



& our **Partners,**

**Committed to
Safeguarding Adults**



Keep Safe in Harrow

- a guide to safeguarding for staff
and volunteers working with adults
with care and support needs



in partnership with:



Introduction

Safeguarding means protecting an adult's right to live in safety, free from **abuse** and **neglect**. Safeguarding involves staff, volunteers and organisations working together to stop abuse and neglect occurring, and intervening effectively in situations if we do see abuse taking place.

When do safeguarding responsibilities apply?

Safeguarding does not mean protecting every adult from every kind of harm or risk to their own personal safety. Professionals have a general duty of care to the people they work with, particularly people who may be marginalised, vulnerable or at risk in some way, however the Care Act tells us that **statutory safeguarding responsibilities** only apply in specific circumstances. These are where an adult:

- *has needs for care and support (whether or not these needs are being met); 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*

What does 'care and support needs' mean?

The term 'care and support needs' means the mixture of practical, financial and emotional support for adults (over the age of 18 years) who need extra help to manage their lives and be independent. For example, people with care and support needs might be: elderly and frail due to ill health, disability or cognitive impairment; have a learning disability; have mental health needs, including dementia; have a long term illness/condition; misuse substances or alcohol.

Who is responsible for safeguarding?

We all are. Safeguarding is 'everybody's business'. Anyone could be the first person to spot abuse. Everyone has a duty to take appropriate action if they become aware of an adult with care and support needs who may be experiencing or at risk of abuse or neglect.

The Care Act 2014 places adult safeguarding on a statutory footing and the law now tells us very clearly that we have a statutory duty to co-operate, to work together and to share information in order to deliver our safeguarding responsibilities. Every practitioner has a part to play in this.

What is Abuse?

Abuse is a violation of one person's human or civil rights by another. There are lots of different ways that human beings can abuse or harm one another. The guidance to the Care Act gives us some examples:

Physical abuse: such as rough handling, unreasonable restraint, hitting, burning, pushing or kicking, locking someone in a room

Sexual abuse: such as inappropriate touching or forcing someone to take part in or witness any sexual act against their will

Psychological/Emotional abuse: such as acts of intimidation, bullying, shouting, swearing, taunting, threatening or humiliating

Financial abuse: such as theft, fraud, coercion over wills, misusing money, property or other belongings without permission

Discriminatory abuse: such as ill-treatment or harassment based on age, sex, sexuality, disability, religious beliefs or ethnic group

Institutional abuse: through rigid regimes, systemic poor care, poor organisational culture, lack of resources, denial of choice, lack of dignity and respect for users

Modern slavery: such as human trafficking, forced labour and domestic servitude

Domestic abuse: including psychological, physical, sexual, financial, emotional abuse; and 'honour' based violence

Neglect: such as failing to provide food, heating, equipment, care or medicine

Self-neglect: covering a wide range of behaviour, including hoarding, failing to attend to personal care needs, failing to maintain property in a safe condition

Why does abuse occur?

There are lots of factors and reasons behind why abuse occurs. Abuse is not always an intentional or a deliberate attempt to cause harm. It can arise out of stress, insufficient resources or lack of knowledge and skills. But abuse is often perpetrated in circumstances where one person (or persons) has *power* or *control* over another individual.

Who can be responsible for abuse occurring?

It can be anyone. However the person responsible for the abuse is very often well known to the person being abused. It could be a spouse; partner; son; daughter; relative; friend; carer or neighbour; a paid carer or volunteer; a health worker; a social care worker; another resident or service user; a visitor or someone who is providing a service to the person.

Where does abuse take place?

Abuse can take place anywhere: in a person's own home, in day or residential centres, in supported housing, educational establishments, nursing homes, clinics and hospitals. It can occur on public transport, on the street or in other public spaces.

When does 'poor care' become 'neglect'?

There is no simple answer to this. But the Care Act Guidance makes clear that, in settings regulated and inspected by the Care Quality Commission¹, there are sometimes options other than safeguarding for dealing with quality of care issues e.g. increased contract monitoring or a themed inspection.

Making Safeguarding Personal (“no decision about me, without me”)

Helping people to make their own decisions about the way they live and the care they receive is fundamental good practice. Adults want control over their own lives and what happens to them. A practitioner’s approach to safeguarding should be no different: **safeguarding should not be a process we apply to people, but instead has to be something we do with them, on their own terms.** This means any adult with care and support needs should be in a position to confidently say:

- “I am asked my opinion if there are concerns that I might be at risk”
- “I get help or support to report abuse or neglect”
- “I feel listened to and what I say is taken seriously”
- “I know that decisions are taken in my best interest if I lack the mental capacity to make them and this is explained to me”
- “I am asked my views and this directly informs what happens next”
- “I am given the information I need and in the way that I need it”

Reporting a concern

If the adult is in immediate danger, take action at once such as calling emergency services or medical assistance.

Report any concern about a child to the Children’s Multi-Agency Safeguarding Hub (MASH)².

¹ Contact the CQC on 03000 616161

² duty&assess@harrow.gov.uk

This includes where you know a child lives in the same home as an adult you think may be experiencing or at risk of abuse.

You can refer your safeguarding concerns to the Council (for older people, including those with dementia; and adults with a disability/learning disability) or the Mental Health Trust (for people between 18 and 65 years with a mental health difficulty).

Contact numbers and email addresses are at the end of this leaflet.

Wherever possible, talk to the person about what they want to happen. Their opinion should always inform your actions, although you may still have a duty of care to act in some way, even against their wishes; for example:

- if you suspect the adult is being coerced or bullied into refusing support;
- if waiting to get their consent would put them at further risk;
- if there is a risk of harm to the adult or others;
- if it is necessary to prevent crime or if a crime may have been committed;
- if the adult lacks mental capacity to understand the risks they face

In these circumstances you ***must*** report your concern. The adult should always be told of your decision to report the concern and the reasons for this, unless telling them would put their safety, or the safety of others, at risk.

