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**All Wales Induction Framework for Health and Social Care workbook 6: Safeguarding Individuals**

This workbook will help you to explore your role in safeguarding adults, children and young people from harm, abuse and neglect. As a new worker you need to understand and be able to recognise the different types of abuse and neglect that can occur. You also need to know what to do if you think abuse or neglect is taking place and how to work in ways which protect individuals from harm. It will be important that you complete this workbook after or alongside awareness training on safeguarding individuals. You can use the completed workbook activities as evidence towards achievement of the All Wales Induction Framework for Health and Social Care (Induction Framework).It can also be counted towards the qualification that you will need to complete later for your practice.

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**6.6 Policies and procedures**

**6.1 The legislative framework and your role**

To start, this section will help you show you know what safeguarding means and the different types of harm, abuse and neglect that can take place. It will also help you explore the law and policies in Wales which help to safeguard adults, children and young people who are at risk of harm, abuse or neglect and your role and responsibilities as a health and social care worker.

**Learning activity**

In one or two sentences, explain what the following terms mean.

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| Harm |  |
| Abuse |  |
| Neglect |  |
| Safeguarding |  |

The Social Services and Well-being (Wales) Act 2014 introduces two new terms in relation to safeguarding:

* adult at risk
* child at risk

Outline what they mean in the space below.

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| Adult at risk |  |
| Child at risk |  |

Remember, safeguarding is preventative as well as protective. You need to think about who might be at risk and how to act to help them keep safe.

**Learning activity**

Make a list of the main types of abuse and some of the signs or indicators that someone is being harmed, abused or neglected.

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| **Types of abuse** | **Signs or indicators** |
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**Learning activity**

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| Workbook notes  Choose three pieces of **legislation and national policies** listed in the glossary, and describe.   * how they help to safeguard individuals in practice * how they support the rights of individuals to be protected. |

**Learning activity**

Safeguarding is everyone’s business. As a health and social care worker you will have a part to play in preventing and stopping individuals from being harmed, abused or neglected.

In the space below, give three examples where responsibilities for safeguarding individuals are highlighted in the **codes of conduct and professional practice**.

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| 1. |
| 2. |
| 3. |

**6.2 Safeguarding individuals from harm, abuse or neglect**

This section will help you explore different ways of working that safeguard individuals from harm, abuse or neglect along with your responsibilities if you have concerns or someone has made an allegation or disclosure.

**Learning activity**

Read the following scenarios and complete the questions:

**a.** Nisha is 13 years old. She has been ‘looked after’ by the local authority since she was 8 years old. She has a mild learning disability and a type of juvenile arthritis which limits her mobility. She wants to join an online teen chatroom to make some new friends and give her something to do in the evenings when she is not well enough to go out with her school friends.

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| Workbook notes  1. What would your concerns be?  2. As a worker, what would you do?  3. How would you make Nisha aware of the risks of using social media so she can keep herself safe? |

Remember, safeguarding should form part of helping people to live life to the full, not just stopping abuse, neglect and harm. It involves working with individuals to understand risk and how they can safeguard themselves, whilst taking the necessary steps to minimise it.

**b.** Your organisation supports individuals with a range of learning disabilities in a community daycentre. Paul has just recently moved in with his brother. Up until now he has always lived with his parents, but he wants to become more independent. Paul has always attended the centre regularly and has very rarely missed a day but after moving in with his brother his attendance has become poor. When you ask him about this he tells you that he has been busy with the move. Over the next few weeks when he does come in, you notice that his appearance is becoming more unkempt and that his clothes are often dirty. He has also missed a routine check-up at the hospital, and seems to have lost weight. You share your observations with your senior colleagues but they don’t seem overly concerned. Today when Paul arrives at the centre, he tells you that he will not be coming back again. He seems very upset but tells you that it is his choice.

