

Appendix 6

Guidance for people with concerns about adult abuse and how to raise an alert



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Section 1

1.1 Introduction

This booklet has been produced as a simple guide to help you:

- recognise an adult at risk
- identify when abuse may be occurring
- understand the different types of abuse
- understand when and how to report your concerns in accordance with the Protecting adults at risk: London multi-agency policy and procedure
- know what to expect from Adult & Community Services / South West London and St Georges Mental Health NHS Trust (SWLStG) when you make a safeguarding alert

You can obtain a copy of the Protecting adults at risk: London multi-agency policy and procedure and London Borough of Richmond upon Thames Local Safeguarding Adults Protocol by logging on to http://www.richmond.gov.uk/adult_protection

This booklet includes guidance on how to complete the Safeguarding Alert Form which can also be found on the website.

1.2 Who is an Adult at Risk?

The term adult at risk directly replaces 'vulnerable adult' and refers to:

An adult aged 18 years or over 'who is or may be in need of community care services by reason of mental, or other disability, age or illness; an who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation' (DH, 2000).

This definition is taken from the current Department of Health guidance to local partnerships. Other definitions exist in partner organisations.

Please refer to page 4 of the Protecting adults at risk: London multi-agency policy and procedures to safeguard adults from abuse for examples of an adult at risk and the vulnerability factors that contribute to someone being an adult at risk.

1.3 Definition of Abuse

Abuse is a breach of an individual's human right. This may be a single act or happen repeatedly over a period of time. This may be because of:

- Neglect
- Persuading someone to agree to something against his/her will
- Taking advantage of someone who is unable to give consent

It is vital to recognise abuse as early as possible and to take action.

1.4 Preventing abuse

It is everyone's responsibility to ensure that adults at risk are protected from abuse.

This means **sharing relevant information** with other agencies in a timely manner in order to prevent abuse occurring wherever possible.

This may be information concerning someone's general vulnerability due to their health condition, lack of support network, isolation, dependency on one person, new friends etc.

If you have seen / heard something that raises your concern that the person may be at risk of abuse please share this information with appropriate agencies in accordance with your own organisations sharing of information policy.

It is always best to be **open and honest** with the person themselves about the concerns that you have as the person has the right to know what information is being shared and with whom.

You can **help an individual to protect himself / herself** from abuse by enabling him / her to:

- access information about adult abuse
- access an independent advocacy scheme
- talk about any concerns they may have
- contact agencies including Adult and Community Services and the Police if required
- develop safe and supportive relationships with others

Staff can **minimise the risk** of adult abuse by:

- developing an awareness of what adult abuse is by attending up to date training
- acknowledging that it could happen to any adult at anywhere and at any time
- being alert to the support needs of carers
- being alert to risk factors
- attending staff meetings and regular supervision to discuss and learn about care practices which could be abusive
- accessing support from colleagues and managers as required

Carers can **minimise the risk** of adult abuse by:

- accessing support with caring for the adult at risk
- identifying appropriate ways to meet the adult at risk's needs
- finding someone to talk to about the caring experience

1.5 Types of abuse and indicators

Type	Examples	Signs and Symptoms
Physical	<ul style="list-style-type: none"> • Hitting/ slapping, scratching • Restraining without justifiable reason • Misusing medication • Deprivation of food, clothing, warmth and appropriate healthcare 	<ul style="list-style-type: none"> • History of unexplained falls or minor injuries • Unexplained bruising in well protected areas of the body • Malnutrition, bed sores, wet or inappropriate clothing
Sexual	<ul style="list-style-type: none"> • Rape or attempted rape • sexual assault or harassment • involvement in sexual activity or relationships which the person does not want or has not consented to; lacks of mental capacity to give consent to; coerced into because the other person is in a position of trust, power or authority 	<ul style="list-style-type: none"> • bruising or bleeding in the rectal or genital areas • torn or stained underclothing especially with blood or semen • sexually transmitted disease or pregnancy where an individual cannot consent to sexual acts
Psychological/ emotional	<ul style="list-style-type: none"> • feeling threatened or fearful of someone • spoken to in a way that is hurtful and/or demeaning • isolation or over-dependence that has a harmful effect on the persons emotional health , development and well-being • denial of basic human and civil rights such as self expression, privacy and dignity • preventing adult at risk from making choices 	<ul style="list-style-type: none"> • anxiety and confusion • withdrawing from social contact • appearing frightened

