**SOCIAL SERVICES AND WELL-BEING (WALES) ACT**

**TRAINING MODULE**

**Safeguarding**

**March 2017**

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# Introduction

The Social Services and Well-being (Wales) Act 2014 introduces wide-ranging reforms that have major implications for practice. A range of learning materials have been developed to support the Act’s implementation. All the learning materials are available to download from the Information and Learning Hub as outlined in the hub prospectus..

This training module forms part of a suite of learning materials that has been developed by the [Institute of Public Care](http://ipc.brookes.ac.uk/) at Oxford Brookes University. This suite summarises and explains the regulations and codes of practice or statutory guidance that underpin the Act. It is designed to help those whose roles are most affected to understand and implement it. The suite of learning materials contains training modules, PowerPoint presentations and other learning material for each of the following areas:

1. Introduction and general functions – Parts 1 and 2 of the Act
2. Assessing and meeting the needs of individuals - Parts 3 and 4 of the Act
3. Looked after and accommodated children – Part 6 of the Act
4. **Safeguarding** - Part 7 of the Act
5. Assessing and Meeting the Needs of Adults in the Secure Estate – Part 11, Chapter 1, of the Act

This training module has been written for learning facilitators and includes exercises, suggested group discussions, points of reflection and case studies that facilitators can use either in their entirety or to pick and choose from as they see fit when designing a learning programme based on the [PowerPoint presentation](https://socialcare.wales/hub/hub-resource-sub-categories/safeguarding). As well as this training module and linked PowerPoint presentation, there is also a summary and a shorter overview presentation on the [Safeguarding](https://socialcare.wales/hub/hub-resource-sub-categories/safeguarding) page.

## Who is this Module for?

This training module is about safeguarding. It explores Part 7 of the Act and how safeguarding fits with other parts of the Act. It is intended to be used to develop learning programmes for:

* Practitioners in adults’ and children’s services in local authorities (or organisations they have delegated functions to)
* Practitioners in relevant partner agencies – police, probation, youth offending teams, local health boards and NHS trusts
* Other agencies including housing, providers and voluntary sector who want to gain greater understanding about safeguarding under the Act
* Local authority and relevant partner agency leaders who are involved in Safeguarding Boards
* Members of the National Independent Safeguarding Board

## Aims and Learning Outcomes

The aim of this training module is to explore Part 7 of the Act in more detail. The intention is to strengthen and build on existing safeguarding practice in Wales.

By the end of the learning programme participants will:

* Understand how safeguardingfits within the context of the whole Act
* Be aware of the duties and powers and accountabilities under the Act relating to safeguarding
* Have identified practice opportunities to prevent harm and promote safeguarding
* Have explored key changes related to safeguarding
* Reflect on the implications of the Act for them and changes needed in   
  their practice

This module can be used in a range of ways:

* For new staff who need a foundational understanding of the Act, you can use the overview and summary
* For new staff who need a full understanding of the Act, you can use the whole training module and presentation
* For existing staff who have transitioned into using the Act, you can use elements of the training module and activities to explore how practice has evolved since the Act came into force in April 2016, or to refresh practice knowledge and skills

The Act covers safeguarding relating to both children and adults. You may want to use the materials with children’s and adults’ practitioners separately. If you train people separately you can identify the most relevant material for the group, but you will need to ensure that there is a basic understanding of work with the other service area so that practice is joined up. It is valuable to train people from different agencies together, and to consider how to involve people who use services in planning and delivering training.

## Key Words

The suite of learning materials contains a [glossary](https://socialcare.wales/hub/hub-resource-sub-categories/safeguarding) of key words referred to in the Act, regulations and codes of practice or statutory guidance. The following key words, definitions of which can be found in the glossary, are relevant to this module: abuse, adult, APSO, advocacy, authorised officer, capacity, care and support, carer, child, eligible need, enquiry, financial abuse, harm, investigation, National Independent Safeguarding Board, neglect, practice review, prevention, relevant partner agency, Safeguarding Board, Section 47, welfare, well-being, WASPI.

# Training Module

This training module can be used to assemble a pack of relevant learning materials for each participant to take away. There is a linked PowerPoint presentation, which can be printed as a handout with space for learners to make notes. The training module matches the PowerPoint presentation and each slide in the presentation is reproduced below. The training module also includes **key learning points**, a range of **activities** that can be used to support learning and **facilitators’ hints and tips** which signpost to existing good practice / resources or suggest ways of delivering the materials. For more information, please look at the [Facilitator’s Guide](https://socialcare.wales/hub/hub-resource-sub-categories/safeguarding).

## Slide 1 - Aims and learning outcomes

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| Aims and learning outcomes |
| * This training explores Part 7 of the Act and how safeguarding fits with other parts of the Act * By the end of the training participants will: * Understand how safeguardingfits within the context of the  whole Act * Be aware of the duties and powers and accountabilities under the Act relating to safeguarding * Have identified practice opportunities to prevent harm and promote safeguarding * Have explored key changes related to safeguarding * Reflect on the implications of the Act |

### Facilitator Notes

1. This presentation is about Part 7 of the Act and how safeguarding fits with other parts of the Act.
2. Safeguarding is everyone’s business. **All practitioners working with adults and children** need to know what must and should be done to safeguard people. There are also some groups of people who need specific knowledge of parts of the Act that relate to safeguarding because they have duties and responsibilities under the Act. This presentation is intended for:

Practitioners in adults’ and children’s services in local authorities (or organisations they have delegated functions to)

Practitioners in relevant partner agencies – police, probation, youth offending teams, local health boards and NHS trusts

Other agencies including housing, providers and voluntary sector who want to gain greater understanding about safeguarding under the Act

Local authority and relevant partner agency leaders who are involved in Safeguarding Boards

Members of the National Independent Safeguarding Board

1. The aim of the presentation is to support people to act lawfully. This means that practitioners working with adults and children need to know what the law, guidance and regulations say; think through what they need to do in their role; and identify how they ensure that they do this. By the end of the learning programme you will:

Understand how safeguardingfits within the context of the whole Act

Be aware of the duties and powers and accountabilities under the Act relating to safeguarding

Have identified practice opportunities to prevent harm and promote safeguarding

Have explored key changes related to safeguarding

Have reflected on the implications of the Act for you and changes needed in your practice

### Activity – Discussion

1. What is the purpose of this training session for you?
2. What do you hope will be different as a result of this session?
3. How does your role help to safeguard people?

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| Facilitators’ hints and tips  It is helpful at the start of a session to identify who is in the room – their professional background, role and organisation. The questions above can help you to start to understand learners’ motivation. Answers are likely to be mixed; some people will have been told to come to training and others will have chosen to. It is important to encourage people to think about: their individual motivation (what they want to change and why), their responsibilities (what they will be checked up on), and supports in their workplace that will help them use this learning.  This training covers the national law and guidance. Local processes and practice are underpinned by these national frameworks. It is helpful throughout the training to ask people to consider how they will use what they learn to inform their local practice.  Research shows that it is not enough to deliver information to people. The aim is for learning to be transferred into practice so that people’s way of working changes.  This is helped by:   * Individual motivation – ensuring that people identify what they want to change and why, helping them to set goals to use the learning, reviewing those goals (this training module includes an action planning exercise at the end). * Design and delivery of the training – using methods and activities that work for people (this training module includes a range of activities). * Support – from managers and colleagues to use learning (the action planning exercise includes space to identify how people will be supported to use their learning).   When you have an idea about who is in the room, it can be helpful to note particular experience or expertise. You could ask people to talk about their role in small groups – ideally with people that they don’t usually work with. After five minutes ask them  to share their answers as a whole group. There are likely to be a range of different answers. Some people will have more specific responsibilities for safeguarding than others.  It is important to recognise that safeguarding is not solely the responsibility of the local authority. Practitioners in partner agencies, particularly health, education and the police play an essential role in prevention of and protection from abuse, neglect and harm.  Multi-agency training can be very valuable. Good practice is supported by recognising and sharing expertise and knowledge. This is facilitated by acknowledgment of differences in professional culture, language, practice and processes. All agencies can be supported to work better together by emphasising the shared goal of promoting well-being. Safeguarding includes:   * Preventing abuse and neglect and harm * Recognising abuse and neglect and harm * Reporting abuse and neglect and harm * Working with people who are at risk so that they are protected, and they are empowered to avoid abuse and neglect and harm in the future |

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| Key learning point  Safeguarding is everyone’s business. It is your responsibility to identify what you need to do for your role and seek the support to do this. |

## Slide 2 - Contents

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| Contents |
| * Introduction * Adults’ pathway * Children’s pathway * Safeguarding Boards * The National Independent Safeguarding Board * Summary |

### Facilitator Notes

1. This presentation covers the areas of the Act and of guidance / regulations that relate to safeguarding.
2. The safeguarding part of the Act is underpinned by the principles of the Act. In the introduction section we will cover the links between safeguarding and other parts of the Act.
3. There is a whole section on safeguarding in Part 7 of the Act. This includes the children’s and adults’ safeguarding pathways as well as the introduction of safeguarding boards and a National Independent Safeguarding Board.
4. Safeguarding under the Act covers children and adults. Everyone needs to be aware of the children’s and adults pathway so that they can take a whole family approach to safeguarding.
5. The training module ends with a summary and action planning.

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| Facilitators’ hints and tips  This is an opportunity for the facilitator to outline for participants the timings and key activities of the learning programme. The training module notes and slides are split up into the different sections above so that you can pick the elements that you want to use. |

## Slide 3 - Introduction

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| Introduction |
| * The Social Services and Well-being (Wales) Act came into effect on 6 April 2016 and builds on the policy set out in *Sustainable Social Services for Wales: A Framework for Action* * People * Well-being * Prevention * Collaboration * It repeals and replaces many previous laws * It covers adults, children and carers |

### Facilitator Notes

1. The Act came into effect on 6 April 2016 and builds on the White Paper ‘Sustainable Social Services for Wales: A Framework for Action’ to modernise the law for care and support in Wales.
2. It repeals many previous laws and guidance relating to care and support and replaces them with this Act. [Guidance](https://socialcare.wales/hub/sswbact-assessment-tool) on repeals and transitions in relation to the Act can be found on the learning hub and you can download a table that sets out the repeals and amendments to pre-existing legislation as a result of the Act.
3. It brought in new duties for local authorities, local health boards and other public bodies, and covers adults, children and carers. **Note that in these learning materials the term individual is used to mean an adult, child or carer.**
4. Some of the changes in the Act were not completely new as they were previously best practice, but were not a statutory requirement. This means that the impact of the Act was slightly different at a local level depending on how best practice had previously been implemented.
5. Shown in the box are the key principles that underpin the design of the Act. The Act aims to change the way **people’s** care and support needs are met – putting an individual at the centre of their care and support and giving them a voice in, and choice and control over, reaching the personal outcome goals that matter   
   to them.
6. Central to the Act is the concept of **well-being** – helping people to maximise their own well-being. We will talk more about well-being in slide 5.
7. The Act rebalances the focus of care and support to **prevention and earlier intervention** – increasing preventative services within the community to minimise the escalation of needs to a critical level.
8. Strong partnership working between organisations and co-production with people needing care and support is a key focus of the Act. The Act requires a culture change from the way in which services had often been provided, to an approach based on **collaboration**, and an equal relationship between practitioners and people who need care and support.
9. These principles enable people to be at the centre of their care and support and ensure their well-being is central to any decisions made about their lives.

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| **Key learning point**  One of the key aims of the Act is for individuals to be at the centre of decisions and to be supported to have choice and control over their lives. |

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| Facilitators’ hints and tips  This introductory section gives a brief overview of the Act as it is assumed that participants have already undertaken general awareness training about the Act. It will be worth using slides 3 and 4 to check with learners their general awareness of the Act so that you can expand on this introduction if necessary. There is a short video (3 minutes 12 seconds) from Mark Drakeford, Minister for Health and Social Services, available to download or show from the Information and Learning Hub [resources](https://socialcare.wales/hub/hub-resource-sub-categories/overview-and-awareness) section in which he speaks about the aims and implications of the Act. There is also a set of resources about the principles of the Act – [What does the Act mean for me?](https://socialcare.wales/hub/hub-resource-sub-categories/principles-of-the-act) – that are aimed at frontline workers and introduces key information about the Act and the principles that underpin it, as well as how these principles can be applied in practice.  Some staff may not have may not have worked under previous legislation if they have come into practice more recently. It may be worth exploring with participants who have been in practice since before April 2016 what has changed |

## Slide 4 - The parts of the Act

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| The parts of the Act |
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### Facilitator Notes

1. The Act is made up of 11 parts and they all, except the first part, have regulations or codes of practice or statutory guidance that underpin them and give more detail. The first part gives an overview of the whole Act and defines some key terms such as **‘adult’** whichmeans a person who is **aged 18 or over** and a **‘child’** which means a person who is **aged under 18**.
2. Part 2 outlines the overarching duties that relate to anything people do under the Act, including the well-being duty. Under Part 2 there are also requirements to undertake a population assessment, and provide preventative services and an information, advice and assistance service, as well as the duty to promote social enterprises / diverse forms of delivery.
3. Part 3 defines the circumstances in which a local authority must assess a person’s needs for care and support, whether an adult, child or carer, and how assessments are carried out.
4. Part 4 describes the national eligibility criteria and how individuals’ needs are to be met, which will mean changes to local systems and processes.
5. Part 5 identifies the circumstances in which a local authority may charge for providing or arranging care and support for individuals or preventative services.
6. Part 6 sets out local authority responsibilities under the Act for looked after and accommodated children, and arrangements for leaving care.
7. Part 7 of the Act brings in new, statutory safeguarding arrangements, including a duty to report an adult or child at risk and for authorised officers to apply to the court for an “adult protection and support order”.
8. Part 8 specifies the social services functions of local authorities and provides grounds for intervention by Welsh Ministers where a local authority is failing in those functions.
9. Part 9 requires local authorities to promote co-operation with their relevant partners, and imposes a duty on their relevant partners to co-operate with –   
   and provide information to – the local authorities. It also establishes Regional Partnership Boards.
10. Part 10 provides for complaints about social services and new rights to complain about private social care and palliative care. It also provides for advocacy services to be made available from the point of first contact to enable individuals to engage and participate in their care and support.
11. Part 11 unsurprisingly covers a variety of things including the new duty of local authorities to meet the care and support needs of adults in prison, youth detention or bail accommodation in Wales, and the care and support needs of children and young people in prison, youth detention or bail accommodation in England and Wales.