The key issue in deciding whether to report a concern without consent will be the level of risk of harm to the adult (or to any other adults who may have contact with the person or organisation causing the risk of harm). If you are not sure what to do, discuss your concern with the **Harrow Safeguarding Adults Team³**.

³ Telephone: 0208420 9453

Confidentiality and sharing information

Sharing information on a “need to know“ basis is essential to safeguard adults⁴. There is a duty to share information to stop or prevent abuse or neglect. But this needs to be balanced against your duty to protect the adult’s confidentiality.

A person’s right to confidentiality is not absolute - it may be overridden where there is evidence that sharing information is necessary in the public interest, is required by law, is necessary to protect personal safety, or where there are other legal reasons to do so. In some instances the individual will not have the capacity to consent to disclosure of personal information relating to them.

Where this is the case any disclosure of information needs to be considered against the conditions set out in the Data Protection Act and must be in the person’s best interest as per the Mental Capacity Act.

You should:

- wherever possible gain permission of the adult to share information. If consent cannot, or is not given, share information if you judge this is essential to protect the adult, and is in their best interests; or to protect others from harm
- only share the information necessary to protect the adult; and only with people who need to know

⁴ *The local information sharing protocol for Safeguarding Adults can be found at the Harrow Safeguarding Adults Board website: www.harrow.gov.uk/safeguardingadults*

What happens next?

When concerns are passed on to the Council or Mental Health Trust, it must first decide whether or not the criteria for making a formal section 42 safeguarding enquiry under the Care Act have been met. To make this judgment the Council or Mental Health Trust will normally gather information from the referrer, liaise with partner agencies who may know something about the situation, and talk to the person at the centre of the concern to find out their views. The Council or Mental Health Trust will then decide what is the best way to respond to the situation.

Section 42 Enquiries

Where the Council or Mental Health Trust has reasonable cause to suspect that the criteria is met and the person is at risk of abuse, a section 42 (Care Act) enquiry will be undertaken. The purpose of the enquiry is to find out whether any action should be taken, and if so what, and by whom. Remember, the focus is firmly on meeting the outcome the person wants, on their own terms i.e. “*no decision about me without me*’. The Council or Mental Health Trust may either undertake the enquiry itself, or it may cause another agency or individual to undertake it if they are best placed to do so. Partner agencies have a legal duty to co-operate with statutory safeguarding enquiries.

What do enquiries look like?

Enquiries are a statutory but flexible process. An enquiry could therefore range from a conversation with the individual to a much more formal multi-agency arrangement.

Safeguarding principles apply to any safeguarding enquiry (empowerment; prevention; proportionality; protection; partnership and accountability) and proportionality is a key factor in deciding on the most appropriate approach. However normally the process consists of:

- planning the enquiry (i.e. establishing who is doing what and by when)
- undertaking the enquiry
- evaluating and protecting (i.e. considering what, if anything, needs to be done, by who, and who needs to know)

Advocacy

Where the person at the centre of the concerns has substantial difficulty in participating in the enquiry, the Council or Mental Health Trust will identify a suitable advocate to assist them. Where necessary, this will be via a paid independent advocacy service.

The importance of the Mental Capacity Act

'Mental capacity' means a person's ability to make a specific decision or choice for themselves at that time. The starting point is always that adults have the capacity to make their own decisions and choices in life. However sometimes a disorder in mental functioning can mean that a person's decision making capacity becomes impaired - for example when someone develops dementia.

What does this mean for safeguarding?

Making Safeguarding Personal means working with the person on their own terms, rather than simply deciding what you think is best for them. However, if the person does not have the capacity to make a decision for themselves, then you as a practitioner may have to make that decision for them. You then have to act in their 'best interests'. This includes deciding how to respond if you have a concern about abuse or neglect.

What does 'best interests' mean?

Best interests means considering the past and present beliefs, wishes and values of the person, the opinions of others, and balancing risk against quality of life. It is important to note that best interests is NOT the same thing as always taking the safest and most risk averse option. A Court of Protection judge once said '**what use is keeping a person safe, if it merely serves to make them miserable**'?

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In summary - four steps to protecting adults with care and support needs from abuse and neglect

Recognise what you are seeing or hearing could be abuse or neglect. If the person is in immediate danger take action at once, such as calling emergency services or medical assistance

Make safeguarding personal: share your concerns with the adult, unless it is not safe or possible to do this. Listen to their views and ask them what they would like to happen next

Decide what to do: consider what the person wants and consider their mental capacity to understand the concern. If they are not able to understand, you will need to decide what is in their best interests to do by thinking about the level of risk to the adult or to others and who else may need to be informed. If the adult refuses support, consider if this is a sign of coercion by a perpetrator (e.g. domestic abuse) and if you need to act without their consent

Discuss the concern: and what to do with your supervisor/manager/person you report to, unless this would cause a delay that places the person at greater risk

Further information on adult safeguarding, mental capacity and full policy guidance can be found at the following website:

www.harrow.gov.uk/safeguardingadults

To raise a safeguarding adult concern the e-mail addresses and phone numbers are:

ahadultsservices@harrow.gov.uk

(for older people, including those with dementia; and adults with a disability/learning disability)

Tel: 020 8901 2680 (Access Harrow golden number)

cnw-tr.mentalhealthsafeguardingharrow@nhs.net

(for adults between 18 and 65 years with a mental health difficulty)

Tel: 0800 023 4650 (CNWL single point of access - SPA)