsibility.

Safeguarding means...

"...protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action.

This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances. Organisations should always promote the adult's wellbeing in their safeguarding arrangements. People have complex lives and being safe is only one of the things they want for themselves. Professionals should work with the adult to establish what being safe means to them and how that can be best achieved. Professionals and other staff should not be advocating "safety" measures that do not take account of individual well-being, as defined in Section 1 of the Care Act."

Department of Health Care Act Guidance October 2014.

Ask yourself

Do you know what your role in safeguarding is?

Where do you go if you have a safeguarding concern?

How do you access your agency/service safeguarding policies and procedures?

How can you make a difference?

- **Learn** about the different types of harm and abuse.
- **Discover** how to spot the signs.
- > Responding and recording any concerns you have.
- **Report** your concerns.



Learn about the different types of harm and abuse.



What is Abuse?

- Abuse may consist of a single act or repeated acts, or may be an act of neglect or an omission to act.
- Abuse may be a criminal offence and as such found to be committed with deliberate intent, or as a result of negligence or ignorance.
- Neglect and poor professional practice also need to be taken into account. This may take the form of isolated incidents of unsatisfactory professional practice or it may occur when an adult at risk is persuaded to enter into a financial or sexual transaction to which he or she has not consented, or cannot consent.
- Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it. Abuse is a violation of an individual's human and civil rights by any other person or persons.
 The risk of being abused depends upon the situation, the environment and those who cause harm, not on the behaviour of victims. Many incidents of abuse are criminal offences.

Who Might Abuse Adults?

Abuse and neglect might be carried out by anyone in contact with adults, even by people employed to provide care.

There may be indicators that adults are experiencing harm from people within your organisation, such as volunteers, members of staff, or other members of the public. Or they may be experiencing harm from those connected with their life outside your organisation, such as a carer or a spouse. This may include:

- Spouses, friends, family and neighbours
- People employed to provide care
- Paid staff or professionals
- Volunteers
- Strangers

Where may abuse occur?

Abuse can take place in any private or public situation and place e.g.:

- Where the person lives, either alone or with someone else
- In supported/sheltered accommodation
- Within nursing, residential or day care settings
- In hospital
- In custodial situations
- Where support services are being provided
- In public places

Learn: Different types of harm and abuse

The Care Act recognises 10 categories of abuse that may be experienced by adults. Click on the hyperlink to find out more information.

<u>Self-neglect</u>: This covers a wide range of behaviour, but it can be broadly defined as neglecting to care for one's personal hygiene, health, or surroundings. An example of self-neglect is behaviour such as hoarding.

Modern Slavery: This encompasses slavery, human trafficking, forced labour, and domestic servitude.

<u>Domestic Abuse</u>: This includes psychological, physical, sexual, economic, emotional abuse and coercive and controlling behavior perpetrated by a partner or ex-partner, family member or carer. It also includes so-called "honour" based Abuse.

<u>Discriminatory</u>: Discrimination is abuse that centres on a difference or perceived difference, particularly with respect to race, gender, disability, or any of the protected characteristics of the Equality Act.

<u>Organisational</u>: This includes neglect and poor care practice within an institution or specific care setting, such as a hospital or care home, or in relation to care provided in one's own home. Organisational abuse can range from one off incidents to ongoing ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

Learn continued

Click on the hyperlink to find out more information.

<u>Physical</u>: This includes hitting, slapping, pushing, kicking, restraint, and misuse of medication. It can also include inappropriate sanctions.

<u>Sexual</u>: This includes rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault, or sexual acts to which the adult has not consented, or was pressured into consenting.

<u>Financial or Material</u>: This includes theft, fraud, internet scamming, and coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions. It can also include the misuse or misappropriation of property, possessions, or benefits.

<u>Neglect and Acts of Omission</u>: This includes ignoring medical or physical care needs and failing to provide access to appropriate health social care or educational services. It also includes the withdrawing of the necessities of life, including medication, adequate nutrition, and heating.