Financial	<ul style="list-style-type: none"> • misuse or theft of money • pressure in respect of wills, property or inheritance • exploitation 	<ul style="list-style-type: none"> • withdrawal of large sums of money which cannot be explained • personal possessions going missing from home • money missing from purse/wallet • extraordinary interest and involvement by the family/carer or friend in an individual's assets
Neglect	<ul style="list-style-type: none"> • ignoring medical or physical needs • failing to allow access to proper medical care • with-holding necessities of life • failing to provide adequate care • can be intentional or unintentional 	<ul style="list-style-type: none"> • a carer may not be aware of services that are available • carer may not understand the needs of the adult at risk • carer may have their own health issues • missed health appointments • person looking unwell, unkempt • loss of weight
Discriminatory	<ul style="list-style-type: none"> • discrimination on the grounds of gender, sexual orientation, race, disability, age, colour, language, religion or belief and politics • harassment 	<ul style="list-style-type: none"> • tendency to withdraw, fearfulness and anxiety • limited access to services or being excluded • loss of self esteem
Institutional	<ul style="list-style-type: none"> • mistreatment or abuse or neglect of an adult at risk by a regime or individuals within services that adults at risk live in or use, that violate the persons dignity • occurs when routines, systems and regimes of an institution result in poor or inadequate standards of care or poor practice which affects the whole setting 	<ul style="list-style-type: none"> • staff receive little support from management, inadequate training or guidance, poorly supervised • too few staff • rigid practices and inflexible routines • no person-centred plans • closed culture

1.6 What is a Safeguarding Alert?

All staff (professionals and volunteers) of any service involved with adults at risk have a duty to inform the relevant manager if they have a concern regarding abuse.

The Relevant Manager is the named Alerting Manager (usually the Safeguarding Adults Lead) in the organisation. The information provided to the Relevant Manager is the 'alert'. The manager will then make a decision as to whether to make a referral to Adult and Community Services / SWLStG.

Where the Relevant Manager is not available staff should consult a manager if appropriate and/ or make a referral themselves by contacting the Safeguarding Adults Referral Point (SARP).

Friends, family, neighbours or members of the public can also make a referral by contacting the SARP (see below).

Consent should be obtained from the adult at risk wherever possible however if the adult at risk does not consent to the alert being reported to ACS/SWLSGT a referral should be made without consent where:

- there is an over-riding public interest or vital interest,
- gaining the consent of the adult at risk would put the adult at risk at further risk, or
- you consider that the decision made to withhold consent is made under undue influence, coercion or intimidation.

1.7 How to report a Safeguarding Alert

A Safeguarding alert must be raised with your local Adult and Community Services / Mental Health Trust who can then co-ordinate an appropriate response to protect that person from harm and other adults that may be at risk of harm. There are a number of ways to refer as follows:

The Safeguarding Team does not take referrals. Referrals should be sent to the single point of access for LBRuT Adult and Community Services, which is the Access Team. Where the person is known to a particular Health and Social Care Team you can send this alert form or make a telephone call directly to the following integrated Health and Social Care Teams:

Team	Contact Details
East Sheen and Barnes	020 8487 1691
Richmond, Ham and Kew	020 8487 1691
Twickenham and Whitton	020 8891 7611
Teddington and Hampton	020 8614 5399
Richmond Community Mental Health Team	020 3513 3200
Twickenham Community Mental Health Team	020 8977 3156
Community Drug and Alcohol Team	020 3513 5679
Learning Disabilities Team	020 8487 5315

If you are not aware of the relevant team then the London Borough of Richmond has a Safeguarding Adults Referral Point - Adults and Community Services Access Team.

It doesn't matter if the person is already known to one of the above Health and Social Care Teams as the Access Team will be able to pass the details of the alert onto the relevant team where appropriate.

The Access Team is open during office hours 9am-5:15pm and 9am-5pm on Fridays. Calls will go through to the Emergency Out of Hours Team at other times during the week and at weekends.