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| Facilitators’ hints and tips  Note that there is now completely separate social services legislation for Wales and England. The main difference between them is that the Social Services and Well-being (Wales) Act 2014 applies to people of any age and carers, whereas the Care Act 2014 for England is mainly confined to adults and there is a separate Children and Families Act 2014.  The Act replaces, in parts, some of the Children Act 1989. The children in need provisions of Part 3 (Section 17) of the Children Act 1989 are disapplied in relation to Wales. The legal authority for the provision of services for children and their families, including disabled children, is instead Parts 2 to 5 of the Act. However, the general care and support system for Wales under Parts 2 to 5 does not apply in the case of looked-after children. Instead, Part 6 of the Act contains local authority obligations in relation to looked-after children.  While the concept of a child in need disappears from the Act, the looked-after children and leaving care provisions of the Act are in many (but not all) respects similar to those provisions which they replace in the Children Act 1989.  The child protection and court proceedings provisions of the Children Act 1989 are not materially affected by this act and so continue to apply in both England and Wales. This includes Part IV (care and supervision proceedings) public law and Part II (orders with respect to children in family proceedings) private law. The changes made as a result of the Children and Families Act 2014 continue to apply in relation to Wales. Part V of the Children Act 1989 (protection of children, including the Section 47 duty to investigate significant harm) also still applies. The Act introduces a new duty in Wales to report children at risk under Part 7  You can download details of the relationship between the Act and the Children Act 1989 from the [information and learning hub](https://socialcare.wales/hub/sswbact-assessment-tool). There is a training module on [looked after and accommodated children](https://socialcare.wales/hub/hub-resource-sub-categories/looked-after-children). |

## Slide 5 – The well-being duty

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| The well-being duty |
| Responsibility for well-being must be shared with people who have needs for care and support  A person exercising functions under this Act **must** seek to promote the well-being of people who need care and support and carers who need support. Well-being includes **protection from abuse and neglect.** |

### Facilitator Notes

1. [Handout: Well-being](https://socialcare.wales/hub/hub-resource-sub-categories/introduction-and-general-functions)
2. Central to the Act is the well-being duty. People have a responsibility for their own well-being, supported by their families, friends and communities. However, people may also need support to ensure that they achieve well-being. Professionals and agencies are there to provide some of this support.
3. Part 2 of the Act requires *“any persons exercising functions under the Act to   
   seek to promote the well-being of people who need care and support, and carers who need support.”* This overarching duty applies to organisations and their practitioners when, for instance, carrying out an assessment or providing an information and advice service. This is an overarching duty that has to be met by everyone exercising functions under the Act (this includes Welsh Ministers, local authorities, local health boards and other statutory bodies as well as provider organisations).
4. Practitioners must look at what people can contribute in achieving their well-being and empower them to contribute to achieving their own well-being, with the appropriate level of support. This will involve building on people’s resources, including people’s strengths, abilities, and families and communities.
5. In the Act well-being is defined with eight common aspects:

physical and mental health, and emotional well-being

**protection from abuse and neglect**

education, training and recreation

domestic, family and personal relationships

contribution made to society

securing rights and entitlements

social and economic well-being

suitability of living accommodation

1. In relation to an adult, well-being also includes:

control over day-to-day life

participation in work

1. In relation to a child, well-being also includes:

physical, intellectual, emotional, social and behavioural development

“welfare” as that word is interpreted for the purposes of the Children Act

1. [Handout: Well-being and welfare](https://socialcare.wales/hub/hub-resource-sub-categories/safeguarding)
2. The Children Act 1989 talks about welfare rather than well-being: welfare has a particular meaning under the Children Act 1989 and will continue to do so. The concept of well-being rather than welfare for children was first introduced in law in the Children Act 2004. The concepts of welfare and well-being overlap a great deal. Language in the Act reflects the newer concept of well-being, which includes the existing considerations of welfare that are set out in the Children Act 1989.
3. While all aspects of well-being in the definition have equal importance, it is likely that some aspects of well-being will be more relevant to one individual than another. Practitioners should therefore adopt a flexible approach that allows for a focus on which aspects of well-being matter most to the individual concerned and co-produce solutions with people.

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| **Key learning point**  A person exercising functions under the Act **must** seek to promote the well-being of adults, children and carers. |

### Activity – Exercise

1. In small groups, ask people to look at the handout on [well-being and welfare](https://socialcare.wales/hub/hub-resource-sub-categories/safeguarding) and to consider how well-being and welfare fit together.

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| Suggested answer:  There is no conflict between well-being and welfare. Welfare has a particular meaning under the Children Act 1989 and will continue to do so. Language in  the Act reflects the newer concept of well-being. Any activities under the Act, whether or not they relate to safeguarding, must be done with the overarching aim of promoting the child’s well-being. This includes the existing considerations of welfare that are set out in the Children Act 1989.  The concepts of well-being and welfare overlap a great deal. They are concerned with how good a life a child has. This includes a range of areas that help a child to develop and grow. Abuse, neglect and harm impair the ability of a child to have a good life. Well-being and welfare is not just the absence of abuse, neglect and harm. It also includes positive efforts to ensure that children have opportunities and that their rights are upheld. |

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| Facilitators’ hints and tips  There is a Welsh Government [technical briefing](http://gov.wales/docs/phhs/publications/151125pt2wellbeingen.pdf) about the duty to promote the wellbeing of people who need care and support and carers who need support and other overarching duties under Part 2: Sections 5,6,7,8 of the Act. |

## Slide 6 - Other overarching duties

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| Other overarching duties |
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### Facilitator Notes

1. As well as the well-being duty there are other overarching duties that are set out in Part 2 of the Act. Four of these overarching duties apply to people of all ages. The duty to:

Ascertain and have regard to the individual’s views, wishes and feelings, in so far as is reasonable practicable.

Have regard to the importance of promoting and respecting the dignity of   
the individual

Have regard to the importance of providing appropriate support to enable   
the individual to participate in decisions that affect them to the extent that   
it is appropriate in the circumstances, particularly where the individual’s communication is limited for any reason

Have regard to the characteristics, culture and beliefs of an individual, including language

In the context of these overarching duties a requirement to ‘have regard’ to a particular matter is similar to a requirement to ‘consider’ or ‘take into account’ that matter.

1. Two overarching duties apply specifically to adults:

To begin with the presumption that the adult is best placed to judge their own well-being

To have regard to the importance of promoting their independence where possible.

Promoting independence should be viewed in the context of the Welsh Government’s [Framework for Action on Independent Living](http://gov.wales/topics/people-and-communities/equality-diversity/rightsequality/disability/framework-for-action/?lang=en), which is based on the [Social Model of Disability](http://gov.wales/topics/people-and-communities/equality-diversity/rightsequality/disability/socialmodel/?lang=en). The Social Model of Disability makes the important difference between ‘impairment’ and ‘disability’. It recognises that people with impairments are disabled by the barriers that commonly exist in a society. If fully realised, the social model would mean that disabled people were able to participate fully in society, and the impact of their impairment would be substantially reduced.

1. In relation to children there is also the duty to:

promote the upbringing of the child by the child’s family, in so far as doing so is consistent with the well-being of the child

for under 16s, to ascertain and have regard to the views, wishes and feelings of those with parental responsibility, in so far as is practical and consistent with the child’s well-being

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| Key learning point  Safeguarding should form part of helping people to live life to the full, not just stopping abuse, neglect and harm. You must act in a way that ensures people are involved, treated as individuals and have their views at the centre of what happens  to them. |

### Activity – Exercise

1. Look at the [handout Important to/Important for](https://socialcare.wales/hub/hub-resource-sub-categories/safeguarding). This allows you to list the factors that are important to someone (things that they want to do or have in their life) with the factors that in other people’s views are important for them (things that will help or support them).
2. How do you balance protection of adults with care and support needs with their rights to take risks in order to live a full life?
3. One of the group of learners – if there is anyone involved in assessment and support for adults who may be at risk – may wish to outline an anonymised case study to give an example.

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| Suggested answer:  The tool could enable you to see what is important to someone and how this contrasts with other people’s views about what is important for them. It helps  you to see where there is agreement and disagreement between what is thought to be best for someone and what they want. You might have conflicting things  in the two columns; for example smoking may be important *to* someone but smoking is not important *for* their health. It avoids people making assumptions about what is important to someone.  You can use the tool to enable positive risk taking. If there is something that is important to the person but this means that something important for them can’t happen, you can discuss whether the important to outweighs the important for.  The Act emphasises that for adults you must have regard to the importance  of beginning with the presumption that the adult is best placed to judge the  adult’s well-being, and the importance of promoting the adult’s independence where possible. |

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| Facilitators’ hints and tips  The overarching duty to have regard to the characteristics, culture and beliefs of an individual reinforces existing legislation and guidance for anyone in Wales to be able to live their lives through the medium of Welsh if they choose to do so. This means that peoples’ cultural identity and language needs must be at the heart of care and support because it is an essential element to good quality care and high professional standards. See the [handout Active Offer](https://socialcare.wales/hub/hub-resource-sub-categories/introduction-and-general-functions).  “More than Just Words...”, a [strategic framework for Welsh language services](http://gov.wales/topics/health/publications/health/guidance/words/?lang=en) in health and social services, provides a systematic approach to improve services for those who need or choose to receive their care and support in Welsh. The aim of the framework is to ensure that organisations and practitioners recognise that language is an intrinsic part of care and support, and that people who need services in Welsh get offered them. This is called the ‘Active Offer’ and means moving the responsibility from the person to ask for services through the medium of Welsh, to the service, which must ensure it provides them. There is an [information pack](https://socialcare.wales/hub/hub-resource-sub-categories/well-being) to help staff in the health, social services and social care sectors provide an ‘Active Offer’ to service users in line with the objectives of the [More than just words…](http://www.wales.nhs.uk/sites3/Documents/415/WEB%20-%2016184_Narrative_e_WEB.pdf) strategic framework.  This could be an opportunity to review learners’ approach to and implementation of the Active Offer. For example, do practitioners ask ‘what language would you like the service / assessment in’ or ‘what language(s) are spoken in the home’? You could discuss the way in which professionals record and act on the language choice or requirements of people with care and support needs.  You could also ask learners to imagine how they would feel if they had to describe an emotive experience in their second language. Would you be able to accurately convey your feelings? Would you feel comfortable doing so?  It may be more difficult for people to accurately describe an emotive experience (or any experience) in their second language. A report ‘[Different words different worlds: the concept of language choice in social work and social care](https://socialcare.wales/resources/different-words-different-worlds)’ (E Davies, undated) highlights the role that different languages have for bilingual people in expressing themselves. “*Clients have a choice as to what language to use and thereby have  the ability to select the word that most clearly captures the essence of what they  are trying to communicate. Bilinguals can also use their second language to serve a distancing function when discussing troubling events*” (page 15). There are likely to be examples of existing good practice in providing services in the medium of Welsh. There will be particular skills and knowledge that people need. It is important that the cultural context of language is considered as well – for example, how conversations take place, manners and rituals. |

## Slide 7 – Human rights

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| Human rights |
| Image result for United Nations Convention on the Rights of Disabled People waleshttp://adam1cor.files.wordpress.com/2010/01/article-0-02bb5728000005dc-224_468x286.jpg |

### Facilitator Notes

1. The overarching duties also include human rights. A key part of practitioners’ roles under the Act is to empower people through helping them to assert these rights. This is a key change. While some local authorities and organisations were voluntarily respecting and delivering human rights in their work, a person exercising functions under the Act is required to demonstrate ‘due regard’ to the UN conventions and principles.
2. Having ‘due regard’ means that you must think about these principles throughout the decision making process. It is not enough to simply use them to justify a decision after it has been taken. You must have ‘due regard’ in such a way that it influences the final decision in a meaningful way as it is not a question of ‘ticking boxes’. It is good practice to keep an accurate record to show how you have considered your duty.
3. Public bodies are required to comply with the Equality Duty, Human Rights Act and within the principles of the European Convention of Human Rights. So people must not be treated less favourably because of race, gender, disability, sexual orientation, religion of belief. In October 2000, the Human Rights Act came into effect in the UK. Public authorities have duties to promote equality and to comply with the Human Rights Act. There are 16 rights in the Human Rights Act – all taken from the European Convention on Human Rights.
4. Human rights can be absolute rights, limited rights or qualified rights. Absolute rights mean rights that the state can never infringe, and include the right to protection from torture and inhuman and degrading treatment. Limited rights are rights that may be limited under explicit circumstances, such as the right to liberty. A person has the right not to be deprived of their liberty – ‘arrested or detained’ – except where they are suspected or convicted of committing a crime and provided there is a proper legal basis in UK law.
5. Qualified rights are rights which require a balance between the rights of the individual, and the rights of the broader community or the state. Qualified rights may be limited where that is necessary to achieve an important objective such as protecting public health or safety, preventing crime and protecting the rights of others. They include the right to respect for private and family life; the right to manifest one’s religion or belief; freedom of expression; freedom of assembly and association; and the right to peaceful enjoyment of property. More information on the Human Rights Act can be found in the Ministry of Justice’s publication [Making sense of human rights: a short introduction](https://www.justice.gov.uk/downloads/human-rights/human-rights-making-sense-human-rights.pdf).
6. A person exercising functions under this Act in relation to an adult **must have due regard to the United Nations Principles for Older Persons.** More information can be found at the [Older People’s Commissioner for Wales](http://www.olderpeoplewales.com/en/about/un-principles.aspx).
7. A person exercising functions under this Act in relation to a child **must have   
   due regard to the United Nations Convention on the Rights of the Child** (UNCRC). More information can be found at the [Unicef](https://www.unicef.org.uk/what-we-do/un-convention-child-rights/) website**.**
8. A person exercising functions under this Act in relation to disabled adults or children **must have due regard to the United Nations Convention on the Rights of Disabled People** (UNCRDP). More information can be found in the Equality and Human Rights Commission’s [Guide to the UN disability convention](http://www.equalityhumanrights.com/your-rights/human-rights/human-rights-guidance/guide-un-disability-convention).

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| **Key learning point**  You need to know the rights that adults and children have and work to uphold them. |

### Activity – Questions

1. Which human rights can be violated by abuse and neglect and harm?
2. Which human rights can be violated by over-protective services?

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| Suggested answer:  Abuse, neglect and harm are human rights violations and can mean that it is harder for people to exercise their human rights. They can violate the right to freedom from inhuman or degrading treatment, or they can ultimately violate  the right to life. Abuse, neglect and harm can also mean that people lose other human rights such as the right to education for children. Sometimes abuse consists of slavery or forced labour.  Under the Act, you need to have regard to the [United Nations Principles for Older Persons](http://www.olderpeoplewales.com/en/about/un-principles.aspx). This includes respect for older people’s dignity, beliefs, needs and privacy and for the right to make decisions about their care and the quality of their lives. You need to have regard to the [United Nations Convention on the Rights of the Child](http://gov.wales/topics/people-and-communities/people/children-and-young-people/rights/uncrc/?lang=en). This includes the right to life, survival and development, and protection from violence, abuse and neglect. You also need to have regard to the [United Nations Convention on the Rights of Disabled People](http://www.equalityhumanrights.com/about-us/our-work/human-rights/international-framework/un-convention-rights-persons-disabilities).This includes the right to live independently and live in the community.  Over-protective services can result in curtailing other rights including the right to liberty and security; the right to a fair hearing; and the right to respect for private and family life, home, and correspondence.  The Act emphasises that you must have regard to:  the importance of providing appropriate support to enable the individual to participate in decisions and to communicate  the importance of promoting and respecting dignity  the individual’s views, wishes and feelings  the characteristics, culture and beliefs of the person  Following these principles, and acting to promote well-being will help to protect people’s rights. |

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| Facilitators’ hints and tips  Research has shown that people who have used social care state that decisions  are dominated by practitioners’ views of risk, whereas they are more fearful of losing their independence. People in mental health services and residential care feel they have limited rights. People who are seen as at risk have fewer rights. Participation is essential to promoting rights in social care (*The right to take risks: Service users’ views of risk in adult social care*, Joseph Rowntree Foundation, 2012).  A human rights based approach includes participation. The participation of individuals, including children, in decision making is a component of human rights  as it reduces discrimination and helps to prevent abuse of power. Participation must be active, free and meaningful and give due attention to issues of accessibility, including access to information in a form and a language which can be understood.  The review of In Safe Hands (Welsh Institute for Health and Social Care, 2010) found that adults want safeguarding to be based on the following principles:   * People are not intrinsically vulnerable – this is contextual * People’s views and wishes should guide how they are supported * The starting point must be to believe people who raise concerns about abuse * Safeguarding should be based on consent * Adults with capacity should have the right to refuse intervention even if this leaves them at risk of harm * The priority should be to stop abuse * There is a crucial balance to be struck between autonomy and protection * People at risk from abuse should be involved in decision-making processes * People should be supported with strategies to keep themselves safe * Safeguarding should be in the context of fully engaged citizenship   The former All Wales Child Protection Procedures usefully set out the principles for safeguarding children. Work with children and families should be:   * Child centred * Rooted in child development * Supporting the achievement of the best possible outcomes for children and improving their well-being * Holistic in approach * Ensuring equality of opportunity * Involving children and families * Building on strengths, as well as identifying and addressing difficulties * Multi / inter-agency in its approach * A continuing process * Designed to identify the services required and monitor the impact their provision has on a child's developmental progress * Evidence-based, derived from theory, research, policy and practice.   These messages can help learners to think about what people want from safeguarding. |