<u>Emotional or Psychological</u>: This includes threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation, or withdrawal from services or supportive networks.

Learn continued

Click on the hyperlink to find out more information.

Four Additional Types of Harm. These are not included in The Care Act, but they are also relevant to safeguarding adults.

Cyber Bullying: Cyber bullying occurs when someone repeatedly makes fun of another person online, or repeatedly picks on another person through emails or text messages. It can also involve using online forums with the intention of harming, damaging, humiliating, or isolating another person. It includes various different types of bullying, including racist bullying, homophobic bullying, or bullying related to special education needs and disabilities. The main difference is that, instead of the perpetrator carrying out the bullying face-to-face, they use technology as a means to do it.

<u>Forced Marriage</u>: This is a term used to describe a marriage in which one or both of the parties are married without their consent or against their will. A forced marriage differs from an arranged marriage, in which both parties consent to the assistance of a third party in identifying a spouse. The Anti-Social Behaviour, Crime and Policing Act 2014 make it a criminal offence to force someone to marry.

Mate Crime: A "mate crime" is when "vulnerable people are befriending by members of the community who go on to exploit and take advantage of them" (Safety Network Project, ARC). It may not be an illegal act, but it still has a negative effect on the individual. A mate crime is carried out by someone the adult knows, and it often happens in private. In recent years there have been a number of Serious Care Reviews relating to people with a learning disability who were seriously harmed, or even murdered, by people who purported to be their friend.

<u>Radicalisation</u>: The aim of radicalisation is to inspire new recruits, embed extreme views and persuade vulnerable individuals to the legitimacy of a cause. This may be direct through a relationship, or through social media.

Video clip



Additional free video resources



Swindon resource: Safeguarding Adults at Risk -

basic awareness training - Swindon

Safeguarding Partnership

Professionals Safeguarding Adults in the

Voluntary Sector:

What is Safeguarding? - Ann Craft Trust

Professionals working in the Health and Social

Care Sector:

<u>Understanding Safeguarding of Adults Course</u> - Free Social Care Learning



Discover how to spot the signs of harm and abuse.





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Types of physical abuse

- Assault, hitting, slapping, punching, kicking, hair-pulling, biting, pushing
- Rough handling
- Scalding and burning
- Physical punishments
- Inappropriate or unlawful use of restraint
- Making someone purposefully uncomfortable (e.g. opening a window and removing blankets)
- Involuntary isolation or confinement
- Misuse of medication (e.g. over-sedation)
- Forcible feeding or withholding food
- Unauthorised restraint, restricting movement (e.g. tying someone to a chair)



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Types of domestic violence or abuse

- domestic violence or abuse can be characterised by any of the indicators of abuse outlined in this briefing relating to:
- psychological
- physical
- sexual
- economic
- emotional
- coercive and controlling behavior

Additional resources:

- Swindon Safeguarding Partnership adult safeguarding and domestic abuse guide to support practitioners and managers.
- SCIE Recognising and responding to domestic violence and abuse
- > <u>Safe Lives Spotlight</u> on disabled people and domestic abuse and older people and domestic abuse.
- Domestic Abuse British Sign Language video
- > SSP 7 Minute Brief Coercive Control Coercive control Swindon Safeguarding Partnership
- > DASH Risk Checklist
- > MARAC Referral form
- Further information about MARAC meeting



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Types of sexual abuse

- Rape, attempted rape or sexual assault
- Inappropriate touch anywhere
- Non-consensual masturbation of either or both persons
- Non-consensual sexual penetration or attempted penetration of the vagina, anus or mouth
- Any sexual activity that the person lacks the capacity to consent to
- Inappropriate looking, sexual teasing or innuendo or sexual harassment
- Sexual photography or forced use of pornography or witnessing of sexual acts
- Indecent exposure

Types of psychological or emotional abuse

- Enforced social isolation preventing someone accessing services, educational and social opportunities and seeing friends
- Removing mobility or communication aids or intentionally leaving someone unattended when they need assistance
- Preventing someone from meeting their religious and cultural needs
- Preventing the expression of choice and opinion
- Failure to respect privacy
- Preventing stimulation, meaningful occupation or activities
- Intimidation, coercion, harassment, use of threats, humiliation, bullying, swearing or verbal abuse
- Addressing a person in a patronising or infantilising way
- Threats of harm or abandonment
- Cyber bullying

Video clips



Psychological abuse is the use of bullying. rejection, hostility, intimidation and the use of derogatory language, causing a dismissal of a person's wishes and choices.