SAFEGUARDING ADULTS REFERRAL POINT: 020 8891 7971

LBRuT also has a Safeguarding Adults and DOLS (Deprivation of Liberty Safeguards) Team. Although this is not the primary referral point if you have any queries regarding the Safeguarding Adults process you can contact the Team as follows.

Tel: 0208 487 5444

Email: safeguarding.adults@richmond.gov.uk

Fax: 0800 014 8629

The team does not have staff immediately available at all times therefore it is not appropriate to send your alerts to this address.

When you are raising an alert via the telephone please state clearly that you are reporting a Safeguarding Alert.

It is also recommended that you request the name and contact details of the person you are speaking to at Adult and Community Services/ South West London and St Georges Mental Health NHS Trust and keep this for your own records.

A Social Worker will contact you within 24 hours to discuss the alert and agree whether it will be progressed using 'Protecting adults at risk: London multi-agency policy and procedures to safeguard adults from abuse' or under Care Management procedures. You will also be advised of the outcome of any safeguarding investigation.

If you experience any difficulties in raising an alert or finding out information concerning an investigation please contact the Safeguarding and DOLS team on 020 8487 5444 or send an email to safeguarding.adults@richmond.gov.uk

Section 2 - Guidance on How to complete an alert form

This form is to be used by anyone who wishes to report concerns about the suspected abuse of an adult at risk or who has had a disclosure about abuse made to them.

It is important that this form is completed and sent to your 'Alerting Manager' as soon as possible. The Alerting Manager will then determine whether or not to report the alert to Social Services. In the absence of your Alerting Manager or Line Manager or where the concern relates to those parties please forward this alert directly to the relevant team (as above).

The requirement is for all concerns or disclosures to be reported to Adult and Community Services / SWLStG within 4 hours.

The alert form can be used as a guide to ensuring that relevant information is provided to Adult and Community Services / SWLStG however if all sections of the form cannot be completed fully please do not delay in raising the alert.

Section	Guidance
Section 1	<ul style="list-style-type: none"> • Details of the person reporting the concern to Adult and Community Services / SWLStG (alerter). • If you are a staff member this may be the Safeguarding Lead/ Alerting Manager or the person who raised the safeguarding concern (please refer to your own organisations procedures).
Section 2	<ul style="list-style-type: none"> • Details of the person who you suspect may have been neglected/ abused or is at risk of neglect/ abuse occurring. • If you are aware as to whether the person is known to specific health or social care services this is useful information as it speeds up the process of making decisions about how to protect the person.
Section 3	<ul style="list-style-type: none"> • Details of the person who you believe may have caused harm to the adult at risk. • If this is not known then please state 'not known'. If you do not know names but consider that the person alleged to have caused may be a Care Worker, family member, friend, Personal Assistant etc please state this.
Section 4	Select one or more of the 7 types of abuse.

Section 5	Select one or more of the relevant locations of abuse to match the type of abuse in Section 4.
Section 6	<ul style="list-style-type: none"> • Record details of the Incident / Concern / Disclosure including dates and any relevant information gathered so far. • Use the specific words used by the person disclosing wherever possible. • Identify what makes you think that abuse has occurred e.g. 'Bruise observed, not seen any bruises before, is able to mobilise independently. Person themselves could not say how the bruise occurred. Looks like it may have been caused by a blow to the arm, significant bruise, person stated husband gets angry.' • Who have you consulted so far? E.g. 'spoke to Care Worker who witnessed the incident. Care Worker reported that she saw the daughter take the envelope from the draw with the cash in it.' • How long have you known the adult at risk and in what capacity? • Have there been any previous concerns about abuse?
Section 7	If the police have been contacted please provide the name of the Police Officer who was spoken to and the person who made the call, the crime reference number (if received), police station and time of report.
Section 8	<ul style="list-style-type: none"> • What is the persons view of the incident / your concern and what support would they like? • What is the best way to contact the person? • Do they have an advocate or a family/ friend whom they would like us to contact on their behalf to advise of the situation or to liaise with regarding the Safeguarding Process?
Section 9	<p>Is the person at immediate risk of harm and if so what action has been taken to protect the adult at risk. E.g.</p> <ul style="list-style-type: none"> • one to one support provided • family contacted and adult at risk will be staying with them over the weekend <p>Note: if the adult at risk has declined any support please confirm whether they feel safe or whether you feel there may be any undue influence on the part of the person alleged to have caused harm that may be impacting on the adult at risks ability to protect themselves.</p>