## Slide 8 - Links to other parts of the Act

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| Links to other parts of the Act |
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### Facilitator Notes

1. Part 7 of the Act relates to safeguarding specifically. However, other parts of the Act link to the duty to protect people from abuse and neglect, and to protect children from harm. This slide again shows the 11 parts of the Act and, in italics, the ways in which they link to safeguarding.
2. Part 2 links prevention, information and advice to safeguarding. Section 15 of   
   the Act says that a local authority must provide or arrange for the provision of a range of preventative services, including ones which will “*contribute towards preventing people from suffering abuse or neglect”*. Section 17 says that provision of information and advice must include **how to raise concerns** about the well-being of a person who appears to have needs for care and support.
3. Part 3 links assessment to safeguarding. Section 20 and 22-23 say that if an adult or child refuses an assessment, **this does not discharge a local authority from its duty** to assess if the local authority suspects that the adult is experiencing   
   or at risk of abuse or neglect, or the local authority suspects that the child is experiencing or at risk of abuse, neglect or other kinds of harm.
4. Part 4 links meeting needs to safeguarding. Sections 35 and 37 explains that   
   if an adult or child has needs and does not meet the eligibility criteria, the local authority must meet the needs if the local authority considers it necessary to do so in order to protect the individual from abuse or neglect or a risk of abuse or neglect, or other harm.
5. Part 6, Section 78 says that a local authority looking after any child must safeguard and promote the child’s well-being.
6. Part 8, Section 143, introduces the social services functions of local authorities that are set out in Schedule 2. The functions include safeguarding adults and children.
7. Part 9 says that a local authority must make arrangements to promote   
   co-operation between itself and partners with a view to protecting adults with needs for care and support, or children, who are experiencing, or are at risk of, abuse or neglect or other kinds of harm (within the meaning of the Children   
   Act 1989).
8. Part 10 links advocacy to safeguarding. The code of practice for Part 10 of   
   the Act states that *“the local authority must arrange, where necessary, for an independent advocate to support and represent an individual who is the subject   
   of a safeguarding enquiry under Section 126 or subject to arrangements for an Adult Protection and Support Order under Section 127 of the Act.”* We will look   
   at advocacy in more detail on the next slide.
9. Part 11, Section 184, says that Ministers or local authorities may conduct, commission, or assist in the conduct of, research into any matter connected with the functions of Safeguarding Boards. Also that the Welsh Ministers may require the lead partner of a Safeguarding Board to provide them with information in connection with the performance by that Board of its functions. Sections 185 and 186 defines that safeguarding applies to adults and children in the secure estate.

### Activity – Exercise

1. In small groups, ask people to use ‘stop / start / stay’ – illustrated below – to identify barriers and enablers to safeguarding in all their areas of work. After   
   20 minutes ask the groups to share their answers. You can then have a whole group discussion about how to strengthen safeguarding practice across all   
   areas of work.

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| **Stop**  What is stopping you from safeguarding adults / children? | **Start**  What do you need to start doing to safeguard adults / children better? | **Stay**  What is helping you to safeguard adults / children and needs to stay? |

## Slide 9 - Advocacy

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| Advocacy |
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### Facilitator Notes

1. [Handout: Advocacy](https://socialcare.wales/hub/hub-resource-sub-categories/introduction-and-general-functions).
2. The Act requires that you support people – children and adults with care and support needs, and carers – to fully participate in safeguarding processes. The Code of Practice for Part 10 of the Act emphasises the importance of advocacy to *“safeguard individuals who are vulnerable and discriminated against or whom services find difficult to serve.”* Advocacy can help to prevent abuse and neglect.
3. Despite the barriers individuals may be experiencing, you mustinvolve them, help them express their wishes and feelings, and support them to weigh up options and make decisions. The decision pathway in this slide shows two ways in which an individual could be supported if you thought that they might experience barriers to their participation.
4. Firstly, it is important to establish if and how the person could be better supported by making changes to the arrangements. For example, by providing information   
   in an accessible format and involving an appropriately trained and registered interpreter if the person needs one e.g. if they are a sign language user or don’t have enough English or Welsh to be involved without an interpreter. Note that public bodies have a duty under the Equality Act 2010 to make reasonable adjustments to meet the needs of people with particular accessibility requirements. Such adjustments should be made before the barriers to   
   the person fully participating in the process are reviewed again.
5. However, some people won’t be able to fully participate, even if the process has been adapted to meet their communication needs, because of the barriers they experience. We will look at barriers to participating in the process in more detail in the next slide.
6. You must, in partnership with the adult or child / their family, make a judgement about whether that individual can only overcome the barrier(s) and participate fully if there is someone available to support and represent their views, wishes and feelings.
7. If there is no **‘appropriate individual’** to advocate for the person then the local authority must arrange for an **independent professional advocate** to support and represent an individual who is the subject of a safeguarding enquiry under Section 126 of the Act or Section 47 of the Children Act 1989, or who is subject to arrangements for an adult protection and support order under Section 127 of the Act. Where an independent professional advocate has already been arranged then, unless inappropriate, the same advocate may be used.
8. An ‘appropriate individual’ could be a parent, carer, friend, neighbour or relative. The key thing is that they must be able to adequately support the person’s participation. They must not be someone the person does not want to support them nor someone implicated in the safeguarding enquiry.
9. [Handout: Mental Capacity Act](https://socialcare.wales/hub/hub-resource-sub-categories/introduction-and-general-functions).
10. If an adult or child aged 16 or 17 lacks capacity to make a decision then an assessment of their capacity under the Mental Capacity Act 2005 should be made. This may affect the type of independent advocacy which is appropriate to be provided for them.
11. Note that Section 178 of the Act re-states the existing entitlements of looked after children and eligible children who were previously looked after (entitled children) to advocacy if they are making representations (including complaints) about local authority functions including safeguarding. Local authorities **must** provide the entitled children with information and advice about advocacy. Local authorities **must** take steps to protect the child if they have good reason to believe that the child’s preferred choice of advocate poses a risk of significant harm.
12. Advocacy is covered in detail in the [Advocacy training module](https://socialcare.wales/hub/hub-resource-sub-categories/advocacy). It explores Part 10 of the Act on advocacy and how advocacy fits with other parts of the Act. It also aims to build awareness and understanding of advocacy among those who could have the potential to work with, or make referrals to, advocacy services.

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| Key learning point  You must support people to fully participate in safeguarding processes. You must consider capacity as part of safeguarding and, for adults and children  aged 16 or over, follow the principles of the Mental Capacity Act 2005. |

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| Facilitators’ hints and tips  All relevant people involved in safeguarding are expected to understand and apply the Mental Capacity Act 2005 as well as the Social Services and Well-being (Wales) Act 2014. The Act gives some adults and children the right to receive support from an independent professional advocate. The Mental Capacity Act gives local authorities the power to appoint an Independent Mental Capacity Advocate (IMCA) for adults and children aged 16 or 17 who lack capacity to make a specific decision.  It may be appropriate to explore with participants the differences and links between the Act and the Mental Capacity Act (MCA).  There are similarities with the MCA, but the duty to provide independent advocacy under the Act is broader and applies to a wider set of circumstances e.g. it  provides support both to people who have capacity but who experience barriers  in participating fully and to those who lack capacity. The local authority must meet  its duties in relation to working with an Independent Mental Capacity Advocate  and those in relation to an independent professional advocate under the Act. Theoretically, a local authority could appoint one advocate as an IMCA and a different person acting as an independent professional advocate under the Act as  the local authority must meet its duties in relation to both sets of legislation: one duty does not ‘trump’ the other. However, this is not likely to be beneficial to either the individual needing advocacy or the local authority. The same advocate can provide support as an independent professional advocate under the Act and under the Mental Capacity Act, if trained and qualified to do both. |

## Slide 10 Barriers to participation

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| Barriers to participation |
| Does the person have capacity?  Is there a need for an advocate? |

### Facilitator Notes

1. The Act defines four ways in which people could experience barriers that impair them from fully participating in safeguarding processes:

understanding relevant information

retaining information

using or weighing up the information

communicating their views, wishes and feelings

1. Many people can be supported to understand relevant information, if it is presented appropriately and if time is taken to explain it. Some people will not be able to **understand relevant information**, for example if they have mid-stage or advanced dementia.
2. If a person is unable to **retain information** long enough to be able to weigh up options and make decisions, then they are likely to be experiencing barriers in fully participating in the key care and support processes.
3. A person must be able to **weigh up information** in order to participate fully and express preferences for or choose between options. For example, they need to   
   be able to weigh up the advantages and disadvantages of moving into different accommodation. If they are unable to do this they are likely to be experiencing barriers in fully participating in the key care and support processes.
4. A person must be able to **communicate their views, wishes and feelings** – whether by talking, writing signing or any other means – to aid the decision process and to make their priorities clear. If they are unable to do this they are likely to be experiencing barriers in fully participating. For example, some people with mid-stage or advanced dementia, significant learning disabilities, a brain injury or mental ill health may experience barriers to their full participation in decisions. But equally a person diagnosed with Asperger’s may do too, as may a frail older person who does not have a diagnosis but is confused as a result of an infection, or a person who is near the end of their life and appears disengaged from involvement and decision-making. Within this context, it is the person’s ability to communicate their views, wishes and feelings which is fundamental to their participation rather than any medical diagnosis or specific condition.

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| Key learning point  If a person experiences barriers in any one of these four areas then will need  to be supported to fully participate by an ‘appropriate individual’ or independent professional advocate. |

### Activity – Exercise

1. What factors do you need to consider when judging if someone is experiencing barriers to involvement in safeguarding?

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| **Suggested answer:**  Everyone is unique and you need to take account of the particular situation  and the whole person. Remember that your judgement is about whether they experience barriers in being involved in the safeguarding process – so you need to establish this to your satisfaction on the information available to you. The factors that this judgement needs to focus on could be any combination of intellectual, physical, emotional, psychological or sensory, and some of the questions which you need to consider are whether the person is able to:   * Answer the questions you need to ask * Make clear that they understand who you are and what your role is * Make clear to you that they understand their situation * Tell you how they feel about their situation * Show you that they understand what you have told them * Recall information or decisions that were shared in any previous meeting * Fully describe the options available to them * Describe the possible outcomes of any choices they make * Describe their preferences to you   If a person is experiencing barriers with any one of the areas of understanding, retaining, or weighing information or communicating their views wishes and feelings then that would indicate that they need more support to be able to fully participate. However, you need to establish whether the barrier is substantial enough to have an impact on their participation and that it is not caused by external factors that can be addressed. So, for example, you need to make  sure that your communication methods offer the person good opportunities  to be involved and that any information you share with them is presented in an appropriate format.  You need to make sure that you are making the judgement on the basis of the person’s true responses. So, for example, you need to be clear that they are  not inappropriately influenced or interpreted by other people, and that their responses are not affected by fears or threats. An important way of getting the information you need to make your judgement is by engaging directly with the person themselves, but there are other sources of information which can help you to get a rounded picture such as speaking with family and other people who know the person well or checking any records or reports or legal judgements relevant to the person. |

## Slide 11 – Links to other legislation

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| Links to other legislation |
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### Facilitator Notes

1. The 2014 Act changed the foundation of the social care sector. It aims to improve wellbeing outcomes for people who need care and support, and carers. It came into force around the same time as two other acts that also focus on well-being.
2. The Well-being of Future Generations (Wales) Act 2015 is about improving the social, economic, environmental and cultural well-being of Wales. It will make public bodies think more about the long-term, work better with people and communities and each other, look to prevent problems and take a more joined-up approach.
3. The 2015 Act puts in place a ‘sustainable development principle’ and a duty for public bodies to set and publish well-being objectives that are designed to maximise its contribution to achieving the seven well-being goals set out in the 2015 Act. It also establishes Public Services Boards (PSBs) for each local authority area in Wales, which must improve the economic, social, environmental and cultural well-being of its area by working to achieve the seven well-being goals.
4. Clearly, the two Acts are related. The individual’s wellbeing is a key part of the wider concept of well-being used in the 2015 Act that encompasses environmental, social, economic and cultural well-being. Welsh Government has developed a [technical brief](http://gov.wales/docs/phhs/publications/160415pt9wfgacten.pdf) on how the two pieces of legislation fit together.
5. The Regulation and Inspection of Social Care (Wales) Act 2016 is the next step in making social services in Wales sustainable. It embeds the aims of the two previous Acts so they produce a whole system with the aim of improving the well-being of the people of Wales.
6. The 2016 Act provides a revised, streamlined framework for the regulation and inspection of social care services in Wales. It aims to improve the quality of care and support in Wales. It will do this by strengthening protection, increasing accountability of those who provide services and giving a stronger voice to people who use care and support services.

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| Key learning point  These Acts aim to increase people’s well-being. |

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| Facilitators’ hints and tips  There is a guide to the Well-being of Future Generations (Wales) Act 2015 – [The Essentials](http://www.cynnalcymru.com/wp-content/uploads/2016/08/Guide-to-the-WFGAct.pdf) – as well as a short animation available to download from the [Welsh Government](http://gov.wales/topics/people-and-communities/people/future-generations-act/?lang=en) website.  There are introductory and awareness raising materials, including a short animated film, about the Regulation and Inspection of Social Care (Wales) Act 2016 available to download or show from the [Information and Learning Hub](https://socialcare.wales/hub/hub-resource-sub-categories/information-and-awareness). |

## Slide 12

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| Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015 |
| “The provisions of the Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act are intended to ensure a focus across the public sector on the prevention of these issues, the protection of victims and the support for those affected by such issues.”  (Explanatory Memorandum, April 2015) |

### Facilitator Notes

1. Safeguarding is part of a wider culture of prevention and empowerment that is promoted by the Social Services and Well-being (Wales) Act 2014. Prevention and protection is a theme of the three Acts discussed above as well as the Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015, which aims to support and complement safeguarding.
2. This 2015 Act aims to ensure that all public sector agencies work to prevent violence, and protect and support people affected. Women and girls are disproportionately affected by violence. The memorandum does clarify that the Welsh government is committed to supporting all victims of gender-based violence, domestic abuse and sexual violence.
3. This Act includes:

Duties on the Welsh Ministers, local authorities and local health boards to prepare and publish strategies aimed at ending violence against women, gender-based violence, domestic abuse and sexual violence

A power to the Welsh Ministers to issue guidance to relevant authorities on how they should exercise their functions with a view to contributing to ending gender-based violence, domestic abuse and sexual violence

Provision to enable the Welsh Ministers to require local authorities, by regulations, to publish information about how the authority’s education functions are being exercised to promote the purpose of the Act

Provision for the appointment of a national adviser

1. Safeguarding professionals have an important role in recognising and acting on domestic violence and abuse, including as a child protection issue. There is a responsibility for safeguarding professionals to Ask and Act.
2. The primary objective of Ask and Act is to encourage relevant professionals to “ask” potential victims about the possibility of gender-based violence, domestic abuse and sexual violence where such abuse is suspected and to “act” so suffering and harm as a result of the violence and abuse is prevented or reduced.