Psychological abuse affects a person's feelings and inner thoughts including the prevention of a person's individual personal beliefs

Video runs for approximately 6 minutes

This film focuses on the personal story of Philip who suffered physical, financial and emotional abuse in the family home for many years. Philip has learning disabilities and cerebral palsy. When Philip disclosed the abuse, he was supported to leave the family home. Since then he has gone from strength to strength. He married and, although his wife unfortunately died some years after their marriage, Philip continues to live a full and independent life. Warning: This film contains strong language.



Video runs for approximately 9 minutes

Types of financial or material abuse

- Theft of money or possessions
- Fraud, scamming
- Preventing a person from accessing their own money, benefits or assets
- Employees taking a loan from a person using the service
- Undue pressure, duress, threat or undue influence put on the person in connection with loans, wills, property, inheritance or financial transactions
- Arranging less care than is needed to save money to maximise inheritance
- Denying assistance to manage/monitor financial affairs
- Denying assistance to access benefits

- Misuse of personal allowance in a care home
- Misuse of benefits or direct payments in a family home
- Someone moving into a person's home and living rent free without agreement or under duress
- False representation, using another person's bank account, cards or documents
- Exploitation of a person's money or assets, e.g. unauthorised use of a car
- Misuse of a power of attorney, deputy, appointeeship or other legal authority
- Rogue trading e.g. unnecessary or overpriced property repairs and failure to carry out agreed repairs or poor workmanship

Video clips



Watch this video clip to spot the signs of financial abuse.



Alan's story: Safeguarding from financial abuse.



Source: Public Protection Kent 2019 (clip lasts approximately 7 minutes)

Source: Birmingham Safeguarding Adults Board, 2018 (Clip lasts approximately 4 minutes)



Types of modern slavery

- Human trafficking
- Forced labour
- Domestic servitude
- Sexual exploitation, such as escort work, prostitution and pornography
- Debt bondage being forced to work to pay off debts that realistically they will never be able to

Additional resources:

- ➤ Home Office Modern Slavery is closer than you think: Understanding Modern Slavery and Human Trafficking video clip approximately 7 minutes
- > GOV.UK has more information on identifying and reporting modern slavery
- Swindon Safeguarding Partnership website access to free elearning



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Types of discriminatory abuse

- Unequal treatment based on age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex or sexual orientation (known as <u>protected</u> <u>characteristics</u> under the <u>Equality Act 2010</u>)
- Verbal abuse, derogatory remarks or inappropriate use of language related to a protected characteristic
- Denying access to communication aids, not allowing access to an interpreter, signer or lip-reader
- Harassment or deliberate exclusion on the grounds of a protected characteristic
- Denying basic rights to healthcare, education, employment and criminal justice relating to a protected characteristic
- Substandard service provision relating to a protected characteristic

Types of organisational or institutional abuse

- Discouraging visits or the involvement of relatives or friends
- Run-down or overcrowded establishment
- Authoritarian management or rigid regimes
- Lack of leadership and supervision
- Insufficient staff or high turnover resulting in poor quality care
- Abusive and disrespectful attitudes towards people using the service
- Inappropriate use of restraints
- Lack of respect for dignity and privacy
- Failure to manage residents with abusive behaviour
- Not providing adequate food and drink, or assistance with eating
- Not offering choice or promoting independence
- Misuse of medication
- Failure to provide care with dentures, spectacles or hearing aids
- Not taking account of individuals' cultural, religious or ethnic needs
- Failure to respond to abuse appropriately
- Interference with personal correspondence or communication
- Failure to respond to complaints