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| Workbook notes   1. What would your concerns be? 2. What type of harm, abuse or neglect could be taking place? 3. What are the sign or symptoms? 4. What action should you take? 5. Who should you report it to? 6. How would you record and report it? 7. Workbooks 1 and 2 help develop your understanding of **advocacy**, how could advocacy help Paul in this situation? |

**Learning activity**

Developing good relationships with the individuals that you support is an important part of the role of a health and social care worker. In the space below, outline why you think that this is important for safeguarding individuals.

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| Workbook notes |

How do you think that you can promote a safe environment where individuals can express themselves freely?

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| Workbook notes |

**Learning activity**

In your role, you will be responsible for supporting individuals with a wide range of tasks, activities and experiences. It is important that these are carried out in ways that not only keep the individual safe but yourself as well. Look at the scenarios below and outline steps that you could take to ensure safe practice.

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| You are a foster carer looking after John who is 8 years old. John has experienced sexual abuse. He is very unsettled at bedtime and wants you to sit on his bed until he goes to sleep. |  |
| You are part of a team providing care and support to Mrs Jones who is elderly and frail. Mrs Jones tells you that she has run out of milk and asks you to go to the shop to get her some. She asks you to get some cash from the cash point at the same time and gives you her card with her PIN number written down. |  |
| Mr Harris has memory loss, he lives alone in his own home. He has calls three times a day. He is still able to do a lot for himself but needs a lot of prompting and it has been identified that he is at risk of self-neglect as he forgets to eat, bathe or take his medication.  Mary is on duty for his evening call, she asks Mr Harris what he would like to eat but he says that he is not hungry. This pattern repeats itself with Mary’s calls over the next two days with him either saying that he is not hungry or has already eaten. When Mr Harris’ daughter calls to see him on the weekend, she is concerned that there are uneaten meals in the fridge and her father seems to have lost weight. What should Mary have done? |  |

**Learning activity**

In the space below, give some examples of the ways that you promote and support the safeguarding of individuals in your day to day work. Discuss these with your manager and ask them to add some comments.

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| Workbook notes  Manager notes |

* 1. **Factors, situations and actions that could lead or contribute to harm, abuse or neglect**

It is important to be alert to the fact that harm, abuse and neglect can take place anytime and anywhere. However, some **actions, behaviours or situations can increase the risk of harm and abuse** happening. This section will help you understand what these are.

**Learning activity**

In the space below, explain why you think some individuals might be more at risk than others.

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| Workbook notes |

**Learning activity**

Why do you think incidences of harm, abuse and neglect might not be raised by

|  |  |
| --- | --- |
| Adults at risk | Children and young people at risk |
| Family and friends | Workers |

**Learning activity**

Many individuals who experience harm, abuse or neglect do not see themselves as victims. They might believe what is happening is normal, acceptable or necessary to gain ‘love’, attention and approval.

Child sexual exploitation is a type of sexual abuse. There have been a number of high profile cases relating to child sexual exploitation in recent years such as the large-scale abuse which took place in Rotherham between 1997 and 2013. It was estimated that 1,400 children were sexually exploited during this period. This is one victim’s story.

Emma was 12 when she was first approached by a group of young men in an arcade in Rotherham. The young men began talking to her and struck up a friendship with her. They started to introduce her to other older men, alcohol and soft drugs. She trusted them as up until that point she had never been made to feel uncomfortable or unsafe – they were her friends. However a year later this was to change as one night she was raped in front of a number of people. From then on she was raped once a week, every week, often by strangers. They threatened and intimidated her – even telling her they would rape her mum. She had gone to the police three months after it had started but was told it would be hard to get a conviction as it was a case of her word against theirs. She told her mum who also went to the relevant authorities but nothing happened. Her family eventually moved away from the area to protect her.[[1]](#footnote-1)

Answer the questions in the space below

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| Workbook notes  1. What were the features of perpetrator behaviour and grooming here?  2. Why did Emma not see herself as a victim of abuse initially?  3. Why didn’t professionals / agencies act to prevent or stop the abuse?  4. Why was it important that an independent inquiry was undertaken into the child sexual exploitation which took place in Rotherham?  5. How could Emma have been better protected? |

**Learning activity**

Select four of the actions, behaviours’ or situations that increase the risk of harm or abuse from the glossary and outline why this is the case.

