

A guide to

adult safeguarding

for social care service providers

Introduction

As a social care provider making sure that the people your workforce support have access to high quality care at all times is key. Protecting people's health, wellbeing and human rights. Enabling people who need care and support live free from harm, abuse and neglect is fundamental to high-quality health and social care.

This guide to adult safeguarding gives you a quick way of making sure that you have covered all the key aspects of safeguarding in your workplace. The guide will take you through ten key points of adult safeguarding and provide details of where to find further information.



1. Spend time understanding the work of the local safeguarding adults board

Safeguarding adults boards exist in most local authority areas. They are a multi-agency partnership charged with protecting adults from abuse, preventing harm and promoting best practice in both. They do this through having policies and procedures that all partners sign up to implementing. A web search will usually reveal the activities of your local safeguarding adults board.

A good example of a local safeguarding adults board is www.suffolkas.org, where there is a whole range of policy, procedure and literature in areas such as conducting internal investigations and managing allegations of abuse in residential and nursing homes.

The Care Act gave local authorities a duty to set up safeguarding adults boards and to make enquiries, or ensure that others do so, if it believes that an adult is, or is at risk of, abuse or neglect. This means that they could ask you to make enquiries if abuse or neglect is reported within your service.

The important thing to understand is how policies and procedures work in practice and apply to service providers. Try to find ways to bring policy to life and make procedures real and practical through seeing how people who use your service may have experienced abuse, be particularly at risk of abuse or neglect or benefit from particular approaches. Understand what is being said about service providers. Ask questions and test the policies and procedures in the reality of your service setting. If you feel there are gaps or aspects where there could be misunderstandings tell your local authority adult safeguarding manager.

Identify whether service providers are represented on the safeguarding adults board. This might be by a trade association or voluntary sector umbrella body. If they are, then make links to the representative. Ask for information about the board and its activities. If service providers are not represented consider offering to fulfil the role or to participate in a sub-committee or working group such as on training or quality assurance.

Because service providers often work with groups of people or have many customers safeguarding matters can be complex and involve repeated incidences. Often there is a need for reassurance that something that may have occurred for a single customer has not been taking place with others. Therefore, in particular, check whether the safeguarding adults board procedures have arrangements for large scale or whole service investigations. Consider how these might work in practice.

If you have to relate to more than one safeguarding adults board you should familiarise yourself with each one's policies and procedures. However make sure you know those of the one in the local area in which your service is registered. They will take the lead if there are any safeguarding concerns. Maintain an easily accessible list of contact details for your local safeguarding adults lead professionals. You never know when advice might be needed or a referral to be made.

2. Seek out opportunities to build local networks, connections and relationships

Being part of local networks and knowing fellow professionals will make it easier to identify and solve a range of inter-agency and multi-professional safeguarding problems.

Examples might include:

- pharmacy and medication
- police and community safety
- nursing and self-care
- GPs and talking through the best way to manage behaviour
- teachers and inter-generational workers
- housing officers and anti-social behaviour teams
- fire officers and home safety.

There are many other examples where local networking can have spin-off safeguarding benefits for your service and its customers.

Having an open and transparent service will engage families, visitors, local tradespeople, and essentially the public in understanding why you work like you do and what you are trying to achieve. Running a person-centred service entails working with risk – this has the potential to be harmful and/or beneficial for your customers. Time spent networking will help explain your approach to risk and safeguarding. This might come in good stead when something goes wrong and help promote your service when things go well. More can be found out about living with risk at www.skillsforcare.org.uk/livingwithrisk.

You may wish to consider developing connections and relationships with your local media. This could help you in a number of ways such as:

- marketing your service – explaining your approach to risk and safeguarding
- recruiting a safe and skilled workforce
- fundraising and sponsorship
- accessing the assets and strengths available in your community – both skills and facilities.

Both registered managers and social care business owners should consider possible community leadership roles. How can the school be supported? For example, making links with community organisations and schools, giving positive messages about disability can help to prevent bullying of people with disabilities. What is concerning community residents? What are the issues for businesses – parking, noise at night, disabled access? What are the changes at the local hospital? Can people worship the way they want to?