Types of neglect and acts of omission

- Failure to provide or allow access to food, shelter, clothing, heating, stimulation and activity, personal or medical care
- Providing care in a way that the person dislikes
- Failure to administer medication as prescribed
- Refusal of access to visitors
- Not taking account of individuals' cultural, religious or ethnic needs
- Not taking account of educational, social and recreational needs
- Ignoring or isolating the person
- Preventing the person from making their own decisions
- Preventing access to glasses, hearing aids, dentures, etc.
- Failure to ensure privacy and dignity

Types of self-neglect

- Lack of self-care to an extent that it threatens personal health and safety
- Neglecting to care for one's personal hygiene, health or surroundings
- Inability to avoid self-harm
- Failure to seek help or access services to meet health and social care needs
- Inability or unwillingness to manage one's personal affairs

Additional resources:

- Further information SCIE <u>Self-neglect at a glance</u>
- ➤ Swindon Safeguarding Partnership <u>7 minute brief</u> and <u>Multi-Agency Policy and Guidance on Responding to Self-Neglect.</u>
- ➤ SSP Self-neglect training <u>core</u> and <u>specialist</u> modules

Video clip

Keith's story. A personal account of hoarding. Clip lasts approximately 14 minutes.



Here are a small sample of some additional resources available:

Ann Craft Trust website.

- Physical abuse
- Emotional abuse
- Sexual abuse
- Domestic abuse
- Disability and domestic abuse
- Institutional abuse
- Spot the signs of exploitation and abuse
- To access the full library <u>click here</u>
- How to recognising a safeguarding issue including scenarios to see if you can recognise the types of harm <u>click</u>
 here

Social Care institute for Excellence (SCIE): <u>Information about types and indicators of abuse</u>



Responding and Recording any Concerns you have.



Good practice when receiving a disclosure

These are some things to consider for maintaining good practice in responding when someone has a concern.

- ✓ Speak in a private and safe place
- ✓ Listen to what the person is saying
- ✓ Ensure that you remain calm and do not show shock or disbelief
- ✓ Reassure the person that what has happened is not their fault
- ✓ Do not be judgmental (e.g. why didn't you try to stop them?)
- ✓ Don't 'interview' the person; but establish the basic facts avoiding asking the same questions more than once.
- ✓ Ask them what they would like to happen and what they would like you to do
- ✓ Don't promise the person that you'll keep what they tell you confidential; explain who you will tell and why
- ✓ If the adult asks you not to share the information, record this and seek advice
- ✓ If there are grounds to override a person's consent to share information, explain what these are
- ✓ Explain how the adult will be involved and kept informed
- ✓ Provide information and advice on keeping safe and the safeguarding process
- ✓ Make a best interest decision about the risks and protection needed if the person is unable to provide informed consent
- ✓ Ensure you report any disclosures immediately to the appropriate person (further guidance is include in section report your concerns)
- ✓ Do not discuss the content of the disclosure with others outside of the concern raised. However, other people may need to be informed that an allegation has been made in order to ensure their safety
- ✓ Make a written record of what the person has told you verbatim, taking into account that this report might be required as part of any legal action or disciplinary procedure. (Further guidance is included in the sections record your concerns)

Good practice responding to concerns

If you see, hear about or suspect abuse consider the following.

- ✓ Take urgent action as appropriate to protect the adult at risk from any immediate danger. For example If the adult is in immediate danger, in need of medical attention or if a crime has been committed, contact the Emergency Services.
- ✓ Pass on the information to a relevant manager, as appropriate.
- ✓ Act within the wishes of the adult at risk where possible. (There may be occasions where the individual's wishes need to be overridden. E.g. where the risks of harm are considered to be too great; where others may be at risk; where a crime has been committed; where there are concerns about the person's mental capacity or concerns that there is coercive control) Further guidance is included in the sections report your concerns.
- ✓ Avoid asking investigative questions, e.g. who, what, where, when, why?
- ✓ Avoid making comments about what has happened;
- ✓ Support and reassure the individual throughout; and
- ✓ If the suspected abuse has taken place in a care home or involves a domiciliary care agency or any registered service, report the allegation to the appropriate team and the relevant regulatory authority.