## Slide 13

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| Working under the Law |
| **Law**  **Local policy and practice**  **Guidance and national procedures: Working Together to Safeguard People**  **Regulations** |

### Facilitator Notes

1. This slide shows the areas that people who work in safeguarding need to be aware of and to use.
2. The Act sets out what must and should be done to safeguard children and adults. Regulations give more detail and must be followed. There are specific regulations about Adult Protection and Support Orders and Safeguarding Boards.
3. Statutory guidance, including national procedures (Working Together to Safeguard People), also provide more information and should be followed.
4. In addition you will have local policies, procedures and information.
5. Your organisation should help you to access the information, advice and   
   support you need to carry out your role. You can use appraisal and professional development discussions to identify the help you need to be confident and capable in your role.

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| Facilitators’ hints and tips  This training builds on the [Basic Awareness training](https://socialcare.wales/learning-and-development/safeguarding) for safeguarding that can be downloaded from the information and learning hub. The basic awareness training ensures that everyone is able to prevent, recognise and report safeguarding concerns in their role. This training provides more detail for people who are responding to safeguarding concerns. |

### Activity – Exercise

1. Complete the [exercise self-assessment](https://socialcare.wales/hub/hub-resource-sub-categories/safeguarding). Look at the learning areas and reflect   
   on how capable and confident you are in each area. Give yourself a score from   
   1 (very low) to 5 (very high). Use the comments section to summarise why you have given yourself that score.

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| **Learning area** | **Score 1-5** | **Comments on  learning needs** |
| I understand the principles that underpin safeguarding |  |  |
| I know what the law, regulations and guidance says about safeguarding adults / children |  |  |
| I know what is expected of my role |  |  |
| I am able to use the law, regulations and guidance to prevent abuse and neglect  (and harm for children) in my role |  |  |
| I know what the Wales policy / procedures says that is relevant to my role |  |  |
| I am able to use the Wales policy / procedures and my local policy / procedures to safeguard children / adults in my role |  |  |
| I can support other people to safeguard  adults / children |  |  |
| I seek help, advice and support when I need it |  |  |

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| Facilitators’ hints and tips  The Act strengthens safeguarding practice in Wales to ensure that people are able to live their lives to the full. Prevention is an important part of safeguarding. Everyone has a part to play in ensuring that people can live life to the full. Third sector organisations may find the Wales Council for Voluntary Action self-assessment resources on safeguarding helpful as a checklist to review safeguarding within the organisation and to identify what else might be needed to put safeguards in place. <http://www.wcva-safeguarding.org.uk/Safeguarding-assessment> |

### Activity – Question

1. What opportunities do you have at work and outside of work to safeguard children or adults?

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| Suggested answer:  Ways of preventing abuse, neglect and harm include:   * For adults: providing information and raising awareness; helping communities to support people who are at risk; learning and development for staff; support for carers; empowering people to make decisions; supporting people to manage money; supporting people to protect themselves from scams  and fraud. * For children: access to health services; access to education; parenting support; drug and alcohol services; domestic violence services; financial advice for parents; social and leisure activities; housing services; sex and relationships education; advice on social media.   Everyone can act to prevent abuse, neglect and harm, through their own work and by modelling good practice to others. Some people may need to report or whistle-blow on practice that could put people at risk.  Outside work, we are part of families, networks and communities. We can raise people’s awareness, be alert to people who may be at risk, and look out for people around us.  It is important to keep an open mind and to ask what may be happening for people and how we can support them to have good levels of well-being. |

## Slide 14

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| Adults’ pathway |
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### Facilitator Notes

1. End of section on overarching duties and links to other parts of the Act. We will now explore the safeguarding duties and powers in Part 7 of the Act, starting with the adult’s pathway.

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| Facilitators’ hints and tips  If you are focusing the training on people from children’s services, it is still useful to include the next slide which shows the main elements of the Act for adults. |

## Slide 15 – Adults’ pathway

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| Adults’ pathway |
| The Act, statutory guidance and regulations explain how you must work with adults |

### Facilitator Notes

1. Safeguarding is everyone’s business. However, the Act sets out particular duties for local authorities and relevant partner agencies working with adults. This slide highlights the four sections that relate specifically to adults in Part 7.
2. Section 126 is about Adults at Risk. It starts with a definition of an “adult at risk”, which enables early intervention to protect an adult at risk.
3. Section 126 is also about local authorities making enquiries. Section 127 is about adult protection and support orders (more on slide 14).
4. Section 128 is about the duty for all relevant partners to report adults at risk.
5. Section 129 abolished Section 47 of the National Assistance Act 1948 (which enabled local authorities to apply for a court order to remove persons in need of careand attention from home to hospitals or other places).

## Slide 16 – An adult at risk

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| An adult at risk |
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### Facilitator Notes

1. The Act contains a definition of an adult at risk. An “adult at risk” is an adult who:

is experiencing or is at risk of abuse or neglect

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

as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it

1. The statutory guidance states that the inclusion of ‘at risk’ enables early intervention to protect an adult at risk. The decision to act does not require   
   actual abuse or neglect to have taken place.
2. The right hand side of the slide gives some questions to consider about whether someone is an adult at risk.
3. A potentially useful tool for practitioners is the All Wales Risk Identification Checklist (RIC) and Quick Start Guidance for Domestic Abuse, Stalking and ‘Honour’-Based Violence. The purpose of the RIC is to give a consistent and simple tool for practitioners who work with adult victims of domestic abuse in order to help them identify those who are at high risk of harm and whose cases should be referred to a Multi-Agency Risk Assessment (MARAC) meeting in order to manage their risk.

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| Key learning point  Safeguarding is preventative as well as protective – you need to consider who might be at risk and act to help them keep safe. |

## Slide 17 – Abuse and neglect

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| Abuse and neglect |
| * Physical * Sexual * Psychological * Emotional * Financial * Neglect   Taking place in any setting  Additional areas   * Self-neglect * Modern slavery * Institutional abuse * Domestic violence   Honour based crime     * Violent offences * Sexual offences * Property offences * Hate crime * Exploitation |

### Facilitator Notes

1. This slide lists the types of abuse and neglect that are mentioned in the guidance on the left hand side.
2. 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 theft, fraud, pressure about money, misuse of money. **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).
3. Guidance explains that the impact of abuse and neglect, and what you do, will be affected by the:

frailty or vulnerability of the adult at risk

extent of abuse or neglect

length of time and frequency of the occurrence

impact on the individual

risk of repeated or escalating acts involving this or other adults at risk.

1. Abuse or neglect may constitute a criminal offence. These include offences against the person (violent offences), sexual offences and property offences   
   such as theft. If abuse or neglect is motivated by someone’s personal characteristic – disability, race and ethnicity, religion and belief, sexual orientation and transgender / gender identity – then this may be a hate crime.
2. There are constantly new and emerging areas of abuse and neglect. It is important to keep up to date with research and to learn from practice reviews. Some of the additional areas are shown on the right hand side of the slide alongside the areas from the Act.

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| Key learning point  Abuse and neglect is wide-ranging, you need to be ready to recognise it. |

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| Facilitators’ hints and tips  In Wales, reported incidents of abuse and neglect are increasing. The review of  In Safe Hands (Welsh Institute for Health and Social Care 2010) found issues with recognition of abuse and neglect including that:   * People with learning disabilities may not realise they are being abused * People with mental health problems may not be taken seriously * Older people may be isolated and unable to report abuse * There may not be clear victims or perpetrators particularly where abuse or neglect is happening within a relationship or when both parties have needs.   The case of [Derek Parker](http://www.communitycare.co.uk/2009/09/03/action-on-elder-abuse-damns-welsh-adult-protection-system/) highlighted issues with responding to concerns about institutional care. Issues raised about a care home were not initially investigated because they were thought to not meet the threshold for adult protection. Good support planning, monitoring and review of services are an essential part of prevention of organisational abuse ([Leaders’ Briefing, RiPfA 2015](https://www.ripfa.org.uk/resources/publications/leaders-briefings/)).  It can be difficult to identify how domestic abuse and safeguarding overlap, particularly where there are complex family dynamics or physical or mental health conditions (An exploration of service responses to domestic abuse among older people, McGarry et al, 2014. [Summary](http://www.scie-socialcareonline.org.uk/an-exploration-of-service-responses-to-domestic-abuse-among-older-people-findings-from-one-region-of-the-uk/r/a1CG0000003YChGMAW) available). Practitioners benefit from  multi-agency training to recognise and respond to domestic violence.  Self-neglect is not mentioned in the Act or guidance. However, the need for advocacy, sensitive enquiries and multi-agency work is often the same ([Self-neglect and adult safeguarding, Braye et al, 2011](http://www.scie.org.uk/publications/reports/report46.asp)). Mental capacity is an essential consideration in situations where someone is self-neglecting.  It is important to be aware of emerging areas of abuse and neglect including hate crimes, mate crimes where people befriend and abuse, cyber abuse and forced marriage. In 2011-12 there were 1,809 hate crimes reported in Wales, mostly  race-related. Low-level, repeated incidents were less likely to be reported. People who have a disability or are isolated are less likely to seek help ([Time for Justice, All Wales Hate Crime Research Project Team, 2013](http://www.cardiff.ac.uk/socsi/research/publications/Time%20for%20Justice-All%20Wales%20Hate%20Crime%20Project.pdf)). Modern slavery is another area of abuse that needs a particular multi-agency response, awareness raising and support for victims ([Leaders’ Briefing, RiPfA 2015](https://www.ripfa.org.uk/resources/publications/leaders-briefings/)). |

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| **Case study**  Adult P is unknown to statutory services and has had no recent contact with his GP. He is 81 years old, his wife died approximately five years ago. There are no known children or other living family relatives.  Adult P engaged a live-in carer approximately two years after the death of his wife. He had been an active member of his local community; church, bridge club and The Royal British Legion. He began to lose contact with these activities soon after he appointed the live-in carer.  A member of the church recently visited Adult P to see whether he needed transport to attend church services and other activities. The church member was concerned to find Adult P appeared to her to be dishevelled, uncommunicative and living in a dark room, the curtains were closed. The live-in carer suggested Adult P had been unwell for the last 12/18 months and was reluctant to continue his community activities.  The church member was disturbed by what looked like a black bloodshot eye and grazes to the side of Adult P’s face. She felt uncomfortable in her interaction with the carer who was reluctant to let her into the house, rather abrupt and did not leave her alone with Adult P.  The church member left the house after approximately 20 minutes, confused, unsure, uneasy and concerned about Adult P. She discussed her feelings with the local vicar who was relatively new and had never met Adult P. She also discussed her concerns with a friend who lived in the next street to Adult P, although this person had never met Adult P, she was aware his wife had died and he was being looked after by a live-in carer. The friend had noticed a new 4x4 vehicle parked on the drive and in the garage of Adult P’s house. She had wondered how Adult P would be able to access it because of its height from the ground.  Having discussed her concerns again with the vicar, the church member agreed she would contact the local social services office about her concerns.  The social services made enquiries with the GP and police. There had been no appointments or home visits by the GP during the last two years. The police had no record of any incident or contact with Adult P or his address. They also made enquiries and checks with known social and domiciliary care agencies to see if they had any knowledge of Adult P or a carer working at this address; nothing was known about Adult P or his live-in carer.  **Questions**   1. What abuse or neglect is Adult P experiencing or at risk of? 2. What might be the impact of this?   **Suggested answer:**  Key indicators of abuse and neglect based on research and practice are:   * **Physical abuse**: A history of unexplained falls or minor injuries; unexplained bruising or injuries of any sort; burn marks of unusual type; a history of frequent changes of general practitioners or reluctance in the family, carer or friend towards a general practitioner consultation; accumulation of medicine; malnutrition, ulcers, bed sores and being left in wet clothing. * **Sexual abuse**: Unexplained changes in demeanour and behaviour; tendency  to withdraw and spend time in isolation; expression of explicit sexual behaviour and / or language; irregular and disturbed sleep pattern; bruising or bleeding in the rectal or genital areas; torn or stained underclothing; sexually transmitted disease or pregnancy where the individual cannot give consent to sexual acts. * **Psychological abuse**: Inability to sleep or tendency to spend long periods in bed; loss of appetite or overeating at inappropriate times; anxiety, confusion  or general resignation; tendency towards social withdrawal and isolation; fearfulness and signs of loss of self-esteem; uncharacteristic manipulative,  uncooperative and aggressive behaviour. * **Financial abuse**: Unexplained inability to pay for household shopping or bills, etc; withdrawal of large sums of money; missing personal possessions; disparity between the person's living conditions and their financial resource; unusual and extraordinary interest and involvement in the adult's assets. * **Neglect**: Inadequate heating, lighting, food or fluids; failure to give prescribed medication or obtain appropriate medical care; reluctance to accept contact from health or social care professional; refusal to arrange access for visitors; poor physical condition; apparently unexplained weight loss; unkempt clothing and appearance; inappropriate or inadequate clothing; sensory deprivation - lack of access to glasses, hearing aids, etc; absence of appropriate privacy and dignity; absence of method of calling for assistance.   In this case indicators of abuse and neglect are:   * An adult who had become isolated from his previous network and  community activities * An adult who appeared to have physical injuries * A live-in carer who had been engaged by Adult P who was not employed or known about by local care agencies * The dark and oppressive physical environment within which Adult P appeared  to be living * A carer that was reluctant to engage and abrupt with the church member * The new 4x4 vehicle   Guidance lists the following as factors to consider in identifying the impact of abuse and neglect, and what you will do:   * Frailty or vulnerability of the adult at risk * Extent of abuse or neglect * Length of time and frequency of the occurrence * Impact on the individual * Risk of repeated or escalating acts involving this or other adults at risk   In this case the impact of harm is likely to be a deterioration in well-being on numerous levels:   * Physical and mental health and emotional well-being * Protection from abuse and neglect * Domestic, family and personal relationships * Social and economic well-being * Control over day to day life   Good judgements are supported by:   * Holistic assessments * Multi-agency information * Clarity about the wishes and feelings of the adult * Using evidence to consider the likelihood and likely impact of abuse and neglect * Robust analysis that tests out what might be happening and why * Supervision, managerial support and good systems |

## Slide 18 - Reporting adults at risk

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| Reporting adults at risk |
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### Facilitator Notes

1. **The Act contains a duty to report an adult at risk**. This is a duty for all relevant partners of a local authority. The relevant partners are police, other local authorities, probation, local health boards and NHS trusts.
2. If a relevant partner has reasonable cause to suspect that a person is an adult   
   at risk and appears to be within the authority’s area or within another local authority’s area, it **must** inform the local authority of that fact.
3. Guidance explains that reasonable cause to suspect exists when there is information which would satisfy an objective observer that the particular circumstances exist.
4. The guidance sets out what should be recorded:

A summary of information upon which the decision is based

Why it is that the decision maker considers objectively that action is required

A short statement of the potential risks for the adult if nothing is done.

It says that there should be points of contact and timely action within local authorities.

1. Partners should make staff aware of this new duty.
2. Anyone who works with adults should know how to raise a concern.

