

Association for Real Change (NI)

Response to Draft Adult Safeguarding Policy for Northern Ireland Prevention and Protection Partnership Consultation

**Association for Real Change (NI)
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January 2015

Overview

The draft document acknowledges the importance for the services provided to be appropriate to the adult at risk and not discriminate because of disability, age, gender, sexual orientation, race, religion, culture or lifestyle. It sets out the primary focus/point of decision-making must be as close as possible to the adult at risk, and individuals must be supported to make their own informed choices. It is crucial that adults at risk must be offered support services as appropriate to their needs.

The draft document also follows the current mental capacity bill by the presumption that adults have the mental capacity to make informed decisions about their lives. The new procedure for Safeguarding Adults has acknowledged the importance of listening to the vulnerable adults and not just allowing the services to go on around them. It is important that the person is allowed to make a decision for themselves at the time the decision needs to be made. Individuals must be given all appropriate help and support to enable them to make their own decisions or to maximise their participation in any decision-making process.

Any decision made, or action taken, on behalf of someone who lacks the capacity to make the decision or act for themselves must be made in their best interests. It is important that an individual's mental capacity is considered at each stage of the Safeguarding Adults process, as one unwise decision does not mean they lack capacity to make other decisions.

It is equally important that these procedures are managed and administered in such a way as to comply with all the articles of the Human Rights Act. What this means is that both the process and the outcome must be the least restrictive, proportionate and enable risk where appropriate. In addition, any actions falling under these procedures should be consistent with current legislation.

Opinions of the Telling it Like it is (TILII) Advocacy Group

This group of individuals with learning disabilities gave their thoughts on the draft policy and how it would best help them to be safe but also take into account their individual needs and not restrict their chances to lead a full life.

The group as a whole commented that they often find staff can be over protective and cautious which leads to them not being allowed to take part in activities that they would like to. They stressed the importance of being able to take positive risks because it is an important way of trying new things and learning new skills. They felt that having access to information to make more decisions is in itself a right and an important tool to empower each individual with a learning disability to lead a full life with the same rights as everyone else. Some of the members spoke of personal experiences of people, including staff, treating them like children instead of adults. They said that staff should see them as adults and help them by explaining things in plain English and where needed, using easy read and pictures. It is crucial that the staff that supports them have the patience to listen and inform them of the pros and cons of a situation to help them understand the full picture so they can then make an informed decision. This went further not just to include their close support staff but also for example medical staff. They felt that often the staff or carers

accompanying them to medical appointments were spoken to and they, as the patient requiring care were not included. They suggested that training from people with learning disabilities should be made mandatory for health and social care staff so that they understood how people with learning disabilities felt, how they wanted to be treated and how important it was to include them in all of the issues that affect their lives. However, all members expressed that they felt ill equipped to phone police, attend doctor's appointments or report a safeguarding issues on their own. Although they lacked confidence, they still felt that the fear of something going wrong, or them not understanding the situation was worse than someone speaking for them, or over them. They stated that they would like to work together to improve their confidence, skills and abilities to enable them to report things on their own. As a result of this discussion one of the members suggested a helpline run by people with learning disabilities, which they could report issues or concerns to. They said this would be less intimidating and would help them to build confidence and overcome their fears.

Another issue that was high on their agenda was the need to challenge professionals and carers fears of people with a learning disability having relationships. They had a right to be treated like everyone else and part of that was the right to have a sexual relationship. The discussion highlighted that though this would raise some safeguarding concerns in different ways depending on each individual circumstances, it was still their right to find the answers to help them have full sexual relationships and said that they understood the importance of safe sex so as not to pass on sexually transmitted diseases.

The Underpinning Five Principles of the policy (4 page 8) do seem to address many of the above issues because it promotes the importance of Rights, Empowering individuals, being person centered and having a consent driven approach which in theory sound brilliant as long as this does translates into practice. This would be an ambitious and aspiring change in practice if successfully achieved.

Draft Policy Aims

The Aims of the policy are clear and cover the crucial issues. They emphasize the importance of organisations working collaboratively across sectors and on an inter agency and multi disciplinary basis to introduce a range of preventative measures to promote an individuals capacity to keep themselves safe and to prevent harm occurring. There is a good deal of clarification provided on the safeguarding continuum (11. page 8) from prevention to protection, which is crucial. However, based on historical cases of abuse, many of the following serious case reviews have noted the failure of communication and information sharing across agencies, which resulted in serious harm or death to the abused vulnerable adult. In section 14.2 the policy does discuss information sharing and the parameters of confidentiality but it needs to be robust so that not only is communication across the agencies of paramount importance, information sharing which is the key to delivering better and more efficient services that are coordinated around the needs of the individual is given equal weight – moving towards a preventative approach rather than a responsive model. It is essential that there is a recognized accountability so that failure to pass on appropriate, relevant and up to date information has a consequence. This is to make sure that communication and information sharing is integral and will enable early intervention and

preventative work, for safeguarding, for promoting welfare and for wider public protection. Communication and Information sharing is a vital element in improving outcomes for all.

The policy also identifies the organisations that it applies to and strives to ensure that it covers all organisations who have a duty of care to adults, those organizations that provide services, and those individuals who provide personal care funded through direct payments or through an individuals; own funds.