Source: SSP Guidance to safeguarding adults in Swindon - Swindon Safeguarding Partnership

Record any concerns you have

Some general guidance on recording:

- Note that poor practice concerns need to be recorded as well as instances of more serious abuse. If you don't address them, frequent poor practice incidents can escalate into more serious situations.
- ➤ Communication is essential. The way that you/your organisation document and keep records can make all the difference. Such as individual log books or shift reports, sharing information can build a picture that could help identify poor practice or abuse. A good care plan means that staff can understand the needs of each person being supported by the service.
- ➤ It is also important that you record the right kind of information. A person's demeanour, what they are wearing, or what they have eaten that day can all be tell-tale signs of abuse. Patterns of behaviour are also a good way to check wellbeing.
- > Recording should be impartial and non-judgemental. This record may be required as part of any legal action or disciplinary procedure.
- ➤ Whenever a concern is raised, consider the available evidence, and whether you need to gather any additional evidence. You should retain any physical evidence to keep it safe from tampering. Also keep records of relevant evidence that you may need at a later date.
- > You should review regularly the numbers and types of concerns raised. Any significant differences in reporting from one quarter to the next need to be considered and evaluated.

Some general advice and useful resources to self-assess your safeguarding knowledge, policy and procedures is included on

Good practice recording continued

- ✓ Complete the Multi-Agency Safeguarding Adults online referral form;
- ✓ Use the <u>Threshold document</u> to support your decision making and to assist in understanding what to refer and what should for example remain within your agency for investigation. Do not refer just to make safeguarding someone else's business. Stay involved and engaged with the person. If in doubt speak to someone for advice. (see Report your Concerns)
- ✓ Highlight if the person alleged to have caused harm is a service user in receipt of or in need of care and support;
- ✓ Record on the service user's file that a safeguarding adults concern was raised;
- ✓ Record what was said to you in the person's own words;
- ✓ Record if anyone else was there at the time;
- ✓ Record the date, time and setting in which the allegation was made or the event was witnessed;
- ✓ Separate any factual information from any opinions expressed; Take time to complete the report. The questions in the Multi-Agency Referral Form are all important and you must be precise and diligent in answering them;
- ✓ Do not record any concerns about abuse on Person Held Records where the information might be seen by the alleged abuser;
- ✓ If any internal agency reports are completed ensure the following are included date, time, setting, persons present and signatures;
- ✓ Only send reports using secure methods (e.g. Multi-Agency referral form) or deliver them in person immediately; and
- ✓ Ensure all information is stored in a secure place.

Source: SSP Guidance to safeguarding adults in Swindon - Swindon Safeguarding Partnership



Report your concerns.



Raising an adult safeguarding concern

This is any concern you may have about an adult that meets the **3 statutory criteria**:

- has needs for care and support (whether or not the local authority is meeting any of those needs); and
- is experiencing, or at risk of, abuse or neglect; and
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the
 experience of abuse or neglect.

A concern may be raised by anyone, and can be:

- ✓ An active disclosure of abuse by the adult. The adult raises a concern about abuse and/or neglect. The referral to the Local Authority may be made by the adult themselves (self-referral) or by a third party (third party referral).
- ✓ A passive disclosure of abuse. Where someone has noticed signs of abuse or neglect, for example clinical staff who notice unexplained injuries.
- ✓ A third party referral. Can be made by, for example, a family member, friend or neighbour who have observed abuse or neglect or have been told of it by the adult.
- ✓ A complaint or concern. Can be raised by an adult or a third party as a general concern, with neither recognising the concern as abuse or neglect.

Useful definitions to consider in safeguarding

Adult: Person over 18 years.

