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Social Services Improvement Agency
Asiantaeth Gwella'r Gwasanaethau Cymdeithasol

Safeguarding Adults: Councillors Workbook



WLGA • CLILC



Leading Social Services
in Wales
Yn arwain
Gwasanaethau Cymdeithasol
yng Nghymru



Llywodraeth Cymru
Welsh Government

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Summary of Key Points

The Social Services and Well-being (Wales) Act 2014 put safeguarding adults on a statutory footing. The Act and associated Regulations introduces new arrangements for adults at risk to cover both preventing abuse and neglect occurring and responding once concerns are raised.

These new arrangements include:

- A duty of relevant partners (including the police, probation, the NHS and others) to report suspicions of an adult being at risk of abuse or neglect to the local authority
- The introduction of Adult Protection and Support Orders, which enables professionals to gain access to premises to make an assessment to determine whether an adult suspected to be at risk is making decisions freely and if any action is required
- The establishment of six Safeguarding Adults Boards across regions in Wales to prevent abuse and neglect and protect adults at risk of it
- The establishment of a National Independent Safeguarding Board to advise and support safeguarding boards

Councillors have a key role to play in safeguarding adults in a number of ways including:

- Ensuring that through the decisions they take, or through their participation in scrutiny activities, they contribute to preventing abuse and neglect occurring
- Assuring themselves that there are robust arrangements in place across key partners (particularly councils, the NHS and Police) to respond to concerns about abuse and neglect
- Raising awareness about the abuse and neglect of adults in their ward work
- Being aware of how to report abuse or neglect should they or their constituents become aware of it.

Key questions that councillors may wish to ensure that officers and partners can respond to are:

- Are services (health and social care and police responses particularly) in our area good enough to prevent neglect or abuse?
- Do services engage with people and can they demonstrate that they make a positive difference when concerns about abuse or neglect are raised?
- Do people look out for each other in our communities and do they know how to raise concerns?

Foreword

Every Councillor has responsibilities in relation to safeguarding adults. Those responsibilities include your work with constituents and in the debate and decision making that you contribute to as part of the council.

Alongside the NHS and the Police, councils have a key responsibility to lead in preventing the abuse and neglect of adults with care and support needs and in ensuring that there is a good response when concerns are raised. It is your role to hold to account those with statutory responsibility, the Lead Member and Director, and to ensure that adults' rights to life and freedom from inhuman or degrading treatment are safeguarded, alongside their rights to privacy, a family life, a fair hearing and to liberty and security.

Daunting stuff – but thankfully, you will be supported in your responsibilities at a local level within your authorities, and through WLGA, SSIA and Welsh Government. This short guide is intended to give you an outline of your role as a Councillor, a list of additional resources to follow up, a checklist for your authority, and a personal checklist, to help equip you with the information you need to be an effective councillor in this area.

Who are we safeguarding?

Over the last 15 years the issue of safeguarding and protecting adults who are more vulnerable has had increasing importance. The Welsh Government's Guidance 'In Safe Hands' (2000) was the first comprehensive policy framework for safeguarding adults. Councils were given the lead role in developing local policies and procedures in partnership with the police and NHS organisations. This is now formalised in the Social Services and Well-being (Wales) Act 2014, which puts safeguarding adults on a statutory footing for the first time. It defines the people to be safeguarded as adults who are 'at risk':

'An "adult at risk"... is an adult who -

- a) is experiencing or is at risk of abuse or neglect,*
- b) has needs for care and support (whether or not the authority is meeting any of those needs), and*
- c) as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it.'*

Safeguarding adults differs from the safeguarding and protection of children in a number of ways. A key difference is that while there is a legal expectation that children are protected from physical or psychological damage, adults who are able to make decisions for themselves (who have 'mental capacity') have a right to make their own choices, take risks, be free from coercion and to be consulted and involved in their own safeguarding plans. Adults without mental capacity who are unable to make important decisions for themselves have legal safeguards under the Mental Capacity Act (2005).

Safeguarding is about people and everyone is different.

What constitutes abuse and neglect?

People may be abused or neglected at home, in their communities, in a care home, at hospital, in college or at work, at day and community centres or other places where people spend their time or receive services.

The Act provides definitions of 'abuse' and 'neglect':

"Abuse" means physical, sexual, psychological, emotional or financial abuse (and includes abuse taking place in any setting, whether in a private dwelling, an institution or any other place), and "financial abuse" includes - having money or other property stolen, being defrauded, being put under pressure in relation to money or other property; having money or other property misused;

"Neglect" means a failure to meet a person's basic physical, emotional, social or psychological needs, which is likely to result in an impairment of the person's well-being (for example, an impairment of the person's health).