Section 10	This section only needs to be completed if the alerter is not the person raising the alert (as detailed in Section 1)
Section 11	<ul style="list-style-type: none"> • Record the date and time the concern was raised i.e. when the adult at risk disclosed abuse/ when bruising was noticed/ when the incident was witnessed etc. • Record the date and time the alert was reported to LBRuT/ SWLStG. • A previous telephone call may have been made providing immediate details whilst this alert form is being completed or alternatively put the time that the form is being faxed or emailed. • If the form is being completed online the time of submission will be recorded so you will not need to fill in this section.

Section 3 - Safeguarding Adults Alert Form

This Form should be used to report concerns about possible adult abuse. It is not to be used to refer general concerns regarding an individuals health and well-being including concerns regarding self – neglect.

Please complete the Form within 4 hours of the concern being identified and send to Social Services (see 'How to Report a Safeguarding Alert'). Please refer to the guidance provided to assist in completing this form.

Section 1 – Details of the person reporting the concern

Name:	
Address:	
	Post Code:
Telephone (home):	(mobile)
Organisation (if appropriate):	
Position (if appropriate):	
Relationship to adult at risk:	

Section 2 – Details of the Adult at Risk

Name:	
Date of Birth:	
Address:	
	Post Code:
GP Name:	
GP Address:	
	Post Code:

Details of services involved with the person (e.g. District Nurse, Social Worker, Community Psychiatric Nurse):

Section 3 – Details of person(s) alleged to have caused harm

Name:	
Date of Birth:	
Address:	
	Post Code:
In what capacity do they know the Adult at risk:	

Section 4 – Type of Abuse

Allegation 1

- Physical
- Psychological/ emotional
- Financial
- Sexual
- Neglect
- Discriminatory
- Institutional

Allegation 2

- Physical
- Psychological/ emotional
- Financial
- Sexual
- Neglect
- Discriminatory
- Institutional

Section 5 - Location of Abuse

Allegation 1

- Mental health inpatient setting
- Other health setting

- Acute hospital
- Community hospital
- Nursing/ Residential permanent permanent
- Nursing/ Residential temporary temporary
- Public place
- Supported accommodation
- Person alleged to have caused caused harm's home
- Own home
- Day Centre

Allegation 2

- Mental health inpatient setting
- Other health setting

- Acute hospital
- Community hospital
- Nursing/ Residential
- Nursing/ Residential
- Public place
- Supported accommodation
- Person alleged to have harm's home
- Own home
- Day Centre

If abuse allegedly occurred in a regulated health or social care setting date that CQC informed:	
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Section 6 – Details of Incident/ Concern/ Disclosure:

Section 7 – Referral to Police

Has the case been referred to the police?	Yes / No
Name and /or station of Police Officer:	
Crime reference number:	
Date and time that crime reported:	

Section 8 – Consent/ Capacity

Does the person have the mental capacity to consent to the safeguarding alert being reported?	Yes / No
If 'no' please detail why you think they may lack capacity and why you think it is in their best interest to raise the safeguarding alert on their behalf	
If 'yes' have they consented?	Yes/ No
If consent not given on what basis did you decide to raise the safeguarding alert?	

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Section 9 - Immediate Action taken to protect the adult at risk from harm

Risk(s) identified:

Action taken to minimise risk:

Section 10 – details of the person completing this form (if different from the person in Section 1)

Name	
Position	
Contact Number	

Section 11 – Record of Communication

Date and time alert received:	
Date and time alert reported:	

Please email / fax this form to the relevant team. To ensure that the form is received please confirm receipt by telephone.

Safeguarding Referral Point if team not known:

Access Team

Tel: 020 8891 7971 (prefix 18001 for textphone users)
Email: adultsocialservices@richmond.gov.uk
Fax: 0800 014 8359
SMS Text: 07507 512 733

Address: 4th Floor,
Regal House,
London Road,
Twickenham,
TW1 3QB