Adult at risk: Safeguarding duties apply to an adult age 18 years and over.

Consider if **three statutory criteria** for Safeguarding Adults are met.

Section 42 (1) Three Statutory Criteria

REASONABLE CAUSE TO SUSPECT that an adult (over 18 years)

- Has needs for care and support
- ❖ Is experiencing, or is at risk of abuse or neglect AND
- * As a result of their needs is unable to protect themselves

<u>Risk/risks:</u> Can be perceived in different ways, important to consider with the adult the benefits of taking the risk but also the potential detrimental consequences. Adults may have resources to reduce/manage risk but there are also potential hazards based on past experiences, behaviours, current circumstances, or the frequency/duration of certain risk factors.

Assessing the capacity of the person to understand risks and consequences of their decisions is important. See Mental Capacity Act:

Risk factors could be:

- Local Community factors e.g. lack of social opportunities, lack of access to local services, housing conditions
- Social and peer factors e.g. lack of opportunities for social connection, or work, or to take part in volunteering/education, lack of opportunity to experience friendship or share values, or for taking part in cultural practices
- Family factors e.g. abuse/neglect, caring responsibilities, family's mental/physical health, family's financial situation, dysfunction (values/beliefs/culture), absence of supportive family members
- Individual characteristics e.g. personality/life experience, values/beliefs/resilience, physical and mental health conditions/disabilities, living situation, personal finances, behaviours and lifestyle
- Social and political factors e.g. socio-economic stigma, discrimination, cultural norms and cultural identity, popular culture and media, literacy and technological engagement, access to benefits and income

Definitions are underpinned by the <u>Care Act 2014</u> and associated guidance.

Factors to consider when raising a concern

Agencies should consider the following:

- Have you considered if the **Three Statutory Criteria** are met?
- Have you discussed your concerns with the adult?
- Does the adult understand what has happened to them?

Section 42 (1) Three Statutory Criteria

REASONABLE CAUSE TO SUSPECT that an adult (over 18 years)

- Has needs for care and support
- . Is experiencing, or is at risk of abuse or neglect AND
- As a result of their needs is unable to protect themselves
- Have you discussed the presenting risks and possible outcomes with the adult? Have you asked the adult what they would like to happen?
- Have you sought consent from the adult to report a safeguarding concern? Is there a need to override consent?
- What do you need to do to **manage the immediate risks?** e.g. inform care home management, police, GP etc?
- Have you collected all the information you need to raise a Safeguarding Adults Concern?

Additional Resources:

- Deciding if you need to raise a safeguarding concern flowchart
- Local Government Association guidance <u>Understanding what constitutes a safeguarding concern</u>

Factors to consider when raising a concern

The first consideration must be: 'Does the adult require immediate support from emergency services?'

Establish the risks and what immediate steps to take. If the person is at immediate risk of harm, it is expected that the referrer will have taken appropriate steps to contact emergency services. If they are not, then the referrer needs to consider the following:

- ➤ The ability of the person to protect themselves during the referral process
- ➤ The ability of the person to make their own decisions about their safety, to understand the safeguarding process, and/or for any other specific decisions relevant to the concern.
- Communication needs, whether an interpreter or other support is needed
- Whether it is likely that advocacy may be required
- ➤ What the adult at risk would hope to achieve as outcomes from the safeguarding process or in general
- > Personal care and support arrangements

Remember the five principles of the Mental Capacity Act 2005 and that the capacity to make one's own decisions can be undermined by the experience of abuse, exploitation, grooming, coercion, and/or undue influence or duress. Further information is available here.