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| Workbook notes |

* 1. **Reporting and recording in relation to safeguarding**

This section will help you know what you should do if you have concerns about harm, abuse or neglect or an individual makes an allegation or disclosure to you.

**Learning activity**

Think back to the scenario with Paul. What do you think are the things ‘to do and not to do’ as he begins to share what has been happening in recent weeks?

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| **Do’s:** | **Don’ts:** |

**Learning activity**

When harm, abuse or neglect has taken place it needs to be dealt with quickly and effectively. Information about the safety and welfare of an individual must be reported in line with your work place’s safeguarding policy. Concerns may relate to poor practice in the workplace and it is important to know what to do if this is the case.

Read the case study below and then answer the questions.

**Case study**

What happened in a small district hospital managed by Mid Staffordshire NHS Trust, from 2005-2008 has been described as the worst hospital care scandal of recent times.[[2]](#footnote-2)

An inquiry into the care provided in Stafford hospital showed clearly that for many patients the most basic elements of care were neglected. Calls for help to use the bathroom were ignored and patients were left lying in soiled sheeting and sitting on commodes for hours, often feeling ashamed and afraid. Patients were left unwashed, at times for up to a month. Food and drinks were left out of the reach of patients and many were forced to rely on family members for help with feeding. Staff failed to make basic observations and pain relief was provided late or in some cases not at all. Patients were too often discharged before it was appropriate, only to have to be re-admitted shortly afterwards. The standards of hygiene were at times awful, with families forced to remove used bandages and dressings from public areas and clean toilets themselves for fear of catching infections

The Inquiry found that a chronic shortage of staff, particularly nursing staff, was largely responsible for the substandard care. Morale at the Trust was low, and while many staff did their best in difficult circumstances, others showed a disturbing lack of compassion towards their patients. Staff who spoke out felt ignored and there is strong evidence that many were deterred from doing so through fear and bullying. Robert Francis QC added, “It is now clear that some staff did express concern about the standard of care being provided to patients. The tragedy was that they were ignored and worse still others were discouraged from speaking out.”

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| Workbook notes   1. What are the key things that would have made a difference to prevent and to stop the harm and abuse from taking place in the hospital? 2. What were the barriers for some of the staff working in the hospital in taking action about their concerns for patient safety? 3. What are the responsibilities of health and social care workers where the practice of colleagues or other professionals may be unsafe, abusive or neglectful? 4. What is meant by the term ‘whistleblowing’ and how does it relate to safeguarding individuals? 5. What should you do if concerns raised, are not taken seriously and acted upon? |

**Learning activity**

Recording in relation to safeguarding.

Good record keeping is an important part of good safeguarding practice. The following scenario demonstrates both good and poor practice in recording:

Terry is a support worker in a day centre for people with learning disabilities. He gets on well with Mair who uses the day centre regularly. Mair lives with her parents and a brother, Jon. Mair comes to the centre after the weekend and instead of her usual routine of putting her coat away then chatting with everyone in the ‘use it again’ craft workshop she says she is cold and her arm hurts. When Terry asks why it is hurting she answers that she bumped herself on some furniture when helping to clean at home.

She says it was Jon’s fault. Mair seems quieter than usual for the rest of the day. Terry notices that Mair’s right wrist appears swollen and has a greenish tinge. Mair won’t let Terry look at her arm and keeps her coat on all day. He reports this verbally to the centre manager who agrees Terry should ask Mair if he can ask her parents what happened. Mair agrees.

At the end of the day Mair’s mother and father come to collect her and Terry asks how Mair hurt herself. They say she is always being clumsy and it must have been when she was feeding the chickens in their garden last night. Terry challenges this saying that the bruise looked older than that and that Mair had said Jon was responsible. They get defensive and angrily say they are more than capable of looking after their own daughter.

