Peoples Directorate One Minute Guide



Information for Practitioners on Safeguarding Concerns

Workers across a wide range of organisations need to be vigilant about adult safeguarding concerns. Findings from Safeguarding adult reviews have sometimes stated that if professionals or other staff had acted upon their concerns or sought more information, then death or serious harm may have been prevented. **No professional should assume that someone else will pass on information which they think may be critical to the safety and wellbeing of the adult.**

What is a Safeguarding Concern?

A safeguarding adult concern should be made when you have **reasonable cause to suspect** that the adult has:

a) needs for care and support (whether or not the authority is meeting any of those needs) and

b) is experiencing, or at risk of, abuse or neglect?

(S42(1)(a) & (b) Care Act 2014)

The term' needs for care and support' is not precisely defined within legislation but an adult with care and support needs may be:

- an older person
- a person with a physical disability, a learning difficulty or a sensory impairment
- someone with mental health needs
- a person with a long-term health condition
- someone who misuses substances or alcohol to the extent it affects their ability to manage daily living tasks.

Consideration of the above needs to be person-centered as, for example, not all older people will be in need of care and support. Likewise, all circumstances of the concern are individual, and practitioners should not limit their view of what constitutes abuse or neglect. It is also about considering if the person is **at risk of abuse or neglect** rather than solely focusing on if abuse or neglect has occurred or is occurring.

The referrer, where safe to do so, should discuss this concern with the adult and ascertain if they wish to raise the concern themselves or if they require support to do so. If the adult does not want a concern raised, then raising a concern may be justified, for example, where there is a vital risk to the person or others, where there is a public interest consideration or issue, or where a best interest decision needs to be made (where the adult lacks mental capacity to make the decision).

Role of Local Authority

Practitioners within the local authority must take safeguarding referrals seriously and consider S42(1a & b) alongside the third criteria under S42 (1c) of the Care Act 2014 with the referrer and in gathering further information.

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Practitioners need to consider the following when conversing with the referrer:

- What is working well in supporting the adult's wellbeing, what are the strengths in their life?
- What are you concerned about? Why are you referring now? What is the current impact on the adult and/or others in the situation? Including on their wellbeing?
- What does the adult want to happen?
- Does the adult have care and support needs? Are they experiencing or at risk of abuse/neglect?
- What are the complicating factors? Is there coercion, control, duress or undue influence? Do they have mental capacity? Advocacy?
- What is your perception of the risk and level of risk to the person and others? What are the perceptions of the adult or others?
- What actions have been taken so far?
- Any relevant historical information?
- Any reasonable adjustments?

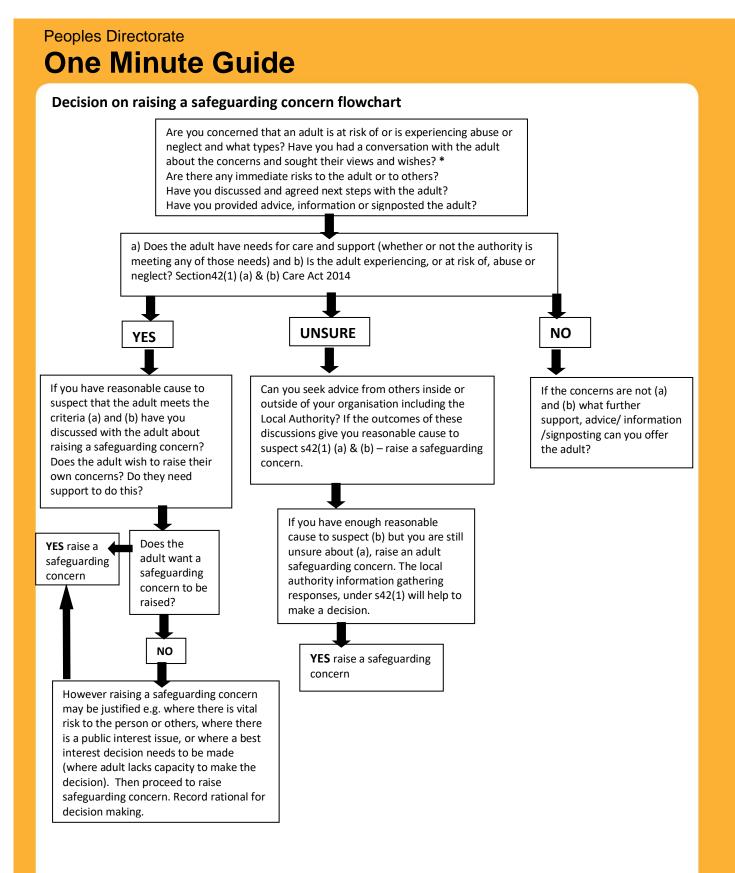
Key Considerations regarding making decisions about safeguarding concerns:

- Six statutory safeguarding adult principles, alongside application of Mental Capacity Act (2005) principles
- Strong focus on the person's wishes and offering support for decision making where the adult has a 'substantial difficulty' in being involved
- Transparency about decisions made
- Partnership co-operation to address wellbeing issues

Incidents of abuse may be one-off or multiple and affect one person or more. Practitioners need to look beyond single incidents or individuals to identify patterns of harm. Repeated instances of poor care may be an indication of more serious issues and what we now describe as organisational abuse. In order to see these patterns, it is essential that information is recorded and appropriately shared.

Making safeguarding personal does not mean 'walking away' if a person declines safeguarding support, there is still a duty to consider how to reduce or manage risk. It is essential to have robust records of the rationale for decision making and **those who** have raised concerns should receive feedback about the decisions made.

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*There may be circumstances where the safety of the adult or yourself prevents this from happening. If you have concerns but it is not possible to have conversations with the adult, then if in doubt, continue with the process and raise a safeguarding concern.