There is concern that smaller organisations would have insufficient infrastructure to perhaps enforce all of the requirements and therefore could result in the closure of community services. This is a difficult issue as safeguarding is of paramount importance yet acknowledgement and resource should be provided to enable those smaller organisations to operate within required policy whilst ensuring that people with learning disabilities attend diverse provision to help towards a fulfilling life.

Section 8 continues the theme of promoting safer organisations and communities, again in theory this is an excellent opportunity and an important issue that would greatly enhance the vulnerable adults life, though changing people's mind set with policies and procedures is no easy task. However, any step on the ladder to help promote inclusion and a safer community for all must be commended so the aims of the Building Safer, Shared and Confident Communities are welcomed.

Definitions Of Abuse

The policy covers all of the definitions of abuse with clarity but with the exception of self-harm and self-neglect. Often self-harm manifests from an underlying problem resulting from another form of abuse taking place which cause the individual to self harm. It is ARC's view that this is a safeguarding issue and needs to be included within the definition rather than assume it is covered by the statement 'this list is not exhaustive'.

Safeguarding Champion

This nominated role set out in the policy has caused an element of confusion. First the name itself portrays an inappropriate image for such and emotive subject, possibly manager or coordinator would be a better title. Also it was not clear if this role is the same as Designated Adult Protection Officer or an additional role. The document states that the DAPO in the HSC trust will fulfill the role of Adult Safeguarding Champion and also states depending on the size of the organisation there may be more than one. It is quite an exhaustive role, which seems to include all the responsibilities of the adult protection officer. This section needs more clarification as to whether this is just a name change or an additional role. It is crucial whoever is taking the lead role ensures that there are effective systems of assessment, care planning, service design, delivery, and monitoring in place and that these systems promote safety and protection. It is ARC's view that a Champion's role is to ensure the knowledge is instilled within workforce through induction processes, L&D opportunities and that the organisation aspires to incorporate best practice discussions enabling individual staff members reflective practice and an increase in confidence of

theory. A Designated Officer's role is overseeing the implementation in practice, providing direction and support should workforce require assistance with potential cases. Different organisations may call these roles different names and in small organisations the two roles may be reasonably undertaken by one person. This flexibility of how is best determined by each organisation, however the expected responsibilities require further clarification through this consultation.

Training

The policy highlights the need for training and suggests that NISAP, who are a regional collaborative body led by the HSCB are going to be developing a Regional Adult Safeguarding Training Framework. Training with defined, measurable objectives that meet the relevant needs of each staff member is crucial and would need to be monitored and evaluated to make sure it is meeting its objectives. Each organisation would need to make sure that learning and development follows the suggested continuous learning approach because no matter how robust the policy is alongside any training provided, practitioner's roles evolve with the changing needs of the individuals. There will always be room for improvement and working collaboratively with experts carers and the individuals with learning disabilities to make sure all the knowledge needed is out there would be considered best practice.

As suggested previously within this response, TILII, the advocates with learning disabilities proposed the learning outcomes available to staff should address:

- How to best support someone with a learning disability
- First hand account of what it is like to live with a learning disability
- How to communicate with someone with a learning disability

TILII proposes these learning outcomes should become a mandatory training requirement for all levels of staff working, or with responsibility for safeguarding vulnerable adults.

Recommendations

- ARC recommends the need for *clear protocol and robust procedures in relation to information sharing and communication across agencies to ensure efficient services coordinated around the needs of the individual*. Thus moving towards a preventative approach rather than a responsive model
- ARC recommends self-harm and self-neglect be included within the definition of abuse
- ARC recommends clarity of Champion and Designated Officer role is provided stating clearly all responsibilities falling within each role
- ARC recommends training for staff to ensure they are fulfilling their role in safeguarding process must have defined, measurable objectives that meet the relevant requirements of each staff's role and effectiveness of training should be monitored and evaluated

- ARC recommends the need to for professionals to undertake specific training in diverse communication skills/techniques to enhance their ability to be approachable to a person with a learning disability ensuring they are including service users in all aspects of their health and well being
- ARC recommends training delivered by people with learning disabilities for Health and Social Care staff should be compulsory, to include the following learning outcomes:
 - Partnership collaborative working with staff and vulnerable adults to improve and enable confidence, skills and abilities of Service Users to report and recognise abuse
 - Equip staff with the knowledge and skills to adequately support people with learning disabilities to make/take 'positive risks', which are part of living a full life.
 - How to provide person centred support

In conclusion

ARC has offered the above recommendations to enhance the policy and strengthen the support offered to vulnerable adults, but acknowledges that the overall procedures and processes in the policy require staff to take strong, early action when there are concerns about poor practice and any form of abuse including 'low level abuse' because at its heart it recognises that there should be zero tolerance, but also takes into account the need to ensure the availability of support for people with learning disabilities who abuse others.

It recognises the need to commission a range of advocacy and self-advocacy services and ensuring that those services are adequate and effectively monitored and reviewed. It ensures that people with learning disabilities, their families and advocates are fully involved in the care planning process, ensuring that the design and delivery of any support packages are not just based on their perceived individual need but what they actually feel they need themselves

The biggest strength of the draft policy is that it not only places significant priority on safeguards, prevention and protection, it also recognises priorities such as empowerment and choice, which are also of paramount importance.