Because they are described as abuse or neglect, this doesn't take away from the fact that many of these acts or omissions are crimes. Here are some examples given in the draft statutory guidance (example case studies for each of the following can be found in **Appendix 1**):

Physical abuse - hitting, slapping, over or misuse of medication, undue restraint, or inappropriate sanctions;

Sexual abuse - rape and sexual assault or sexual acts to which the vulnerable adult has not or could not consent and/or was pressured into consenting;

Psychological abuse - threats of harm or abandonment, coercive control, humiliation, verbal or racial abuse, isolation or withdrawal from services or supportive networks; coercive control is an act or pattern of acts of assault, threats, humiliation, intimidation or other abuse that is used to harm, punish or frighten the victim

Neglect - failure to access medical care or services, negligence in the face of risk-taking, failure to give prescribed medication, failure to assist in personal hygiene or the provision of food, shelter, clothing; emotional neglect

Financial abuse in relation to people who may have needs for care and support - unexpected change to their will;

- sudden sale or transfer of the home;
- unusual activity in a bank account;
- sudden inclusion of additional names on a bank account;
- signature does not resemble the person's normal signature;

- reluctance or anxiety by the person when discussing their financial affairs;
- giving a substantial gift to a carer or other third party;
- a sudden interest by a relative or other third party in the welfare of the person;
- bills remaining unpaid;
- complaints that personal property is missing;
- a decline in personal appearance that may indicate that diet and personal requirements are being ignored;
- deliberate isolation from friends and family giving another person total control of their decision-making.

People who abuse or neglect vulnerable adults largely fall into four main categories:

- paid staff members or support workers
- family members, partners or carers
- neighbours and members of the community and
- other adults who themselves have care and support needs.

How are people safeguarded?

Safeguarding adults takes place in communities through a number of different factors:

- awareness raising and an absence of tolerance of abuse
- effective responses from social services, the police, NHS and others to concerns raised about abuse or neglect
- providing access to services needed, advocacy, justice and support
- using learning from practice reviews to improve services.

Policy and practice around safeguarding adults has developed rapidly over the past 12 years as society has become more aware of abuse and neglect in institutions, in private homes and in the community. This is partly due to high profile cases including the deaths of Stephen Hoskin, Fiona Pilkington and her daughter; and the investigations into Winterbourne View, Ash Court and other establishments.

Safeguarding Adults Boards

Adult safeguarding is everybody's business. Any person may recognise and report abuse or neglect, and everyone can play a part in building communities where abuse does not happen.

All of the bodies responsible for adult safeguarding need to work effectively with each other. Some organisations have specific responsibilities towards adults at risk of abuse and neglect. This includes councils, the police and the NHS.

In Wales Safeguarding Adults Boards are established in legislation alongside Safeguarding Children's Boards and a National Independent Safeguarding Board. Their objectives are to prevent adults who have needs for care and support from becoming at risk of abuse or neglect and to protect them.

Councils are lead partners and partners include the police, Local Health Board, any NHS Trust providing services in the area, the Secretary of State in relation to the discharge of Offender Management, and Probation.

The areas Boards cover and the lead partners are set out in the [Safeguarding Boards \(General\) \(Wales\) Regulations 2015](#). For adults, these are as follows:

Safeguarding Board area	Covering	Lead Partner
North Wales Safeguarding Adults Board	Isle of Anglesey Gwynedd Conwy Denbighshire Flintshire Wrexham	Conwy County Borough Council
Gwent Safeguarding Adults Board	Baenau Gwent Caerphilly Monmouthshire Torfaen Newport	Caerphilly County Borough Council
Cwm Taf Safeguarding Adults Board	Merthyr Tydfil Rhondda Cynon Taf	Rhondda Cynon Taf County Borough Council
Western Bay Safeguarding Adults Board	Bridgend Neath Port Talbot Swansea	Neath Port Talbot County Borough Council
Mid and West Wales Safeguarding Adults Board	Powys Ceredigion Carmarthenshire Pembrokeshire	Carmarthenshire County Council
Cardiff and Vale Safeguarding Adults Board	Cardiff Vale of Glamorgan	City of Cardiff Council

The role of the lead partner is to establish the Board, and thereafter to provide Welsh Ministers with information on the performance of the Board, if required to do so.