Other considerations include:

- ➤ The extent of the person's vulnerability due to personal, environmental and social factors
- ➤ The nature and extent of the abuse including whether it is criminal
- Whether the situation poses a risk to the public or other people, including children under 18 years
- Whether the PACH is a person in a 'position of trust' and a potential risk to other people
- ➤ The length of time the abuse has been occurring and whether it is a one-off incident or a pattern of repeated actions
- ➤ The impact of the abuse on the adult and the physical and/or psychological harm being caused and whether the abuse is having an impact on other people
- The extent of premeditation, threat or coercion
- ➤ The immediate and likely longer-term effects of the abuse on their independence, well-being and choice
- ➤ The risk of repeated or increasingly serious acts by the person causing the harm



Obtaining the consent of the adult at risk

The mental capacity of the adult, their ability to give their informed consent to a referral being made, and action being taken under these procedures is significant but not the only factor in deciding what action to take. The test of capacity in this case is to find out if the person at risk has the mental capacity to make informed decisions about:

- 1. A safeguarding concern being raised
- 2. Actions which may be taken under multi-agency policy and procedures as a result of this concern
- 3. Their own safety or that of others including an understanding of longer-term harm as well as immediate effects
- 4. Their ability to take action to protect themselves from future harm

As a professional, you are expected to make the person referred aware of the concern you intend to raise and get their consent unless you have reason to believe that getting their consent would put them at risk of harm.

If the person is assessed as not having capacity to make an informed decision and it is considered that they are at risk of, or have experienced harm, then you should consider if:

- > in taking this referral forward, you are acting in the person's best interests where they lack capacity to consent to it
- there is evidence that the person is under undue pressure to withhold consent
- > your referral is a matter of vital or public interest

If there is any doubt that not sharing the information may put the person at risk of harm, information should be shared to prevent harm to the person.



Consent continued

With reference to <u>Making Safeguarding Personal (MSP)</u>, the expectation is that where the person cannot themselves participate in the safeguarding process, they either have support from an advocate to participate or an advocate speaking on their behalf. Such as a friend, family member, significant other, or a paid advocate, ensuring that the person's views are represented and taken into consideration.

Where the person is found to lack the mental capacity to make the relevant safeguarding decision, an Independent Mental Capacity Advocate (IMCA) may be involved under the Mental Capacity Act 2005, especially where the person has a Safeguarding Plan. Where the person is found to have substantial difficulty in making the decision, the paid advocate would usually be an advocate under the Care Act 2014.

Raising a concern when the adult does not want any action

- If the adult can make their own decisions and does not consent to a referral and there are no public or vital interest considerations*, they should be given information about where to get support to promote their safety and how to raise any future concerns if the abuse and/or neglect continue. A record must be made of the concern, as well as the adult's decisions and the reasons given. A record should also be made of what information the person at risk was given.
- The referrer must assure themselves that the decision to withhold consent is not made under undue influence, coercion or intimidation.
- The Adult Safeguarding Team can be contacted for advice about what to do next.

^{*} If there is an overriding public interest or vital interest i.e. where there is a high risk to the health and safety of the adult or others, or if gaining consent would put the adult or others at further risk, a s42 referral must be made.

Information the safeguarding referral/concern might contain



This is not an exhaustive list. It is important to give as much information as possible in the report. If you do not provide a full account of what has happened, the process of protecting the adult at risk may be delayed.

- ✓ Demographic & contact details for the adult at risk, person who raised the concern and any other relevant individual, specifically carers and next of kin
- ✓ Factual details of what the concern is about; what, when, who, where
- ✓ Basic facts, focusing on whether or not the person has care and support needs including communication and on-going health needs and how as a result of these they are not able to protect themselves from abuse and/or neglect
- ✓ Immediate risks and any actions taken to address risk
- ✓ Preferred method of communication
- ✓ If reported as a crime details of police station/officer, crime reference number etc.
- ✓ Whether the adult at risk has any cognitive impairment which may impede their ability to protect
 themselves
- ✓ Any information on the person alleged to have caused harm

Information the safeguarding referral/concern might contain



- ✓ Wishes and views of the adult at risk, in particular consent. Also what they want to achieve in the safeguarding process.
- ✓ Advocacy involvement (includes family/friends)
- ✓ Information from other relevant organisations for example, the Care Quality Commission
- ✓ Any recent and long-term history (if known) about previous concerns of a similar nature or concerns raised about the same person, or someone within the same household
- ✓ To prevent a delay in raising concerns, alerts to the Local Authority should usually be made by contacting the Adult Safeguarding Team on 01793 463555 or by email at adultsafeguarding@swindon.gov.uk