You might be able to do this through a trade association, the chamber of commerce or a business network or association. Many of these have breakfast and lunch meetings. They often communicate with each other through social media channels such as LinkedIn. All of these are opportunities help to promote what you do and prevent misunderstandings.

3. Find ways to share knowledge and experience of adult safeguarding

Join networks, membership associations and try to attend relevant local events. Consider participating in the work of the Skills for Care and the National Skills Academy for Social Care. If you are a registered manager, keep an eye on the learning and support materials offered by Skills for Care and the Social Care Institute for Excellence (SCIE). Make time to share knowledge and experience within your own organisation through team meetings and learning opportunities. Make use of newsletters and blogs as both reader and contributor.

Remember that we all have different ways of learning. Some of us like to read, others to listen and discuss or see a picture or diagram. Service providers' time is spent with people and every moment has learning potential. However there are good times to learn and those that are less helpful. People do not learn well when they are hungry or tired for example. The stress of safeguarding issues can make it difficult to impart knowledge and experience in a timely way. Try to anticipate learning opportunities rather than letting events dictate. Reflection time with colleagues after a safeguarding issue has been resolved can be invaluable in developing best practice.

Choosing training on adult safeguarding is important for your workforce. The key thing is to check that the learning provider not only understands adult safeguarding but does so from a social care provider's perspective. It is vital to know what the training is designed to achieve, who will be delivering it and how its quality will be monitored.

More information can be found within 'Choosing workforce learning', a guide for purchasers of learning in adult social care, available online at www.skillsforcare.org.uk/learningproviders.

Use this to ask questions to establish how training meets the requirements of customers, commissioners, the local safeguarding adults board and inspectors. Seek out training providers that will help you share knowledge and experience across your whole workforce and organisation as opposed to limiting learning to the training room or computer screen.

Additionally you may find the following links helpful:

- www.scie.org.uk/adults/safeguarding
For access to a wide range of safeguarding learning resources.
- www.nsasocialcare.co.uk/registered-managers
A gateway to support networks.
- www.leedssafeguardingadults.org.uk/training.html
for an example of what is available from most local safeguarding adults boards.



4. Know what inspectors consider to be evidence of effective adult safeguarding

Make sure you have a good understanding of the CQC fundamental standards.

Person-centred care - you must have care or treatment that is tailored to you and meets your needs and preferences.

Dignity and respect - you must be treated with dignity and respect at all times while you're receiving care and treatment. This includes making sure:

- you have privacy when you need and want it
- everybody is treated as equals.
- you're given any support you need to help you remain independent and involved in your local community.

Consent - you (or anybody legally acting on your behalf) must give your consent before any care or treatment is given to you.

Safety - you must not be given unsafe care or treatment or be put at risk of harm that could be avoided. Providers must assess the risks to your health and safety during any care or treatment and make sure their staff have the qualifications, competence, skills and experience to keep you safe.

Safeguarding from abuse - you must not suffer any form of abuse or improper treatment while receiving care. This includes:

- neglect
- degrading treatment
- unnecessary or disproportionate restraint
- inappropriate limits on your freedom.

Food and drink - you must have enough to eat and drink to keep you in good health while you receive care and treatment.

Premises and equipment - the places where you receive care and treatment and the equipment used in it must be clean, suitable and looked after properly. The equipment used in your care and treatment must also be secure and used properly.

Complaints - you must be able to complain about your care and treatment. The provider of your care must have a system in place so they can handle and respond to your complaint. They must investigate it thoroughly and take action if problems are identified.

Good governance - the provider of your care must have plans that ensure they can meet these standards. They must have effective governance and systems to check on the quality and safety of care. These must help the service improve and reduce any risks to your health, safety and welfare.

Staffing - the provider of your care must have enough suitably qualified, competent and experienced staff to make sure they can meet these standards. Their staff must be given the support, training and supervision they need to help them do their job.

Fit and proper staff - The provider of your care must only employ people who can provide care and treatment appropriate to their role. They must have strong recruitment procedures in place and carry out relevant checks such as on applicants' criminal records and work history.