Terry is now concerned that Mair may have been abused. He writes a report as follows:

On Tuesday this week Mair Jones arrived at the centre with a badly bruised and swollen arm. I think her brother had been fighting with her again as he can be jealous of the extra attention Mair gets from her parents and he is often in trouble with the police. I spoke to her parents who got defensive and stormed off. They are most likely trying to cover up the fact that they cannot look after Mair properly any more but they have to keep the family together and not involve anyone else.

Terry has made a set of assumptions here. He has shown prejudices about people and is using information about Jon which is not backed up with any source. He has not been objective or factual and risks being accused of bias, being unprofessional and even libel as he is making accusations. Terry is right to be concerned because of the injury, the two different accounts, Mair’s unusual behaviour and the parent’s response. He acted correctly in not questioning Mair too much and asking for her agreement to

speak with her family. Terry was also correct in not sharing his suspicions with anyone but the manager. He recognised the possible signs of abuse and reported them appropriately straight away and followed this up with a written record. His record would have been improved by reading something like this:

Today, 6 June 2016 Mair attended ‘The Beeches’ day centre. She was wearing a thick winter coat which she refused to take off saying her right arm was sore. She did not speak much today and did not want to come into the craft group. This was unusual for her as she usually can’t wait to roll her sleeves up and start making things in the group. I could see her right wrist seemed swollen and had a greenish marking, like a bruise. When I asked what had happened she said she had hurt her arm cleaning in the house the day before and that ‘it was her brother Jon’s fault’. After discussing with the manager it was agreed I speak with Mair’s family after asking for her agreement. Mair said I could ask her parents about the sore arm and they told me they thought she had hurt herself yesterday feeding the chickens in the garden and that she is always clumsy. They became angry with me when I asked but Mair seemed keen to go with them.

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| Workbook notes   1. Why is it important to record information reported, about suspected or actual abuse, harm or neglect? 2. List what you need to record:    1. Describe how such information should be recorded e.g. in a timely manner. |

**Learning activity**

It is important that workers feel well supported if dealing with safeguarding situations. Discuss with your manager where and how you would access personal support.

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| Workbook notes |

**6.5 Reflection**

**Learning activity**

Reflection is an essential part of health and social care practice. In the space below, identify three things that you have learned from completing this workbook and how you will put this into practice.

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| Workbook notes |

* 1. **Policies and procedures**

All **workplaces** willhave **policies and procedures** on safeguarding and it is important you know what to do if you have concerns or if someone discloses information to you. If you are already working for an organisation, ask your manager for a copy of the safeguarding policy to read.

To sum up your understanding, answer the following questions:

**Learning activity**

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| Workbook notes   1. What should you do if you have concerns that someone is being harmed, abused or neglected? 2. What would you do if an individual asked you not to share concerns that you have about them being harmed, abused or neglected? 3. Who would you share your concerns with? 4. Who should you not share your concerns with? |

**6.7 Practice placement reflection**

Talk to a manager in your work placement about how you have put safeguarding individuals in health and social care into practice. Write a short reflective account and ask the manager to record a summary in the space below.

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| Workbook notes  Manager feedback |

Use the space below to record any discussions between you and your qualifications assessor.

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| Qualification assessor discussion notes |

**If evidence from the workbook is being used towards the qualification the assessor must complete the declaration below.**

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| **New worker declaration**  I confirm that the evidence listed for the workbook is authentic and a true representation of my own work.  Learner signature  Date  **Manager declaration**  I confirm that the new worker has achieved all the requirements of the workbook with the evidence submitted  Manager signature  Date  **Qualification assessor declaration**  I confirm that the learner has achieved all the requirements of the workbook with the evidence submitted. Assessment was conducted under the specified conditions and is valid, authentic, reliable, current and sufficient.  Qualification assessor signature  Date |

1. BBC News article 24/08/14 [↑](#footnote-ref-1)
2. The Guardian article 06/02/13 - <https://www.theguardian.com/society/2013/feb/06/mid-staffs-hospital-scandal-guide> [↑](#footnote-ref-2)