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| Key learning point  Everyone who is involved with adults should know how to recognise and report abuse and neglect. There should be agreed contact routes and response. |

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| Facilitators’ hints and tips  The review of In Safe Hands (Welsh Institute for Health and Social Care, 2010) found inconsistencies in the incidences of referrals across Wales. Referrals were supported by adult protection co-ordinators, specialist teams, awareness in other agencies and resourcing.  It is important to look at barriers to reporting safeguarding, particularly those facing specific groups. People with mental health problems, from BME communities, who misuse drugs or alcohol, or who were homeless appeared to be disadvantaged. There were also concerns about recognising issues when people employed their  own carer workers or funded their own care.  Good information about safeguarding, training, good policies and procedures, advocacy, a culture of challenge, leadership, clear routes for referral and experienced triage all help to support reporting and response.  These messages can help people to think through how they can build on good practice in raising awareness and reporting safeguarding. |

### Activity – Questions

1. How do I raise concerns about abuse and neglect?
2. How can I support others to do this?

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| Suggested answer:  There are many ways in which people can experience abuse and neglect. It is important not to make assumptions about people’s experiences or the impact  on them. Talking through situations with your manager/ supervisor or colleagues can help to identify doubts or concerns. If you feel concerned, you should always tell someone.  You need to raise alerts at once – do you know how to do this, who to contact and what to do if your manager is not around? Also, do you know what to do if your manager is implicated?  If an adult at risk does not want you to report, guidance states that:  *“In exceptional circumstances, personal information can be lawfully shared without consent where there is a legal requirement or the professional deems it  to be in the public ‘best interests’. One of the exceptional circumstances is in order to prevent abuse or serious harm to others. Details are contained in the ‘Welsh Accord for the Sharing of Personal Information’ (WASPI, 2013).”*  You should seek advice; be as open as possible about what your organisation’s duty is; and record the decision. It is important to record all the information you have as soon as possible so that it is captured while it is still clear in your mind.  You can support others to raise concerns by: ensuring they know about abuse and neglect and are able to recognise it; ensuring they know what the policy and procedure is for raising an alert; having information about how to raise alerts; asking colleagues about situations that they seem concerned about; asking for learning and development opportunities about safeguarding. |

## Slide 19 - Sharing information

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| Sharing information |
| V:\Social Justice\RRC shared\Image Bank\RiPfA\RiPfA Photos with Permissions\Get changed - permissions obtained\Final approved photos\10151197_682762941766020_785012462_n.jpg |

### Facilitator Notes

1. The guidance says that you need to follow the ‘Welsh Accord for the Sharing   
   of Personal Information’ (WASPI) so that you share information legally, safely and with confidence. This accord clarifies that organisations should share the minimum necessary information on a need-to-know basis with the person’s consent, but can share without consent where there is a risk of abuse or serious harm to themselves, or others.
2. The WASPI guidance states: “*Staff should not hesitate to share personal information in order to prevent abuse or serious harm, in an emergency or in   
   life or death situations. If there are concerns relating to child or adult protection issues, the relevant local procedures must be followed …”*
3. Staff must not guarantee confidentiality to anyone who discloses abuse: it should be noted that in certain circumstances full disclosure may be ordered by a judge or ombudsman.
4. There is a particular skill in working with adults to agree outcomes and gain consent to take action. It is important to develop this capability as far as possible.

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| Key learning point  You need to know and use your organisation’s processes and procedures for  sharing information. |

## Slide 20 - Making an enquiry

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| Making an enquiry |
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### Facilitator Notes

1. **The Act contains a duty for local authorities to make enquiries.** This slide has   
   a diagram that highlights the steps that the Act requires local authorities to take under the duty to make enquiries.
2. If a local authority has reasonable cause to suspect that a person within its area (whether or not ordinarily resident there) is an adult at risk, it **must:**
3. **make (or cause to be made**) whatever enquiries it thinks necessary to enable it to decide whether any action should be taken (whether under this Act or otherwise) and, if so, what and by whom
4. decide whether any such action should be taken.
5. The guidance explains that there are three components to the duty. Firstly there needs to be a ‘reasonable cause to suspect’. The reasons for suspicion should be recorded along with the decision about whether it is reasonable to make enquiries or not.
6. There will be circumstances in which it makes sense for another agency or organisation to lead on the enquiry. The duty to determine the nature of the enquiries required remains with the local authority even where another body   
   is carrying out the enquiries. Relevant partners may be asked to undertake enquiries on behalf of the local authority, and are required to comply with such requests unless to do so is incompatible with their own duties. There may be circumstances where other agencies could assist, for example a third sector organisation, supporting the person.

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| Key learning point  Local authorities are responsible for proportionate, timely enquiries that enable good decisions. |

1. Secondly, the enquiries are made. Usually this should be done within seven days of the referral. Enquiries include screening, an initial evaluation based on information that is available, and then a determination about what to do.
2. Enquiries are different depending on the situation. The guidance sets out some considerations:

The right of the person to refuse to participate – though consider coercion

The wishes and feelings of the adult

The capacity of the adult to make decisions

The need for advocacy

The need for sensitivity and minimum distress to the person and others

Whether the perpetrator has any needs for care and support, or is a carer

The need for joint work between agencies

Awareness of possible criminal investigations

Human rights and principles of the Act including partnership and empowerment

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| Key learning point  Enquiries must start with the person’s wishes, feelings, views and needs. |

1. Enquiries are not investigations – they may lead to a formal investigation or to   
   a criminal investigation. The determination at the end is about what is needed next. This may be an investigation. It may be that the adult is not at risk, however, they may still need some signposting, information or assessment. The decision must be recorded in the care and support plan if there is one, or on the case record if not.
2. Enquiries should help you to identify what is impacting on the adult in terms of the outcomes they want to achieve in their life and how you can best help them to achieve outcomes.

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| Key learning point  Particular consideration must be given to the possibility of criminal investigations. |

1. Guidance states that recording should include:

How the referral came about

What happened during the enquiry

Analysis of the information gathered

A decision about whether the person is an adult at risk and why

A decision about whether an assessment is needed under the Mental Capacity Act 2005 or the Mental Health Act 1983

Detailed information about any abuse or neglect

The adult’s wishes and feelings

Other agencies that are involved.

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| Key learning point  Decision making must be recorded. |

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| Facilitators’ hints and tips  The review of In Safe Hands (Welsh Institute for Health and Social Care, 2010) found inconsistencies in how well people worked together. Primary care, the criminal justice system, financial institutions, housing and NHS trusts all needed to work better with local authorities.  The review emphasised that agencies needed to ensure that they take full part in safeguarding. People who use services also needed to be fully involved at all stages.  Serious Case Reviews, now called Practice Reviews, have identified the importance of multi-agency work, communication and information sharing in getting a clear picture of abuse and neglect.  Recording should support analysis and decisions about promoting the person’s  well-being, lawful practice and empowerment for the person that the record is about. Recording low level concerns helps organisations to identify patterns and to develop preventative work.  The [Making Safeguarding Personal programme](http://www.local.gov.uk/adult-social-care/-/journal_content/56/10180/6074789/ARTICLE) in England emphasised the need  to involve adults from the outset in conversations about the outcomes they want through safeguarding support.  These messages can help people to think about how they can build on good practice in making enquiries. |

### Activity – Exercise

1. Look at the [exercise adults’ views and wishes in safeguarding](https://socialcare.wales/hub/hub-resource-sub-categories/safeguarding). This Aide Memoire for talking to adults (also shown below), developed by the Royal Borough of Kingston upon Thames, is used by practitioners to suggest questions that might be useful in talking to people about safeguarding at the start of the process.
2. How do you ensure that adults’ views and wishes are central to what you do to safeguard them?

Quality of Life

1. How do you feel about discussing harm / abuse?
2. Are there people you can talk to about harm / abuse / safeguarding?
3. What sort of help do you need at the moment?
4. What is the best way to describe how you want to be treated?
5. What is important to you at the moment?
6. Are you able to have the sort of life you want?
7. Do you feel prevented from doing some things?
8. Do you know how to keep yourself safe and not be exploited?
9. If someone has reported a concern about you, how easy or difficult is it for you to discuss what is happening?
10. What are the things that are making it difficult for you?
11. What are the things that are / could make it easier for you?
12. Do you feel confident that you can get help to keep safe without compromising the other things you want in life?

Process

1. What do you know about safeguarding?
2. How did you find out about safeguarding?
3. Is there any information you need?
4. What will help you feel in control of what is happening?
5. How would you feel about the police / courts being involved?
6. How do you feel about having an investigation into the harm / abuse that has been reported / you have reported?
7. Is there anything worrying you about the investigation?
8. What are some of the things that might be helpful to you about the investigation?
9. Do you feel able to say what you want to happen as a result of reporting the abuse, or others becoming aware of the abuse?
10. What can we do to make sure you are happy about the action being taken?

Change

1. What do you want to be the end result of the safeguarding activity that’s taking place? What do you think might be the best thing to come out of it?
2. What do you think might be the worst thing to come out of it?
3. What can we do to make you feel safe from harm or abuse in the future?
4. What will help you to feel in control of things?

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| Facilitators’ hints and tips:  The Making Safeguarding Personal programme in England helped safeguarding teams and practitioners to:   * Find out what people wanted from safeguarding * Make this happen where possible * Find out if safeguarding had achieved what people wanted.   One of the main ways that this happened was by including questions about what people wanted from safeguarding at the start of the process, and returning to this during and at the end to check if safeguarding was achieving the outcomes people wanted. This could be built into IT, paperwork and processes.  This needed practitioners to build relationships with people and communicate  well with them so that they could establish what they wanted. It was helpful to involve people who were close to the person and knew them well. It also needed good information about safeguarding. Talking about people’s ‘desired’ and ‘negotiated’ outcomes also helped in cases where people had unrealistic outcomes (e.g. that went against the law, or where other factors might come into play). The importance of being honest and clear about what safeguarding can and cannot do was also highlighted.  This approach helped people to feel in control, ensured that capacity and best interests were considered, and helped practitioners to feel confident in their work. |

## Slide 21 - Adult protection and support orders

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| Adult protection and support orders |
| |  |  | | --- | --- | | **What** | Order from a Justice of the Peace to enable private conversation, find out if person making decisions freely, assess whether an adult at risk | | **Why** | Suspicion that adult is at risk, order needed to gain access, order will not result in greater risk | | **Who** | Authorised officer, constable, others as needed | | **Where** | Specific premises | | **When** | Specific timeframe | | **How** | Guidance sets out considerations about how to use this well | | ***only to be used in exceptional circumstances*** | | |

### Facilitator Notes

1. Part 7, Section 127, introduces **adult protection and support orders** (APSO). These had not existed before the Act. Guidance about them is set out in Working Together to Safeguard People volume 4. Practitioners, along with the Police and other agencies, need to be aware of them. However, they will **only be used in exceptional circumstances**.
2. **An Authorised officer may** apply to a justice of the peace for an order in relation to an adult living within the local authority’s area. The purposes of an APSO are:

to enable the authorised officer and any one with them to speak in private with a person suspected of being an adult at risk

to enable the authorised officer to ascertain whether that person is making decisions freely

to enable the authorised officer to properly assess whether the person is an adult at risk and to make a decision about any action that should be taken.

1. Consideration about whether the person is making decisions freely could include, for instance:

Is the person allegedly exercising undue influence in a position of trust?   
For example, care home staff, carer or relative.

In cases of financial abuse, has the person been offered independent advice?

Is the person allegedly exercising undue influence preventing the interview in private from taking place?

Is the particular decision the person is taking untypical and out of character based on what the authorised officers and those accompanying him or her know or have been told about them?

1. The **Justice of the Peace may** make an APSO if satisfied that:

The authorised officer has reasonable cause to suspect that a person is an adult at risk

It is necessary for the authorised officer to gain access to the person in order properly to assess and to make a decision on action

Making the order is needed in order to be able to assess and make a decision

Using the order will not result in the person being at greater risk of abuse   
or neglect

1. Guidance says that an authorised officer should ideally be from the local authority, failing that, from another local authority in the Safeguarding Board area, and failing that, from another local authority in Wales. The guidance sets out some detailed knowledge and skills that authorised officers need to have, including assessment of risk, knowledge of coercion, communication skills,   
   ability to challenge and legal knowledge. There are a limited number of authorised officers. They have dedicated training, which can be downloaded from the information and learning hub.
2. An adult protection and support order **must** (a) specify the premises, (b) provide that the authorised officer may be accompanied by a constable, (c) specify the period for which it is in force.
3. They can be used in any premises including a care home or hospital, but not a prison. If the premises are small then the police may need to ensure that other people leave the premises as the assessment **must** be undertaken in private. **The police officer may** use reasonable force ‘in order to fulfil the purposes of an adult protection and support order’.
4. Other conditions **may** be attachedto an adult protection and support order for example (a) specifying restrictions on the time at which the power of entry can be used, (b) providing for the authorised officer to be accompanied by someone else, (c) requiring notice of the order to be given.
5. On entering the premises the authorised officer **must**— (a) state the object of the visit, (b) produce evidence of the order, and (c) provide an explanation of how to complain about how the power of entry has been exercised.

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| Key learning point  APSOs should only be used in exceptional circumstances where other attempts to speak to the adult considered to be at risk have failed. It is helpful to be aware of APSOs. If you are nominated to be an authorised officer or are working with authorised officers, there is specific training available on the learning hub. |

## Slide 22 - Using an APSO

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| Using an APSO |
| * **Proportionality –** how do we achieve our outcomes in the least intrusive way? * **Liaison –** who do we need to  be involved? * **Assessment –** what do we need to consider and how do we ensure involvement of the adult? * **Next steps –** what do we expect to happen when we use the order and what is our contingency plan? |

### Facilitator Notes

1. Guidance sets out various considerations about how to use APSOs well. Good planning is essential. This includes:

Consideration of other avenues to avoid needing an APSO and consideration of the human rights implications of these

Joint work with other agencies including the police and agreement of roles

Clear reason for the APSO, clear aims, and a plan for what will happen next

The details of the order – who needs to be able to go in, where, how long for, what notice will be given – this must be proportionate

How the order will be explained to the person being assessed and   
the occupier

Contingency plans depending on what might be found.

1. Guidance explains that the assessment should include consideration of:

Risk

Health status

Capacity

The ability of the person to protect him or herself

The level of risk before and after the intervention

The person’s own understanding of what is happening

Their wishes

Undue influence

1. The authorised officer may have other people accompany them to ensure participation, representation, advocacy, additional expertise or other benefits to the person being assessed. This could include key workers, professionals known to the person, relatives or friends, and people with specialist knowledge.

Authorised persons should consider how free the person is to make decisions and make sure that they or others do not unduly influence the person. An advocate may be needed. If an advocate isn’t included then the reason should be recorded. One of the issues highlighted by the Older People’s Commissioner for Wales report in 2015 (Crimes against, and abuse of, older people in Wales: Access to support and justice: working together) was the issue of control by a perpetrator of abuse or neglect: “One *of the biggest issues we have with domestic abuse and elderly people is the ability to get into the house to assess what is going on. Often the aggressive person is gate-keeping. They are on the door and you have no authority to go in to see the other person there and assess the situation.”* (Adult Protection Officer, page 42).

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| Key learning point  The principle of proportionality must be followed. Advocacy should always  be considered. |

## Slide 23

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| Children’s pathway |
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### Facilitator Notes

1. End of section on adults. We will now explore the children’s pathway.

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| Facilitators’ hints and tips  If you are focusing the training on people from adults’ services, it is still useful to include the next slide which shows the main elements of the Act for children. |

## Slide 24 – Children’s pathway

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| Children’s pathway |
| The Act, statutory guidance and regulations explain how you must work with children. |

### Facilitator Notes

1. Safeguarding is everyone’s business. However, the Act sets out particular duties for local authorities and relevant partners working with children and young people. Section 130 relates specifically to children in Part 7. This slide highlights the main elements of the Act for work with children and young people.

There is a definition of a child at risk

There is a duty for relevant partners of an authority to report children at risk

This Act then links into the Children Act 1989. The duty for a local authority   
to investigate remains in the Children Act 1989. Practitioners need to use the Children Act 1989 Section 47 when responding to safeguarding referrals

1. The children in need provisions of Part 3 (Section 17) of the Children Act 1989 were repealed by the Act. However, part V of the Children Act 1989 (protection of children, including the Section 47 duty to investigate significant harm) still applies.