Duty of candour

In reality, like person-centred approaches, safeguarding permeates everything that happens in social care settings and services. A simple way of remembering this is the mantra – a personalised service is a safe service and a safe service is a personal service – it is not about one or the other. If a person is not being treated with dignity and respect, does not have choices and control, then inspectors will ask if that person being abused harmed or neglected in anyway.

Therefore it is important to know and understand the relevant regulation and how that is translated by inspectors into what people who use services should experience. The prompts in the guidance are particularly useful and can be the basis of staff development and supervision.

How though, can evidence of outstanding, good or less than adequate services be identified? There is a concept known as triangulation that can be applied as much in self-audit and organisations' own approaches to quality assurance as by inspectors. Simply put this involves having at least three different ways of finding, testing and confirming a practice issue – good or bad.

An example would be that a relative tells you they don't like the way a customer has been spoken to, the communication log shows that there has been an altercation involving this customer and the police, plus the care plan shows that this customer has had a recent change of medication. There is a sufficient warning light to managers and inspectors to ask more questions and check what is happening.

How do inspectors collect evidence

Essentially, inspectors observe practice, make opportunities where they can listen to what customers and their relatives have to say, talk with staff and managers and ask other involved professionals for their views. They also check records. To triangulate they seek to do this at different levels – customer, service and organisation – using different methods and sources of evidence.

As a service provider you can replicate aspects of the inspection process in self-audit or you could work with peers or critical friends in checking on the quality of what you are doing. You will also be well aware that Care Quality Commission (CQC) are not the only inspectors – there is environmental health, fire, health and safety alongside Healthwatch.



5. Set and maintain a high standard of record keeping

There are a lot of records to be maintained by a service provider. The skills of record keeping are ones that are required by all practitioners. Standards of record keeping are set by management and how they are used to benefit customers are a matter of professional leadership. Records must be purposeful. Time spent with the service team on understanding why this is important will reap dividends in the quality and utility of records. Key records for adult safeguarding are:

- risk assessments
- care plans
- observations
- financial transactions
- complaints
- medication
- rosters and logs
- training, supervision and appraisal.

Record keeping is regularly identified as one of the safeguarding challenges. The Social Care Institute of Excellence (SCIE) offer a prevention checklist in respect of record keeping. It is slightly amended as follows:

- care plans are person-centred and accurate
- care plans include risk assessment and risk enablement
- there is evidence that staff follow care plans and they are regularly updated
- all records are clear in a manner that can be easily understood by others
- the registered manager regularly monitors the standard of record-keeping
- all records are accessible to those that need them while appropriate levels of confidentiality are maintained
- where the service manages any aspect of a customer's finances, either through their choice or lack of capacity, the records are

subject to robust and regular checks

- all record-keeping practice is regularly reviewed by management and frontline staff to ensure that it remains fit for purpose
- there is evidence that the service uses complaints to improve quality and practice
- there are records of regular staff supervision and team meetings and evidence that actions are followed up.

Record keeping is covered by the Care Quality Commission in outcome 21 and there are number of publications and e-learning modules on the subject. Recording, whether written or electronic, is a communication skill and one that must have purpose – in this case safeguarding. Ask yourself why it is important and what good recording should look like. You may conclude that clarity and accuracy are the most important elements.



6. Have regular and continuing dialogue with customers and commissioners

Make sure you know what you have contracted to provide whether the customer is private or publically funded. If the contract originates with your organisation then it should have clear expectations of actions in the event of safeguarding or related concerns being raised – this would include complaints, suspicions or allegations from customers, their relatives, visitors or members of the public.

If the contract is one from a commissioner make sure you know and understand what it says about safeguarding. If you have any doubts then ask questions as it can be too late once a contract is agreed. Do keep an open debate going about personalisation and safeguarding as sometimes these two fundamental principles of social care can appear to be in conflict with each other. There are tensions sometimes and these are often expressed as 'risk'. Customers and their representatives should be fully involved in understanding both the possible harms and benefits that can ensue from risk-taking. Difficulties can arise when people who use services have different views of 'risk' from commissioners, inspectors or their own relatives. Hence the necessity of a continuing dialogue as it is important that language is shared on the use of concepts such as personal choice, risk, harm, capacity, protection and prevention. If you take this approach, as a matter of routine, it can help make solving problems easier when they do occur.

