

Bridget Brickley Board Manager

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http://www.worcestershire.gov.uk/wsab



Virtual Training Protocol

- Mute microphones when not speaking
- Raise hand to speak or indicate in comment box
- Be Kind respect others views and perspectives
- Opportunity to reflect and learn
- Support Available if required (speak to us after confidential)

Bitesize webinars



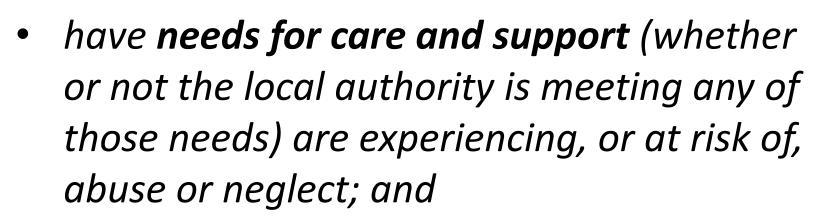
- 1. What is safeguarding and how to report it in Worcestershire
- 2. Role of the Safeguarding Adults Board
- 3. Mental Capacity Act and Best Interest Decisions
- 4. Making Safeguarding Personal
- 5. Safeguarding Adults Reviews
- 6. Engagement



Session 1 What is Safeguarding

- Overview of Care Act (2014)
- What is a safeguarding a concern
- How do you raise a concern in Worcestershire

Care Act (2014) Safeguarding Criteria To protect adults who



Adults Board

 as a result of those care and support needs are unable to protect themselves from either the risk of, or the experience of abuse or neglect.

Six Safeguarding Principles

Empowerment – support for individuals to make their own decisions

Prevention- Taking action before harm occurs or risk escalates Proportionality – the least intrusive/restrictive intervention required to the risks presented

Partnership – working across agencies, services & communities to prevent, detect & report neglect & abuse.

Accountability- Enabling SU's & leaders to challenge agencies for their responses to those at risk of harm

Protection- Supporting those in need as a result of abuse or neglect

Types of Abuse (Care Act 2014)

- Physical
- Sexual
- Psychological / Emotional
- Domestic Abuse/cohesive control
- Financial
- Exploitation
- Neglect
 - Institutional neglect and poor practice
 - Self Neglect
- Discriminatory
- Modern Slavery





- Where Can Abuse Happen
- In somebody's own home
- •In someone else's home
- •At a Day Centre
- •In care homes
- In hospital
- •At work
- •At college
- In a public place



- partner, relative or family member
- neighbour
- friend and/or another service user
- Carer
- staff member
- volunteer
- stranger

What the Safeguarding Team does



- Check that the criteria for S42 has been met
- Check adult has been spoken to and consent gained.
- Ensure safeguarding response is proportionate to concern raised
- Assess risk to the individual and others
- Co-ordinate S42 Enquiries / Non Statutory Enquiries
- Arrange for a safeguarding advocate when required.
- Chair planning and evaluation meetings with individuals.
- Liaise with Quality Assurance Team.
- Provide advice.
- Liaise with other agencies



What they don't do

- × log issues
- * become the case manager
- * manage care quality / contract issues
- **×** have a budget to fund care
- * manage complex cases with no S42 concerns
- mediate on behalf of teams
- **×** provide phone supervision



When to disregard Consent

- × Very High Risk to the Individual
- **×** A serious crime has been committed
- **×** Other people are at risk
- **×** Health or social care staff implicated
- **×** Coercion Involved
- * The alleged abuser has care and support needs and may also be at risk
- * The victim lacks the mental capacity to make a decision about their safety

The Challenges



 'what good is it, making someone safer, if it merely makes them miserable? We must tolerate acceptable risks as the price appropriately to be paid in order to achieve the vital good of the elderly or vulnerable person's happiness.'

(Lord Justice Munby – Re: MM)

When does poor care become serious harm There is evidence that many of the issues raised as safeguarding concerns – such as falls, pressure sores, wrongly administered medication or poor nutritional care – are rooted not in malicious harm but in poor practice and poor-quality care. Nonetheless, the impact on the adult at risk can be just as great, regardless of whether harm is intended (SCiE)

Poor Care



- A one-off medication error (although this could, of course, have very serious consequences).
- An incident of understaffing, resulting in a person's incontinence pad being unchanged all day.
- Poor-quality, unappetising food.
- One missed visit by a care worker from a home care agency.

Potential Causes for Concern



- A series of medication errors.
- An increase in the number of visits to A&E, especially if the same injuries happen more than once.
- Changes in the behaviour and demeanour of an adult with care and support needs.
- Nutritionally inadequate food.
- Signs of neglect such as clothes being dirty.
- Repeated missed visits by a home care agency.
- An increase in the number of complaints received about the service.
- An increase in the use of agency or bank staff.
- A pattern of missed GP or dental appointments.
- An unusually high or unusually low number of safeguarding concerns



Links and contacts

Reporting a safeguarding Concern:

https://www.safeguardingworcestershire.org.uk/report-it/