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| Key learning point  Safeguarding is everyone’s business. You need to understand what your duties are under the Act. The duties under the Act must be considered alongside existing duties under the Children Act 1989. |

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| Facilitators’ hints and tips  Safeguarding practice is strengthening. However, there is still much to do. In 2015 the NSPCC conducted research on child protection services. In their report [How safe are our children](https://www.nspcc.org.uk/services-and-resources/research-and-resources/2015/how-safe-are-our-children-2015/) they compile and analyse child protection data from across the UK. The key findings are that:   * While child sexual exploitation is dominating the media, it is important to remember that neglect remains the most common form of abuse across the UK * Early intervention to address problems before they become more serious and entrenched are critical * More support is needed for the victims of abuse, especially therapeutic support and age appropriate support at every stage of the criminal justice process * All four countries in the UK have seen the number of recorded sexual offences against children increase. This may be due to better recognition, more effective reporting or better recording.   These messages can help get people thinking about how safeguarding has changed, examples of good practice in Wales, and how they consider safeguarding practice needs to be strengthened for children. |

## Slide 25 – A child at risk

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| A child at risk |
| **A child who is experiencing or is at risk of abuse, neglect or other kinds of harm**  V:\Social Justice\RRC shared\Image Bank\RiP\Imagebank\No permissions needed - anonymous or general shots\Family Court - Harmit Kambo\Lo res\IMG_2246.jpg  **has needs for care and support (whether or not the needs are being met)** |

### Facilitator Notes

1. This slide sets out the definition of a child at risk in the Act. A “child at risk” is a child who:

is experiencing or is at risk of abuse, neglect or other kinds of harm

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

1. This definition is the threshold for a child to be reported to a local authority by a relevant partner. We will look at this in a moment.

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| Key learning point  Practitioners need to know the definition of a child at risk and respond to children who are or may be suffering harm. |

## Slide 26 - Abuse, neglect and harm

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| Abuse, neglect and harm |
| **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**  **Abuse means physical, sexual, psychological, emotional or financial abuse**  “harm” means ill-treatment or the impairment of health or development  “development” means physical, intellectual, emotional, social or behavioural development  “health” means physical or  mental health  “ill-treatment” includes sexual abuse and forms of ill-treatment which are not physical  (Children Act 1989 s38)  “impairment” includes impairment suffered by hearing or seeing the  ill-treatment of another  (Adoption and Children Act 2002)  **Harm means abuse or the impairment of (a) physical or mental health, or (b) physical, intellectual, emotional, social or behavioural development** |

### Facilitator Notes

1. This slide gives the definitions of abuse, neglect and harm from the statutory guidance under the Act on the left hand side. On the right it gives the definitions from the Children Act 1989 and the addition from the 2002 Adoption and   
   Children Act.
2. The Act provides definitions of abuse, neglect and harm. **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 theft, fraud, pressure about money, misuse of money. **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).
3. **Harm** means abuse or the impairment of (a) physical or mental health, or (b) physical, intellectual, emotional, social or behavioural development.
4. The basic awareness training from Care Council Wales includes handouts on the different forms of abuse. Financial abuse for children could, for instance, include direct payments to the child not being spent on their care and support needs.
5. Abuse or neglect may constitute a criminal offence. These include offences against the person (violent offences), sexual offences and property offences such as theft. If abuse or neglect is motivated by someone’s personal characteristic – disability, race and ethnicity, religion and belief, sexual orientation and transgender / gender identity – then this may be a hate crime.
6. Practitioners also need to be aware of child sexual exploitation and of the potential for children to be trafficked.
7. The definition of harm in the Act is very similar to the one that existed in the Children Act 1989. This means that referrals of children at risk under this Act are similar to previous referrals..

## Slide 27 - Reporting children at risk

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| Reporting children at risk |
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### Facilitator Note

1. **The Act contains a duty to report a child at risk**. This is a duty for all relevant partners of a local authority: police, other local authorities, probation, local health boards, NHS trusts and youth offending teams.
2. If a relevant partner has reasonable cause to suspect that a child is a child at risk they **must** inform the local authority of that fact.
3. Although the trigger to **report** falls below the threshold of ‘significant harm’, any subsequent **investigation** (ie a child protection investigation) will need to satisfy the s47 Children Act 1989 threshold. A **report** under s130 may trigger either:

* an assessment for a care and support plan only, if the risk falls shorter than a likelihood of significant harm; or
* an assessment for a care and support plan AND a child protection investigation IF the s47 threshold is met.

1. The duty to report remains even if the child does not appear to have needs for care and support.

The guidance states that there should be clearly identifiable points of contact within the local authority and the relevant partners to ensure that a relevant partner can report any concerns to the local authority. The Act requires that local authorities work in partnership with relevant partners (other agencies) and involves them in decisions made about children who may be considered at risk. Relevant partners should make staff aware of this duty. Anyone who works with children should know how to riase a concern.

1. A mandatory reporting duty for female genital mutilation (FGM) was introduced with the Serious Crime Act 2015. The duty requires regulated health and social care professionals, and teachers in Wales to report known cases of FGM in under 18 year olds to the police. The duty came into force on 31 October 2015. It is a personal duty for registered professionals and applies if they are told about FGM by a girl under 18 or observe signs of FGM. Ordinarily reporting should be done within a day. Police and social care should then take immediate action. Suspected FGM should always be reported as a safeguarding concern.

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| Key learning point  Everyone who is involved with children should know how to recognise and report abuse, neglect and harm. There should be agreed contact routes and response. |

### Activity – Exercise

1. The Act defines relevant partners who have a duty to report children at risk. Which other groups and agencies might come across children at risk?

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| **Suggested answer:**  Relevant partners as defined by the Act are the police, other local authorities, probation, local health boards, NHS trusts and youth offending teams. Others who come across children at risk include:   * Educational staff * Voluntary and community groups * Friends, family * Neighbours * Services such as shops, leisure centres, etc.   Numerous groups of people may come into contact with a child or young person. Swift and effective communication if they are concerned that the child may be at risk is essential. Barriers include lack of awareness, reluctance to get involved and fear. Ways of encouraging reporting include campaigns to raise awareness and easy methods of reporting. |

1. How do you know what is reasonable cause to suspect a child may be at risk? What are the indicators?

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| **Suggested answer:**  It can be helpful to think about children and young people’s development needs and changes in behaviour when considering whether abuse, neglect or other forms of harm are taking place. This can provide clues about whether abuse is taking place. |

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| Facilitators’ hints and tips  This activity is useful when you have a multi-agency group. Ask people to get into mixed groups with people from different agencies. Ask them to discuss the questions above and to list as many groups and agencies as they can. After 10 minutes ask them to share their answers. As a whole group, you can then have a conversation about how to increase awareness of safeguarding among the groups mentioned. |

## Slide 28

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| Sharing information |
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### Facilitator Notes

1. The guidance says that you need to follow the ‘Welsh Accord for the Sharing   
   of Personal Information’ (WASPI) so that you share information legally, safely   
   and with confidence. This accord clarifies that organisations should share the minimum necessary information on a need-to-know basis with the person’s consent, but can share without consent where there is a risk of abuse or serious harm to themselves, or others.
2. The WASPI guidance states: “*Staff should not hesitate to share personal information in order to prevent abuse or serious harm, in an emergency or in life or death situations. If there are concerns relating to child or adult protection issues, the relevant local procedures must be followed …”*
3. The Act does not change existing principles in relation to information sharing. In undertaking a care and support assessment under Part 3 of the Act, just as in undertaking a child in need assessment under s17 Children Act 1989, where s47 Children Act is not engaged, information in respect of a child cannot be shared without the consent of parents or those with parental responsibility.
4. When undertaking a care and support assessment in conjunction with a s47 child protection investigation, consent should still be obtained if possible. If consent is refused, or it is not safe or appropriate to obtain consent, then the public interest in child protection overrides the public interest in maintaining confidentiality or obtaining consent from families. A child’s safety is the paramount consideration in weighing these interests.
5. This public interest in child protection, and the specifically in undertaking of a child protection investigation, pursuant to s47 Children Act 1989, goes beyond the WASPI guidance, in that information may be shared, short of an ‘emergency’ or ‘life and death situation’, but where the local authority nevertheless has reasonable cause to suspect that the child is, or is likely, to suffer significant harm. There are situations where a child protection investigation is necessary where there is no perceived emergency or risk of life and limb but the threshold for s47 is still met.

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| Key learning point  You need to know and use your organisation’s processes and procedures for  sharing information. |

## Slide 29 - Making enquiries

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| Making enquiries |
| **the local authority shall make, or cause to be made, such enquiries as they consider necessary to enable them to decidewhether they should take any action to safeguard or promote the child’s welfare**  **(Children Act 1989 s47)**  **Informed that a child (i) is the subject of an emergency protection order; or (ii) is in police protection;**  **or has reasonable cause to suspect that a child is suffering, or is likely to suffer significant harm,**  **the local authority shall make, or cause to be made, such enquiries as they consider necessary to enable them to decide whether theyshould take any action to safeguard or promote the child’s welfare under Section 47 of the Children Act 1989.**  **(Guidance)**  **Child at risk reported** |

### Facilitator Notes

1. This slide shows what the guidance for the Act says on the left, and what the Children Act 1989 says about making enquiries on the right.
2. When a child at risk has been reported under Section 130, the guidance says   
   that the local authority shall make, or cause to be made, such enquiries as they consider necessary to enable them to decide whether they should take any   
   action to safeguard or promote the child’s welfare under Section 47 of the Children Act 1989.
3. This means that the Act links into the Children Act 1989 at the point at which a child at risk is referred. At this point, local authorities need to ensure that there are enquiries to find out what if anything should be done to safeguard the child. The language in the guidance of this Act and the language in Section 47 is the same.
4. Section 47 sets out particular circumstances when there is a duty to make enquiries – when the local authority is informed that a child is the subject of an emergency protection order or in police protection, or when there is suspicion of significant harm. The 2014 Act may mean that some children at risk are referred who are not quite in these circumstances – where the abuse, neglect or harm turns out not to meet the threshold of significant harm (the threshold where there can be compulsory intervention in family life in order to protect children). In these cases, the local authority would usually need to have made enquiries to find this out – just as before.
5. A good assessment is an essential basis for deciding what are the concerns for the child, what needs to change and which services and interventions are needed to achieve the planned changes*.*

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| Key learning point  Good assessment and sound professional judgement is needed to identify whether action is required to safeguard or promote the child’s welfare. Multi-agency work contributes to good decisions. |

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| Facilitators’ hints and tips  Some people will have been involved in responding to referrals about children at risk prior to the Act coming in. It may be helpful to ask people what difference they feel the Act has made to their practice.  The Act should not have made a great difference to previous practice – children who are or may be at risk were already referred to the local authority, and the local authority already responded to this based on what they found out about the level of risk and the impact of it. The Act and guidance that supported it came out gradually over a period of a few years. Changes have been evolutionary and have built on existing good practice. |

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| **Case study**  Dave and Maria Stewart have three children, Bobby aged nine, Kayleigh aged six and Mika aged nine months.  The police have been called out to the family home on five occasions over the last nine years because neighbours reported shouting and screaming. Both parents have always denied any physical violence, although damage to the home has been noted on more than one occasion – with holes punched in doors and the kitchen in disarray. Both parents have appeared to be under the influence of alcohol when police have attended. The family has agreed that the children can be taken to their maternal grandmother’s home on each occasion and no further action has been taken.  The most recent incident was last night. Dave had left the house by the time the police arrived. Baby Mika was crying and Maria appeared shaky and pale. She said that her mum could not help this time because she is in hospital. Maria is worried about her mum and worn out with visiting her. The older two children were seen by the police and appeared ‘cheerful and chatty’. The police decided it was safe to leave the children in their mother’s care.  Following this incident, a strategy discussion took place between children’s social services and the police (with input from colleagues from the children’s school, the family’s GP, heath visitor and the local housing warden). Information about the family held across various agencies was shared and included the following:   * Kayleigh and Bobby were both late to school the morning following the incident and Bobby fell asleep during lessons * The home is generally clean but sparsely furnished with few toys available. The children’s school attendance is 82 per cent * Maria recently visited her GP to ask for help with her depression. She said she feels exhausted and is struggling to sleep. Maria also told the doctor she is finding it hard to cope with Bobby’s behaviour. He sometimes shouts or swears at her and refuses to do what he is asked * Dave was working for his brother until recently, but was laid off after they had an argument which ended in violence. Neighbours have complained to the housing department about loud music coming from the house late into the night. Dave was verbally abusive to the warden when he called round at 3pm to discuss this and appeared very drunk. The children could be heard playing upstairs * Bobby is doing well in school. He is a popular boy who is on the football team. When asked about life at home, he appears guarded and wary, quickly changing the subject. He brags to the other boys about staying out late and his friendships with older children on the estate * Kayleigh has become quiet and withdrawn in school since Mika’s birth. She  is falling behind with her work and receives some additional support. Both children sometimes arrive in school looking unkempt with unbrushed hair, grubby, ill-fitting clothes and no PE kit. Kayleigh was recently found crying in the toilet after some of the girls called her ‘smelly’. She has been in trouble for taking the other children’s belongings and hiding them in her bag. At playtime, she tends to cling to the meal time assistants, wanting to hold their hands and complaining of stomach aches. Kayleigh is due to have two decayed teeth taken out, but did not attend her last appointment * Mika was born three weeks prematurely and small for her dates. The health visitor has not seen her for three months due to missed appointments. Her immunisations are overdue * The school has offered additional support to the family, but this has been refused. The police have provided information about domestic violence services, but these have not been taken up. The consent forms have not been signed for Kayleigh to see the school counsellor. Maria used to go to the local children’s centre and had put her name down to attend a domestic violence workshop but then stopped attending   **Questions**   1. What are the strengths in this family? 2. What are the risks to the individuals in the family? 3. Who in the community could professionals approach to gather further information about the family? 4. What might be your approach to undertaking an assessment for the family?   **Suggested answers**   1. There are some indicators of strengths:   The parents have accepted help from the grandmother and the children’s centre in the past  Maria is seeking help from her GP  The house is clean  Dave has held down a job in the past  Bobby is doing well at school, has friends and plays football  There are support services available locally   1. The children are at risk of emotional, social and behavioural harm. They are experiencing neglect that could harm their health, and their educational and behavioural development. The parents are also at risk and their physical and mental health, and emotional well-being is being affected. Specifically:   The children have had repeated exposure to adult conflict, aggression, drunkenness and police attendance at the home. They showed little response to adult conflict, suggesting they have become de-sensitised  Bobby and Kayleigh have poor school attendance, lack the necessary equipment and are sometimes too tired or pre-occupied to learn  Lack of supervision and unmet emotional needs make the children vulnerable to abuse outside the family as they get older  Kayleigh’s poor presentation seems to be having an effect on friendships; her progress and presentation has deteriorated  Maria is at risk of further domestic abuse. The impact of her depression is a risk for Maria’s ability to respond to the children  The impact of domestic abuse both on Bobby’s behaviour and on his respect for his mother  The family has missed appointments with the health visitor, doctor and dentist  Lack of monitoring of Mika’s development and her vulnerability as a young baby  Both parents’ physical and emotional well-being is at risk from sustained high levels of drinking  The parents have poor relationships with neighbours and the suitability of the family’s living accommodation may be at risk  The parents have recently withdrawn from support services, have lost support from extended family and are experiencing the stress of illness  Things seem to be getting worse and the family is under a high level of stress   1. The local community is a source of information and support for the Stewart family. People who could potentially be approached include: the grandmother, uncle, teachers, friends, parents of friends, football coach, neighbours, housing officer, meal time assistant, police, hospital staff caring for the grandmother, dentist, health visitor, children’s centre, teaching assistant. 2. The family should be viewed as individuals, perhaps with Maria and Mika as one unit, and each one taken through a ‘what matters to you?’ conversation to elicit their well-being outcomes. It’s important to have clarity about the wishes and feelings of Bobby and Kayleigh. It is also important to consider what support from the local community might meet the individuals’ various needs, and who might be the best person to work with each individual. For instance, who could work with Dave that he will be most likely to respond to? |

## Slide 30

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| Safeguarding Boards |
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### Facilitator Notes

1. End of section on children. We will now explore Safeguarding Boards.

## Slide 31 - Safeguarding Boards

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| Safeguarding Boards |
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### Facilitator Notes

1. This slide highlights the purpose of Safeguarding Boards, lists the partners in the board and reminds that the boards are grouped into six areas in Wales.
2. Section 134 of the Act established Safeguarding Children and Adults Boards across Wales. Boards’ objectives are:

For children a) to protect children within its area who are experiencing, or are at risk of abuse, neglect or other kinds of harm, and b) to prevent children within its area from becoming at risk of abuse, neglect or other kinds of harm.