The risk assessment and care plan are central to preventing harm and protecting people as well as supporting them to have a full and varied lifestyle of their choice. Clearly the customer, their family or representatives need

to be involved and contribute to undertaking such assessments, making and reviewing plans. Sometimes it is tempting to complete these as 'paper' exercises or over the phone or using checklists. However to safeguard people, it is interactions, relationships, dialogue and contact that alert us to danger as well as tell us what people like. So, as a service provider communicate, observe the practice of staff, listen to what customers have to say and make time and space to talk with people.

Invite commissioners to your service and go to forums they organise. Keep them apprised of the safeguarding challenges you face and listen to their perspective. Expect commissioners to attend reviews for customers. Write and let them know the outcome and progress a customer is making.

Remember there are many different methods and languages involved in communication. Make sure your dialogue is meaningful to the customer. After all, how will you know they are feeling unsafe or have been abused if there is no communication or worse, miscommunication?



7. Use case studies and practice stories to improve protection responses

Case studies can be used in team or customer meetings, in training sessions or as a platform for discussion in individual or group supervision. Try to see if the various members of your local social care system can work together to discuss the case studies and learn from them. As a service provider knowing and understanding how each would respond in your service or local area will help anticipate and solve problems.

Preparing a case study need not be daunting. In itself writing, drawing or telling a story can be a reflective experience that may help put an incident into context or throw up solutions.



As you can see from the pictures above most stories have a simple structure – a person or people who want to achieve something, a hurdle to get over and a pot of gold at the end. Or put another way - a person in need of protection, something that is getting in the way and being able to live safely.

Try keeping a file of these stories each time a safeguarding incident happens. To start with just make them factual. Mrs Y who lives alone and has early symptoms of dementia. She receives homecare who help her to prepare meals. The care worker notices that she is not eating the food but when she asks why Mrs Y says she is not hungry. This continues over a number of weeks. Mrs Y's daughter visits and is alarmed to see that her mother has lost weight and appears disorientated. She contacts the local authority and a safeguarding enquiry is started.

This example can be used to illustrate how by early reporting of concerns, recording, dementia awareness, risk assessment and Mental Capacity Act knowledge can prevent unnecessary safeguarding issues.

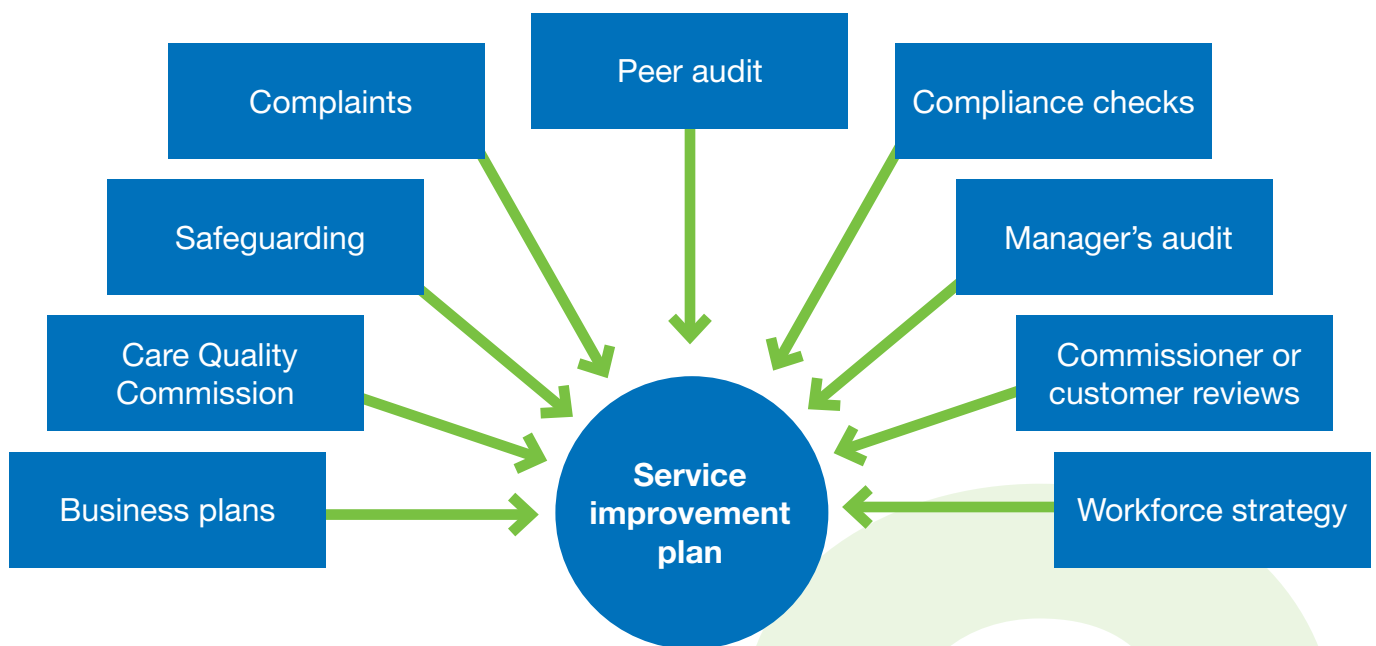
Now there are lots of 'ifs and buts' in what, at first, may appear to be a simple story. You can see how it can be used for learning and problem solving about a common safeguarding issue. It can be used in numerous settings and with different people. There are two questions to bring every story to life.