What is the role of councillors in relation to safeguarding adults?

All members have a role to play in safeguarding adults, but some members will have additional responsibilities as a Lead Member, Chair or member of a relevant scrutiny committee.

Hints and Tips:

Councillors have a key role to play in safeguarding adults in a number of ways including:

- Ensuring that through the decisions they take, or through their participation in scrutiny activities, they contribute to preventing abuse and neglect occurring
- Assuring themselves that there are robust arrangements in place across key partners (particularly councils, the NHS and Police) to respond to concerns about abuse and neglect
- In raising awareness about the abuse and neglect of adults in their ward work
- In being aware of how to report abuse or neglect should they or their constituents become aware of it.

All councillors

As councillors with a key role in communities, championing the wellbeing of their constituents, councillors are in a position to pick up concerns and raise awareness of adult safeguarding. They may become aware of individual cases of abuse through their work with constituents and so have a duty to report it.

As part of their governance role, holding their colleagues, council officers and their partners to account, and accounting to their constituents for what has been done, all Councillors have a responsibility to ask questions of lead members and other partner organisations about the safety of adults in their area, and about the outcomes of adult safeguarding.

Lead Member for Adult Services

Every council has a councillor that is the Lead Member for Social Services; a role with responsibility for the political leadership, accountability and direction of the council's services. The Lead Member has a role in ensuring that the various departments within a council work together to promote wellbeing, prevent social exclusion and protect adults from abuse.

Members of Overview and Scrutiny Committees

Councillors in OSC have a crucial role in ensuring that the system works through holding leaders to account. OSC members need to review the work of Social Services and Regional Safeguarding Boards to find out:

- how abuse is being prevented through good multiagency work and assuring quality care
- how well services work to improve outcomes for people who have experienced harm and abuse
- how far care and protection plans are keeping people safe from abuse

- how agencies are ensuring that people's human rights are respected
- how agencies are involving people fully in decisions about their lives especially when they don't have capacity
- how services uphold the right to justice for people who have experienced harm or abuse
- how well services address what happens to the people who have harmed or abused others.

Councillors in other relevant roles

Councillors who are members of bodies which have a safeguarding remit such as, Community Safety Partnerships, Police and Crime Panel, Hate Crime or Domestic Violence Partnerships, Community Cohesion bodies, and the NHS will need some knowledge of adult safeguarding in order to fulfil their responsibilities and know what questions to ask.

Councillors will need to be aware of the links between safeguarding adults and safeguarding children, for example, the behaviour of an adult may be abusive to children and another vulnerable adult.

Key Questions

Key questions that councillors may wish to ensure that officers and partners can respond to are:

Your council:

Do you know who the lead officer and lead councillor for adult safeguarding are within your council?

What training is made available to staff and councillors on safeguarding policies, procedures and practice?

Do services engage with people and can they demonstrate that they make a positive difference when concerns about abuse or neglect are raised?

Your council and its partners:

Are services (health and social care and police responses particularly) in our area good enough to prevent neglect or abuse?

Is the Safeguarding Adults Board (SAB) effective in leading and holding individual agencies to account and ensuring effective multiagency working?

How well is your council doing?

Does the SAB have the resources, both financial and human, to undertake its role effectively and deliver the SAB business plan?

Your community:

Do people in our communities look out for each other? Are members of the public in your authority area aware of what adult abuse is and do they know what to do if they have concerns about it?

Is there evidence of the difference that safeguarding work is making to adults in your community? Are people safer, do they feel safer, and are their circumstances improved?

Safeguarding is a shared responsibility across the whole local authorities and all services make consideration to safeguarding. Of course, as with any issue you come across as a member, if you are concerned that something is wrong, you have a responsibility to relay your concerns to the relevant officer – your statutory Director or Chief Executive.

Conclusion

Safeguarding Adults is a crucial aspect of local authority work, linking to many local agendas, including police and criminal justice, care quality, disability hate crime, community safety and cohesion, domestic abuse, forced marriage, and support for carers.

Growing awareness of the prevalence of abuse makes it all the more urgent and necessary for councillors to take action locally to ensure that everyone, including professionals, the voluntary sector and the general public are made aware of abuse and neglect, how to recognise and report it, who is responsible for intervening, and what people's rights are to protection, support, choice and advocacy.

Adult safeguarding policy and practice is moving rapidly into a new era where values such as preventing harm and promoting dignity, empowerment and choice are taken at least as seriously as numbers of safeguarding alerts and the results of investigations into failures.