For adults a) to protect adults within its area who have needs for care and support (whether or not a local authority is meeting any of those needs), and are experiencing, or are at risk of, abuse or neglect, and b) to prevent those adults within its area from becoming at risk of abuse or neglect.

1. Adults’ and children’s boards have the same objectives. They should be able   
   to share learning whilst ensuring that the particular needs of children and adults are met.
2. Boards need to work with individuals, families, communities, and all agencies to support these objectives. Safeguarding Boards should have representation from:

Local authority

Police Chief Officer

Local health board

NHS trust

Provider of probation services

Provider of offender management.

There are other groups, organisations and representatives that the Boards will want to consider involving in their work. Service recipients must be able to participate, too.

1. Regulations set out six Safeguarding Board areas for Children and Adults:

North Wales

Gwent

Cwm Taf

Western Bay

Mid and West Wales

Cardiff and Vale

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| Key learning point  The purpose of a Safeguarding Board is to prevent abuse, and protect adults or children within its area who are experiencing, or are at risk of abuse, neglect (or other kinds of harm for children). |

### Activity – Questions

1. How can the Safeguarding Board support your organisation to prevent abuse and protect people from abuse, neglect and (for children) harm?
2. What can you do to make your local board more effective?

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| Suggested answer:  The Act specifies a range of ways that Boards can support organisations to be effective, and you may have examples of how Boards are already doing this:   * Contributing to policies / procedures * Raising awareness * Helping to set and review performance * Disseminating learning and recommendations for good practice * Helping organisations to build links and access support.   Evidence ([Leaders’ Briefing, RiPfA 2015](https://www.ripfa.org.uk/resources/publications/leaders-briefings/)) points to key areas for Safeguarding Boards to consider in order to be effective:   * Strategic goals and purpose – these should be informed by good data collection and performance reporting * Links to other local and area decision making bodies * Structure, accountabilities and coordination * Appropriate membership – this may vary for different areas of work * Commitment of members – ensure that members can commit their organisations to policies and practices agreed by the board, and obtain necessary resources * Priorities – these should be based on evidence and local needs * Accountability – how the board will be accountable for its own work and will effectively challenge others   Local organisations can support boards to know what is needed, can link  into them and contribute to their work, can provide input and resource, can disseminate and embed their work, and can help them to be accountable  to the public. |

## Slide 32 - Functions of Safeguarding Boards

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| Functions of Safeguarding Boards |
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### Facilitator Notes

1. This slide first reminds that Boards exist to prevent abuse neglect and harm,   
   and to protect people from this. It lists the main functions of Boards set out in guidance, and highlights the importance of service recipient participation.
2. **Sections 135 to 141 in the Act covers how Safeguarding Boards should operate.** The guidance and regulations set out the detail of how Boards should work. Children and Adults’ Boards follow the same guidance – the aim is for there to be consistency, for them to work in parallel and for good practice to be shared. Boards may co-operate and act jointly.
3. The focus is on prevention and protection. Boards can challenge agencies to ensure there is a focus on families and communities, and co-operation between agencies.
4. Boards have an overall responsibility for challenging relevant agencies to:

Contribute to ensuring national policies / procedures are monitored and remain fit for purpose

Raise awareness regarding risk of abuse, neglect and other forms of harm

Review efficacy of measures for each lead agency

Undertake practice reviews and audits and make and monitor any recommendations

Disseminate information on best practice, facilitate research into protection and review training needs

Co-operate with other boards and seek specialist advice or information   
when appropriate

1. Boards have a role in the Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015 strategy to use their role in undertaking safeguarding reviews to identify how to combat violence against women. Boards also have a role in the Child Sexual Exploitation action plan to identify how they can prevent child sexual exploitation and protect children from this. They can also work to combat trafficking and modern slavery. It is important that Boards keep up to date with evidence about safeguarding people.
2. Safeguarding Boards **must** co-operate with the National Board and all partners must take all reasonable steps to ensure that the Board operates effectively.
3. Safeguarding Boards **must** provide opportunities for those affected by safeguarding to participate and inform their work.
4. As part of raising awareness and building links in the community, Boards **must** publish:

An annual plan setting out their objectives

An annual report on progress and work achieved

1. The Board **may** ask for information from a person or body whose functions or activities are considered by the Board to be such that the person or body is likely to have information relevant to the exercise of a function of the Board. The person or body **must**:

Comply for requests for information unless this is incompatible with its duties or will have an adverse effect on its functions

Give a written response if it is not going to comply to the request for information

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| Key learning point  Boards exist to support good practice. |

## Slide 33 - Board arrangements

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| Board arrangements |
| * Senior membership from partners * Other members as needed * Links with regulators and inspection bodies * Wider engagement * Leadership from Chair * Participation from children  and adults * Partners contribute to expenses |

### Facilitator Notes

1. This slide lists the main points from the guidance about how Safeguarding Boards operate.
2. A Safeguarding Board must include sufficiently senior members from each partner and guidance suggests the appropriate level. A Safeguarding Board may include members representing other persons or bodies, if they are doing relevant work. The Board should link into regulatory bodies and inspectorates as they also work to prevent abuse and neglect and to safeguard people. Boards should also engage with other sectors including voluntary organisations and providers.
3. Each Board has a chair and vice chair. The role of the chair includes to:

Secure agreement to the plan

Build relationships and commitment

Foster effective relationships with other boards and external bodies

1. Regulations say that Boards must give children or adults the opportunity to participate in one or more events of the Board’s work at least once a year. Guidance suggests that this could be through existing groups. At every meeting Boards must consider service recipient engagement for specific work they are doing and evaluate current engagement. Outcomes of engagement should be reported in the annual plan. Engagement needs to be inclusive and should be part of the plan.
2. A funding formula is included in the guidance and budgets should be agreed to ensure sustainability to fund the work programme.
3. A Safeguarding Board partner may make payments towards expenditure incurred on Board business. There should be shared responsibility, transparency and fairness about funding.

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| Key learning point  Within each agency good partnership working and a shared responsibility towards ensuring practice is safe is essential. Prevention and protection need to be high on each agency’s agenda. |

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| Facilitators’ hints and tips  Research ([The governance of adult safeguarding: findings from research into Safeguarding Adults Boards, SCIE, 2011](http://www.scie.org.uk/publications/reports/report45.asp)) points to some recommendations to support boards to have good governance:   * Strong statements of strategic purpose and scope, with explicit multi-agency commitment * Clear structures with explicit divisions of responsibility and robust coordinating mechanisms * Explicit commitments on membership, in roles that are understood and agreed, including clarity on the authority of the Board in relation to member agencies * Broad stakeholder involvement * Clarity on the role and status of the chair, and Board rules of engagement, including resources * Strategic leadership on a range of functions, including strategic planning, policy and procedural guidance for member agencies, performance monitoring and quality improvement * Explicit involvement of people who use services and carers in the work of the Board, and standards for their empowerment in all safeguarding activity * Clear internal standards for Board performance, and clear external  accountability routes |

## Slide 34 - Service recipient participation

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| Service recipient participation |
| **Service recipient participation is a requiremen**t  Involve in service delivery and design  Be creative  Be aware of power  Understand each other’s needs  Create time and resource  Review and evaluate  See what changes have been achieved  Be purposeful |

### Facilitator Notes

1. This slide sets out some of the ways in which service recipients can be involved in Safeguarding Boards.
2. The purpose of service recipient participation is to help Safeguarding Boards to be better informed and therefore more effective.
3. Safeguarding Boards **must** ensure participation is as inclusive as possible given the various needs of children, young people and adults. Ways of involving service recipients are not prescribed. They form part of the Board’s plan and are evaluated for impact in the annual report. Guidance says that boards should consider different ways for people to participate for different pieces of work, and that existing mechanisms may be useful. Costs of participation should be built   
   into plans.
4. Good practice should be shared with the National Independent Safeguarding Board to support learning of how to do this well.

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| Key learning point  Boards must ensure there is service recipient participation. |

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| Facilitators’ hints and tips  Research – RiPfA (2013) [Feedback and Engagement: Literature Review, Dartington](https://www.ripfa.org.uk/publications-resources/partnership-working-feedback-and-engagement/60-feedback-a-engagement-literature-review-2013) – highlights important principles of service recipient involvement:   * Clear purpose * Clear values * Collaborative venture from the start * Acknowledgement of power and complexity   There are different levels of involvement from consultation through to recipient control. It is essential to be clear about the level of involvement. Meaningful involvement includes sharing power. Success factors for involvement from the research are:   * Based on values of respect, equality, genuine partnership, inclusion, empowerment, choice, privacy, confidentiality, independence and individuality * Be aware and understand power relationships:   Clarity about purpose, terminology and benefits – including what can be changed and what cannot   * Involvement from the start – including in designing how involvement will happen * Clarity about how information will be used:   Feedback on what has been done as a result and the impact of this  Build relationships and understanding first – avoid jargon  Adequate resources and time  Use methods that work for the people involved – be creative and flexible  If the audience are involved in supporting service recipient participation in Safeguarding Boards, you may want to consider small groups answering the questions below, then having a whole group discussion about how to ensure that service recipient involvement is meaningful. It may be helpful to introduce or remind people of the concept of a [ladder of participation](http://lithgow-schmidt.dk/sherry-arnstein/ladder-of-citizen-participation.html). Sherry Arnstein, writing in 1969 about citizen involvement in planning processes in the United States, described a ladder of participation with eight steps. The ladder of participation concept has been adapted many times since and usually describes different levels of service recipient participation from informing people, through consultation to partnership and citizen control. The higher the rung, the more meaningful the participation. |

### Activity – Exercise

1. What level of participation do service recipients have in your Safeguarding Board at the moment?
2. How can participation become more meaningful, particularly for people whose voices are seldom heard?

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| Suggested answer:  Different forms of participation are suited to different groups, levels of engagement and subjects. The purpose  of participation and the reasons why it is done in a particular way must be transparent and, where possible, agreed.  It is easy for participation and engagement to be tokenistic. Service recipients  can support you to get it right and do it in a way that has impact: they have expertise and a legitimate role in planning and delivering services. It is helpful  to share examples of where service recipients have contributed, had impact and felt empowered through the process.  The Welsh Assembly Government endorsed National Principles for Public Engagement <http://www.participationcymru.org.uk/national-principles>. These are written for children and young people, however, they are useful for all groups:   * Engagement is effectively designed to make a difference – clarity about why it is needed, what it can achieve * Encourage and enable everyone affected to be involved, if they so choose – identify people, use existing groups to contact people * Engagement is planned and delivered in a timely and appropriate way – process is clear and appropriate methods are used * Work with relevant partner organisations – use existing knowledge and methods of engagement, don’t duplicate * The information provided will be jargon free, appropriate and understandable – e.g. easy read, Welsh language, culturally sensitive * Make it easier for people to take part – identify barriers and address them e.g. different languages, sight or hearing impairment, disability, transport access, etc., as well as more specific cultural needs * Enable people to take part effectively – engagement processes should try to develop skills knowledge and confidence * Engagement is given the right resources and support to be effective – appropriate training, guidance and support is given to all involved * People are told the impact of their contribution – timely and appropriate feedback is given about what was said, and decisions and actions taken  as a result * Learn and share lessons to improve the process of engagement – evaluate and share learning, and feed this into the next time.   Guidance for the Act suggests using existing mechanisms, processes and structures that are already in place in some parts of Wales as part of the determination and design of suitable arrangements for Safeguarding Board areas.  There are financial implications for mentoring children, young people and adults to support their participation. This may include consideration of advocacy, training, transport and venues etc. and Safeguarding Boards need to build costs into their financial plans. |

## Slide 35 - Improving safeguarding

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| Improving safeguarding |
| * Practice reviews * Concise * Extended * Multi-agency forums * Case learning * Dissemination of new knowledge and findings |

### Facilitator Notes

1. [Handout: Practice Reviews](https://socialcare.wales/hub/hub-resource-sub-categories/safeguarding)
2. This slide lists the ways in which the guidance states that Safeguarding Boards can support learning and development in order to improve safeguarding.
3. Regulations for Safeguarding Boards replaced Serious Case Reviews with child and adult practice reviews. Working Together to Safeguard People volume 2 gives guidance on child practice reviews, and volume 3 gives guidance on adult practice reviews.This guidance is for Boards and their partner agencies.
4. The guidance sets out a learning and review framework. This provides a foundation for learning through multi-agency professional forums. The overall purpose of the review system is to promote a positive culture of multi-agency learning and reviewing in local areas, for which Boards and partner agencies hold responsibility.
5. Multi-agency forums are set up by each board as a programme of learning. They provide opportunities to learn from cases and to disseminate new knowledge, including from a rolling programme of audits.
6. Where there is a need for the Board to undertake a more formal review, criteria are clearly specified in regulations for setting up multi-agency practice reviews that are either concise or extended. The Board **must** establish reviews when they are required i.e. where abuse or neglect of a child or adult is known or suspected and the child or adult has:

Died

Sustained potentially life threatening injury

Sustained serious and permanent impairment of health or development.

1. Concise reviews should happen when the child was not on the child protection register or looked after in the six months before, or the adult wasn’t someone that the local authority was taking action to protect from abuse or neglect; otherwise it should be an extended review.
2. Reports should be given to the board for challenge and agreement of an action plan within four weeks of the final report. Boards should publish the review and share the learning locally and nationally.
3. Boards can do other reviews and audits. They should disseminate learning   
   about best practice generally. They should undertake or commission research and evaluation about safeguarding. They should review training against local training needs.
4. Safeguarding Boards should co-operate and work with national bodies to help improve safeguarding practice.