- what's the story about?
- what's it REALLY about?

8. Keep up-to-date service improvement plans going at all times

A service improvement plan is both a business planning tool and a way of assuring the quality of everything you do. It will make the joins between your priority activities to ensure a personalised social care service and the requirements of people and organisations that interact with you. A service improvement plan will show why you are providing a service, what you are seeking to achieve and how you are going about it – in terms of resources (including the workforce).

If a personal service is a safe service and a safe service is a personal service then the diagram below shows how a service improvement plan can be the channel that brings everything together for a service provider. It allows a service provider to be not just in control of their destiny in the event of safeguarding issues but to apply knowledge and learn from the experience – however painful.



Your service and those working within it can learn from any incidents, complaints, allegations or feedback from people who use the service and their friends and family. They can be captured in the service improvement plan alongside business and support plans for example.

The big tip here is recognise that safeguarding is not just a matter of compliance, it is integral to improvement and learning. Safeguarding and quality assurance of a service ought to go hand in hand. Having a single service improvement plan saves multiple and confusing action plans for everything that happens. Keeping a service improvement plan stops you being reactive and has you on the front foot in the event of a safeguarding matter.

9. Make sure your lead professional and registered manager has making enquiries and report writing skills

As a social care service provider the two skills of investigation and report writing are essential requirements for your registered manager and other lead professionals. Having these skills allow you to maintain control as an employer of all but the most complex safeguarding issues (usually those involving allegations about the manager themselves).

Why? Simply because safeguarding professionals, the Care Quality Commission and commissioners will have confidence that there will be an honest, open and considered response to incidents and to where things appear to have gone wrong. That matters will be investigated thoroughly and according to procedures and that a coherent report will be made available to those with legitimate interests. Critical is that the outcomes and recommendations will feature in the service improvement plan to demonstrate how the problem is being resolved.

Enquiry skills include clarifying, planning, preparing, interviewing and questioning, analysing and recording. Such skills development may be on offer from the local safeguarding adults board. Larger service providers may wish to offer training across their organisation so that it becomes possible for investigations to be conducted by people from outside the setting being investigated.

Report writing skills are an asset for social care managers and practitioners regardless of safeguarding. However, importantly in respect of safeguarding, they are about the documentation and analysis of evidence. All

reports should be written to a standard firstly where they can be understood by customers and second on an assumption that they might have to be made public in places like case conferences and possibly in a court of law.