Ensure you:

- ✓ Correctly recording the basic information e.g. names, contact information
- ✓ Consider whether there is anyone else at risk such as children or other Adults at Risk, and state this and who they are. Consider whether you need to make a Child Safeguarding referral. Further guidance on how to do this click here
- ✓ Explain medical terminology and what this means for the Adult at Risk, as the reader of the referral may not have any medical background

Not all concerns will necessarily result in a s42 Enquiry. For example, if the person makes an informed decision on not wanting a safeguarding enquiry to take place, where there is no abuse, or where a more appropriate response to the concern is signposting to another service such as a review of their current care plan. Many situations of self-neglect may also follow another pathway.

Reporting your concerns

In Swindon if you are worried about an adult and wish to report abuse. You can;

- ✓ Complete the online referral form: Multi agency safeguarding adults online referral form
- ✓ If the adult is in immediate danger, in need of medical attention or if a crime has been committed, contact the Emergency Services (Police and/or ambulance Service)
- ✓ For further advice or information contact the Adult Safeguarding Team, Swindon Borough Council Telephone: 01793 463555 or email: adultsafeguarding@swindon.gov.uk (office hours Monday to Friday inclusive, 8:30am to 5:00pm)

Local authorities, the Charities Commission and the Care Quality Commission each have varying reporting requirements. So it is important that you know the legal requirements of each, and report to them in a timely fashion.

Additional resources



Here are some resources which may assist in developing your safeguarding knowledge.

Swindon Safeguarding Partnership website: includes information about:

- ✓ local safeguarding policies and procedures
- ✓ <u>7 minute briefs and practice briefs</u> topics include professional curiosity, making safeguarding personal, safeguarding adolescents, mental capacity act and Making Safeguarding Personal.
- ✓ Learning from Safeguarding Adult Reviews
- ✓ Adult safeguarding and domestic abuse guide to support practitioners and managers Swindon Safeguarding Partnership
- ✓ <u>Safeguarding Adults in Swindon: a leaflet for staff which provides information about reporting abuse or neglect.</u>
- ✓ <u>local training</u> available to professionals
- ✓ <u>Understanding what constitutes a safeguarding concern and how to support effective outcomes | Local Government Association − information/flowchart on page 7 for agencies/professionals to consider prior to referring</u>
- ✓ <u>Deciding if you need to raise a safeguarding concern Swindon Safeguarding Partnership</u>

Ann Craft Trust: a variety of resources in relation to safeguarding adults including:

- ✓ adult at risk definitions and terminology
- ✓ acronyms
- ✓ A Guide to Safeguarding Adults Ann Craft Trust
- ✓ Complete the <u>Safeguarding Checklist- A Free Assessment Ann Craft Trust</u>
- ✓ <u>Safeguarding Adults at Risk Key Legislation and Government Initiatives (anncrafttrust.org)</u>
- ✓ Six Principles of Adult Safeguarding ACT (anncrafttrust.org)
- √ How to recognise safeguarding issues can be <u>found here</u>

Additional resources



- ✓ <u>NCVO/KnowHow</u> a range of useful resources for the voluntary sector to aid steps to a safer organisation including resources for the 'Are They Safe' Campaign
- ✓ <u>Briefing for practitioners Analysis of Safeguarding Adults Reviews | Local Government Association</u>
- ✓ <u>Adult safeguarding and domestic abuse guide to support practitioners and managers Swindon Safeguarding Partnership</u>
- ✓ <u>Social care institute for excellence (SCIE)</u>
- ✓ Age UK: <u>Safeguarding older people from abuse</u>
- ✓ MIND: Legal rights- health and social care rights-safeguarding.
- ✓ Community Care
- ✓ Research in Practice: <u>adults</u> and <u>children</u>