This means that there are new roles for councillors in examining how safeguarding is experienced by local people, how people were consulted and involved in developing policies and monitoring services, and how they were involved in their own safeguarding plans and procedures.

Above all, councillors need to know what questions to ask to hold to account those responsible for adult safeguarding, and ensure that everyone is following agreed multiagency procedures, and that appropriate links are made between agencies so that people at risk and needing help are not missed.

Appendix 1 – Case Study examples

Physical abuse

Mrs J and Mrs L are both residents at a residential home that specialises in providing care and support to individuals with a dementia related diagnosis. A member of staff has reported that at dinner time, Mrs J was observed to slap Mrs L on the arm causing Mrs L to cry and leaving a red mark on her forearm.

Why would this be considered to be abuse?

This would be seen as service user on service user physical abuse. Even if the service user didn't have insight into the effect of slap another person. This is because an act occurred that was deemed to be physical assault, in addition to this it would be seen to have caused harm by Mrs L having a mark from the slap and being upset.

Safeguards required:

- Staff initially separated the two ladies to reduce a reoccurrence.
- Staff completed a risk assessment and behaviour management plan.
- Staff reported the incident to the local authority, Social Services Department.
- The Care home advises relatives of the incident and the measures that have been put in place.

Sexual abuse

K is 29 years old. She has a history of mental health problems. She has told her friend that when she was recently unwell and receiving treatment in private hospital, she became friends with her male care worker. She told her friend that they had a sexual relationship but has now told her he doesn't want to see her anymore.

Why would this be considered to be abuse?

K would be viewed to be a vulnerable adult at the time of her hospital admission. The male care worker was in a position of responsibility and therefore abused this position of trust.

Safeguards required:

- The friend or K needs to report the incident to the local authority, social services department.

Neglect

Mr C lives at home with his daughter. He has severe arthritis and diabetes which reduces his dexterity; as a result he is unable to handle his own medication and is reliant upon his family for support with medication and making meals or snacks.

Mr C has been noted on several occasions to suffer from dizzy spells and on one occasion had a diabetic hypo (low blood glucose levels - symptoms vary across individuals). When asked by the diabetic clinic whether he was eating regularly and taking his insulin as recommended, he advised that it isn't as regular as it should be, his daughter had agreed to help with this but was very busy and didn't always get time to help, but he didn't want to trouble her.

Why would this be considered to be abuse?

Mr C's daughter agreed to take responsibility for her father's medication and dietary needs. However has failed to do this. He has experienced deterioration in his health due to this mismanagement of his medication, causing him harm to his well-being.

Safeguards required:

- the clinic staff to report this to the local authority social services department
- clinic to complete medical review of Mr C

Financial abuse

Miss M lives at home alone and is housebound. She relies upon the help of a neighbour to collect her pension and pay her bills. Miss M always speaks fondly of her neighbour saying she would be totally isolated without this support.

A local councillor visiting Miss M notices that the house is very cold and damp, with minimal furniture and threadbare carpets. When asked if the house is always cold, she advised that she had her gas cut off some months ago due to not being able to pay her gas bill. She advised that when she contacted the bank, they told her she didn't have enough money to cover the cost of the bill. Miss M advises that she doesn't understand how this has happened because she thought she had a small amount of savings, but they don't seem to be there anymore.

Why would this be considered to be abuse?

Miss M has put her trust in her neighbour to help with management of her household bills. However it appears the bills have not been paid and her savings are no longer in the bank.

Safeguards required:

- The councillor or Miss M needs to report the incident to the local authority, social services department.
- Miss M needs to be advised to report the possible theft to the police.

Psychological abuse is frequently observed in conjunction with other forms of abuse.

Mrs S lives with her son, she chose to move in with him and his family after a fall at home. Mrs S has reduced mobility since the fall and has a downstairs bedroom.

Mrs S was observed at day centre to be increasingly withdrawn and tearful at times.

When asked what was wrong she reported that she thinks she made a mistake moving in with her son. She tells staff that at home she spends most of her time in her bedroom because she feels she is a burden. When asked if she has spoken to her son, she says that she tried to speak with him. However he told her they wouldn't be able to support her if she did move home and she would never see her grandchildren again.

Why would this be considered to be abuse?

Mrs S's son has threatened to remove support and prevent access to her grandchildren, which has caused her to be withdrawn and upset.

Safeguards required:

- Day centre staff need to report the incident to the local authority, social services department.