A good report will say:

- what is the safeguarding enquiry being investigated and why?
- the method used to gather data and information
- description of what happened – sometimes called a chronology of events
- findings – carefully focussing on facts and identifying where things are views or opinions
- analysis – what the facts indicate and comment on weight of opinion
- conclusions – was, on the balance of probability, the safeguarding alert or complaint, found to be justified
- recommendations – actions to go into a service improvement plan. Should focus on ensuring the customer is protected, that further recurrence is prevented and good practice and learning promoted.

Like all skills, enquiry and report writing ones need practice. Try to give professionals opportunities to investigate and write reports with supervisory support.



10. Safeguard your business by making safeguarding everyone's business

Make sure everyone who has any contact with your service knows from day one what to do if they suspect someone is being abused or neglected. Make sure safeguarding threads through everything you do alongside person-centred care including:

Statement of purpose

When you document your overall mission and reason for being, include recognition of safety and quality. This is an important touchstone.

Welcome pack

Your marketing materials, website and customer welcome pack should all contain information and advice about safeguarding. People using services should have easy access to a range of ways of complaining and commenting on the service they receive.

Workforce strategy

As a service provider the most important person you recruit is the registered manager and lead professional. They apply and set standards. It is important that they demand more than basic compliance and seek continuous improvement. Equip your registered manager with workforce planning and development skills. It is the workforce who is the greatest asset but also potentially the major vulnerability in meeting safeguarding standards.

Induction

Spend time on the first few weeks and months of an employee's time with you. Yes, this is about putting in place the basic training to allow somebody to practice safely, but it is also about having people with the values and principles to meet your avowed purpose. You may wish to consider making use of the Skills for Care 'Values Based Recruitment and retention' toolkit (www.skillsforcare.org.uk/values)

Knowledge and skills development

Learning and development for safeguarding adults is partly about recognising the signs of abuse and knowing what to do, but it is more than that. It is about developing the professional confidence to apply judgement in situations of risk and in all the activities of daily living. Think safeguarding, act personal. Think continuing professional development in safeguarding.

Whistle-blowing

It should go without saying that all staff and visitors to a service should know what to do if they think somebody is being abused or neglected. However they should also know what to do if they think the person they have trusted to act is not appearing to do so or if they wish to remain anonymous. Tell people where to take their concerns including to the Care Quality Commission.

Violence at work

A workforce that is looked after is more likely to safeguard customers. See Skills for Care materials online at www.skillsforcare.org.uk/combatingviolence.

When we say everyone's business we include your insurers, legal advisers, accountants and HR support as well as care practitioners, visitors, students, people using the service and their families. For a service provider it makes business sense to make safeguarding everyone's business.

Additional resources to help you

The Social Care Commitment

The Social Care Commitment is the adult social care sector's promise to provide people who need care and support with high quality services. Signing up to and meeting the Social Care Commitment will go a long way towards assuring quality for a social care service provider.

For more information visit www.thesocialcarecommitment.org.uk.

Common core principles to mental health

The common core principles to mental health and supporting 'Principles to practice' guide offer a comprehensive framework for the social care workforce to provide consistent high quality social care and support which promotes the mental health and wellbeing of people who need care and support.

For more information visit www.skillsforcare.org.uk/mentalhealth.

People Performance Management toolkit

We have produced a new toolkit in partnership with NHS employers to support managers in social care and health with their responsibilities for people performance management. The toolkit aims to encourage and enable better performance management practices at all levels of health and social care, particularly among managers of people who deliver care at the frontline.

For more information visit www.nsasocialcare.co.uk/people-performance-management.

Culture toolkit

Skills for Care has developed the 'Culture for care: your toolkit' for all social care and support employers, regardless of size or services delivered.

The toolkit explains why a positive workplace culture is so important, details the business benefits for culture and provides activity sheets and scenarios to help providers embed a positive workplace culture.

For more information visit www.skillsforcare.org.uk/culture.

The principles of workforce redesign

To help organisations who are undergoing any form of organisational restructure or transformation, Skills for Care has developed the 'Principles of Workforce Redesign'. The seven principles set out the key things you need to take account of when changing the way your staff work.

For more information visit www.skillsforcare.org.uk/powr.

Notes

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