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| Key learning point  Practice reviews and older serious case review findings can help local authorities and partner agencies challenge practice and learn from each other. |

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| Facilitators’ hints and tips  The review of In Safe Hands (Welsh Institute for Health and Social Care, 2010) identified that Boards were needed to support expert, robust safeguarding arrangements and inter-agency work. They could help to ensure consistency through learning and development, and robust data protection. Safeguarding reviews have shown that learning needs to be shared in a more timely and comprehensive way. Boards can help to ensure full involvement in reviews,  to scrutinise findings and to share them.  Practice Reviews are a way of learning lessons and improving future practice. For this to happen, there must be transparency, candour and analysis, which seeks to make sense of and to learn from the events that took place. The purpose is not  to apportion blame, but to learn and implement lessons from a case about how agencies and professionals worked together. The purpose is also to disseminate examples of good individual practice and effective inter-agency working.  At their best, practice reviews are quality improvement reports, to be drawn upon  for learning and service improvement. They can be compromised by variable standards of analysis and by lack of inter-agency engagement. Guidance supports Boards to achieve consistency and to learn effectively.  There is no complete database of reviews – which makes collation and learning for practice development difficult. There are, however, analyses of SCRs involving people with learning disabilities (Manthorpe and Martineau, 2015), housing (Parry, 2014), London Boroughs (Bestjan, 2012) and adults who self-neglect (Braye et al, 2015a; b). [NSPCC](http://www.nspcc.org.uk/preventing-abuse/child-protection-system/wales/child-practice-reviews/) has executive summaries and full reports and learning from all the child practice reviews undertaken. Some recent reviews that boards need to be aware of are:  [Chelsey and Mary 2015](https://www.google.co.uk/url?sa=t&rct=j&q=&esrc=s&source=web&cd=4&cad=rja&uact=8&ved=0CDYQFjADahUKEwjepdiF3r_IAhUJaz4KHX_hDF0&url=http%3A%2F%2Fwithscotland.org%2Fdownload%2Fsouth-east-wales-safeguarding-children-board-serious-case-review-february-2015&usg=AFQjCNHKGdBSJLMQuMT2i0Ewd85fuI7YWQ&sig2=bFXflaD01ssYOmNT-0wx7A&bvm=bv.104819420,d.bGQ) – which highlighted the need to recognise and act on sexual exploitation and domestic abuse, the need to share information about criminal history, and the need to recognise that young people are children until the age of 18.  Mr Z 2012 – which highlighted the need to review healthcare needs and treatment of people in care homes as they change, and the need to respond to meet basic needs including pain relief at all stages of life.  [Operation Jasmine 2015](http://gov.wales/topics/health/publications/socialcare/reports/accountability/?lang=en) – which highlighted the need to act on complaints and concerns about care, and the need to ensure good governance in care providers. |

### Activity – Exercise: Appreciative Enquiry

1. When was your last serious case review / practice review?
2. What were the lessons you learned and how has practice changed?
3. Are there any outstanding recommendations that were made and, if so, how do you intend to address these?
4. Do you use appreciative inquiry techniques to help you to learn from current safeguarding practice in your area?

## Slide 36

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| National Independent Safeguarding Board |
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### Facilitator Notes

1. End of section on Safeguarding Boards. We will now explore the National Independent Safeguarding Board.

## Slide 36

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| National Independent Safeguarding Board |
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| Facilitators’ hints and tips  This session is primarily about giving information as most people undertaking the training will not have close links the National Independent Safeguarding Board. To make this more interactive, you could include more reflective questions about: the purpose of the board; what its functions should be; what it can do for you or you can do for it. |

### Facilitator Notes

1. This slide emphasises the purpose of the national board and lists its main functions.
2. **Section 132 of the Act established the National Independent Safeguarding Board.** This is an advisory board that advises Welsh Ministers on safeguarding. Again the aim is to secure consistent improvements to safeguarding across Wales. The board’s duties are:

To provide support and advice to Safeguarding Boards with a view to ensuring that they are effective

To report on the adequacy and effectiveness of arrangements to safeguard children and adults in Wales

To make recommendations to the Welsh Ministers as to how those arrangements could be improved

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| Key learning point  Safeguarding for children and adults in Wales needs to be consistent, effective and accountable and the National Independent Safeguarding Board has a role in ensuring this. |

### Activity – Questions

1. How can the National Independent Safeguarding Board support consistency and strengthen practice in safeguarding across Wales?
2. How can you work effectively with the National Board?

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| Suggested answer:  The review of *In Safe Hands* (Welsh Institute for Health and Social Care, 2010) found that there was widespread desire for national policies and procedures and national data. It recommended a National Board to advise on policy, lead practice development, to ensure good practice was disseminated, to gather and use data, and to support national standards in safeguarding.  People should be able to identify areas that they think need to be considered on a national level, for example policies and specialist training. Sharing good practice between areas is important in ensuring equity and upholding rights. The Board can support this by making information available nationally.  The Board is flexible in what it is able to do in order to support practice nationally. It can engage with a range of stakeholders. People should have ideas about who the Board needs to work with and to consult. |

## Slide 38 - Functions of the National Board

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| Functions of the National Board |
| * Review areas of practice * Engage and consult * Provide annual report     **Accountable to individual agencies**  **National Independent Safeguarding Board**  **Accountable  to Ministers**  **Safeguarding Board members** |

### Facilitator Notes

1. This slide emphasises what the Boards must do and also highlights the difference in accountability between the National Independent Board Safeguarding and Safeguarding Boards.
2. Guidance and regulations give more detail about how the National Independent Safeguarding Board operates. The National Board is accountable to Welsh ministers and works in partnership with Safeguarding Boards – members of Safeguarding Boards are not accountable to the National Board but to their individual agencies. However, they do give a report to the National Board. At least one member of the National Board must meet Safeguarding Board chairs twice a year.
3. Membership of the National Independent Safeguarding Board is as follows:

Chair and members (up to six) are appointed by Welsh Ministers through a public appointment exercise initially for three years

Members are appointed for their experience in safeguarding, protection and have suitable, and relevant experience and knowledge

1. The Board looks at a range of areas to advise and support: policies and procedures; training; information sharing; learning; use of the law.
2. The Board must regularly engage with a range of expert reference groups, practitioners and individuals. It communicates regularly and must consult   
   with those who may be affected by arrangements to safeguard adults and children in Wales.
3. The National Board must give an annual report to Welsh Ministers and give other reports as needed. The annual report includes:

Account of the National Board’s work

Overview of adequacy and effectiveness of arrangements to safeguard children and adults in Wales

Understand data on safeguarding in adults and children’s services

Learning and examples of effective practice

Recommendations as to how improvements can be achieved

Themes identified in the support and advice provided to Safeguarding Boards with any improvements noted

Details of how and what the National Board has consulted with and identify those who may be affected by arrangements to safeguard adults and children in Wales

Any significant issues to operational practice of the National Board.

1. Safeguarding Boards can refer to themes in this report to inform their own   
   annual reports.
2. Boards have a role in the Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015 strategy to work with government to further inform safeguarding approaches in Wales as they relate to violence against women, domestic abuse and sexual violence.

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| Key learning point  The annual report from the National Independent Safeguarding Board should be a useful source of information about the state of safeguarding in Wales. |

## Slide 39

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| Summary |
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### Facilitator Notes

1. End of section on the National Independent Safeguarding Board. We will now consider how people can put learning into practice.

## Slide 40 - Everyone has a role to play

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| Everyone has a role to play |
| How will you put your learning into practice? |

### Facilitator Notes

1. From this training, people should have gained additional knowledge, have started to practice skills, and identified some of the implications for their work. They may need to do more in order to feel confident and capable.
2. People must act lawfully – follow the law, guidance and regulations. They should act in ways that reflect good practice based on what people who use services have said they want and need, on practice experience, and on research.
3. It is important to identify actions that will lead to good, lawful practice. This will help people to build on and strengthen safeguarding practice in Wales.
4. For learning to be transferred into practice and for change to spread, it is important that you:

Reflect on your current knowledge and skills

Identify your learning and development aims

Reflect on how new knowledge relates to your practice

Consider the barriers and enablers to transferring learning into practice

Try out new ways of working in a safe, supportive environment

Identify an action plan showing how you will put learning into practice with support from managers and colleagues.

### Activity – Exercise

1. Complete the personal action plan identifying your top three priorities, how you will review your progress, and any further support you will need.

# Links to Key Resources

## Links to regulations and codes of practice or statutory guidance

[Social Services and Well-being (Wales) Act 2014](http://www.legislation.gov.uk/anaw/2014/4/enacted). This is an Act of the National Assembly for Wales which reforms social services law. It was enacted in May 2014. Its overall aim is to make provision to improve well-being outcomes for people who need care and support, as well as carers.

[The Adult Protection and Support Orders (Authorised Officer) (Wales) Regulations 2015](http://www.legislation.gov.uk/wsi/2015/1465/pdfs/wsi_20151465_mi.pdf).These regulations provide specific guidance on APSOs and outline how officers authorised to apply for Adult Protection and Support Orders will operate. They come into force in Wales in April 2016.

[The Safeguarding Boards (General) (Wales) Regulations 2015](http://www.legislation.gov.uk/wsi/2015/1357/pdfs/wsi_20151357_mi.pdf). These regulations outline the requirements for Safeguarding Adults Boards in Wales, including information about Safeguarding Board Areas, lead partners, annual plans and   
annual reports. They come into force in Wales in April 2016.

[The National Independent Safeguarding Board (Wales) Regulations 2015](http://www.legislation.gov.uk/wsi/2015/1803/pdfs/wsi_20151803_mi.pdf)**.** These regulations outline the requirements for the National Independent Safeguarding Board including the constitution, meeting proceedings, supplementary groups to be set up by the Board, and requirements around consultation. They came into force in Wales on the 1 October 2015.

[The Safeguarding Boards (Functions and Procedures) (Wales) Regulations 2015](http://www.legislation.gov.uk/wsi/2015/1466/pdfs/wsi_20151466_mi.pdf).These regulations outline the functions of Safeguarding Boards, Practice Reviews, procedures of Safeguarding Boards, and opportunities to participate in their work.

[Working Together to Safeguard People volume 1 - Introduction and Overview.](https://socialcare.wales/hub/sswbact-codes) Statutory guidance in relation to Part 7 (Safeguarding) of the Social Services and Well-being (Wales) Act 2014, including adult protection and support orders; the duties to report and enquire; safeguarding boards; and the National Independent Safeguarding Board.

[Working Together to Safeguard People volume 2 - Child Practice Reviews.](https://socialcare.wales/hub/sswbact-codes) This guidance sets out arrangements for multi-agency child practice reviews in circumstances of a significant incident where abuse or neglect of a child is known or suspected. Chapters 1-7 of this guidance are issued under section 139 of the Social Services and Well-being (Wales) Act 2014.

[Working Together to Safeguard People volume 3 – Adult Practice Reviews](https://socialcare.wales/hub/sswbact-codes). This guidance sets out arrangements for multi-agency adult practice reviews in circumstances of a significant incident where abuse or neglect of an adult at risk is known or suspected. Chapters 1 - 7 of this guidance are issued under section 139 of The Social Services and Well-being (Wales) Act 2014.

[Working Together to Safeguard People volume 4 – Adult Protection and Support Orders.](https://socialcare.wales/hub/sswbact-codes) This guidance provides a single point of reference on Adult Protection and Support Orders (APSOs) for local authorities. It provides comprehensive information regarding the seeking, making and enforcement of an APSO. It is issued under section 131 of the Social Services and Well-being (Wales) Act 2014.

[Working Together to Safeguard People volume 5 – Handling Individual cases, Child version, Adult version.](https://socialcare.wales/hub/sswbact-codes) This replaces previous guidance (In Safe Hands, All Wales Child Protection Procedures 2008, Wales Interim guidance on the prevention of abuse towards vulnerable adults 2010/13).

[Violence Against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015](http://www.legislation.gov.uk/anaw/2015/3/contents/enacted).This Act aims to improve arrangements for the prevention of gender-based violence, domestic abuse, and sexual violence, arrangements for the protection of victims of gender-based violence, domestic abuse and sexual violence, and support for people affected by these issues.

[Well-being of Future Generations (Wales) Act 2015](http://gov.wales/topics/people-and-communities/people/future-generations-act/?lang=en). This Act is about improving the social, economic, environmental and cultural well-being of Wales.

[Regulation and Inspection of Social Care (Wales) Act 2016](http://gov.wales/topics/health/socialcare/regulation/?lang=en). This Act establishes a regulatory regime which is consistent with the changes being delivered by the Social Services and Well-being (Wales) Act 2014.

Home Office (2015) [Mandatory Reporting of Female Genital Mutilation – procedural information](https://www.gov.uk/government/publications/mandatory-reporting-of-female-genital-mutilation-procedural-information). This document gives regulated health and social care professionals, and teachers, an understanding of the new female genital mutilation (FGM) mandatory reporting duty for under 18s, as introduced by the Serious Crime Act 2015.

## Useful links to other materials

All Wales Child Protection Procedures Review Group (2011) [All Wales practice guidance for safeguarding and promoting the welfare of unaccompanied asylum seeking children and young people](http://www.baaf.org.uk/webfm_send/2405). The aim of this guidance is to safeguard and promote the welfare of unaccompanied asylum seeking / refugee children and young people in Wales who should be regarded as children first and migrant second and therefore entitled to assessment, support and protection in the same way as any other child.

All Wales Child Protection Procedures Review Group (2011) [All Wales practice guidance for safeguarding children who may have been trafficked](http://www.childreninwales.org.uk/wp-content/uploads/2015/09/All-Wales-Practice-Guidance-for-Safeguarding-Children-Who-May-Have-Been-Trafficked.pdf). This guidance   
is intended to provide practice guidance to professionals and volunteers from all agencies to help them effectively safeguard children who are abused and neglected by adults who traffic them into and within the UK for purposes of exploitation. The guidance recognises that the development of a multi-agency approach, which is   
able to establish long-term responses to addressing trafficking, is likely to be more effective than individual initiatives.

All Wales Child Protection Procedures Review Group (2011) [All Wales practice guidance for safeguarding children and young people affected by domestic abuse](http://www.childreninwales.org.uk/wp-content/uploads/2015/09/Domestic-Abuse-Protocol-Final-27-04-11-Pdf.pdf). This practice guidance provides information to all professionals to support safe practice and ensure an integrated response to the safeguarding of children affected by domestic abuse.

Care and Social Services Inspectorate Wales (2009) [Safeguarding and protecting children in Wales](http://cssiw.org.uk/docs/cssiw/publications/091019overviewen.pdf): the review of the local authority services and local safeguarding children's boards. This report collates local authority and local safeguarding children boards’ assessments of how effective their arrangements to safeguarding and protect children were in 2009. It summarises the main messages and findings from CSSIW’s programme to verify the self-assessments.

Care and Social Services Inspectorate Wales (2010) [National Inspection of Adult Protection: All Wales overview](http://cssiw.org.uk/docs/cssiw/report/100325overviewen.pdf). This report sets out the findings of the national inspection of adult protection undertaken by the Care and Social Services Inspectorate Wales (CSSIW) between July and December 2009. This includes evidence of local authority social services’ performance and additional information about arrangements to support adult protection in care homes regulated by CSSIW.

Care and Social Services Inspectorate Wales and Healthcare Inspectorate Wales (2010) [Adult protection and safeguarding in Wales: key issues across health and social care in Wales](http://gov.wales/docs/cssiw/news/100330statementen.pdf). This paper provides an assessment of the quality of protection and safeguarding for adults across health and social services. Its purpose is to highlight the key and common messages that arise for health and social care from a number of reports.

Care Council for Wales (2015) [Code of Professional Practice for Social Care](https://socialcare.wales/resources/code-of-professional-practice-for-social-care-full-version).   
The practical guidance within the new Code empowers the social care workforce   
to put the well-being of individuals at the centre of decisions about their own care   
and support.

Care Council for Wales *All Wales Basic Safeguarding Awareness Training* – available at <https://socialcare.wales/learning-and-development/safeguarding> (accessed 28 September 2015). A suite of resources including training slides, trainer notes, activities, and lesson plans covering the basics of safeguarding adults and children.

Care Council for Wales *Family Justice* – available at <https://socialcare.wales/learning-and-development/family-justice> (accessed 28 September 2015). This suite of online resources aims to enable social workers to work effectively within the family justice service in Wales. It includes a range of publications to download, including a handbook on ‘Analysis and Critical Thinking in Assessment’ and numerous practice tools.

Children in Wales *Safeguarding* – available at <http://www.childreninwales.org.uk/our-work/safeguarding/> (accessed 28 September 2015). This is the home page for a range of safeguarding children resources. It includes links to news, press releases, policy, training, events and resources.

Children in Wales *Keep Kids Safe* <http://www.childreninwales.org.uk/our-work/accident-prevention/keep-kids-safe-2017/> (accessed 20 February 2017). Aimed at reducing unintentional injuries in the under 5s, this toolkit provides organisations and practitioners with all of the resources needed to deliver child safety information and advice to parents.

Davies, E (undated) *Different Words, Different Worlds: The concept of language choice and social work and social care*. Care Council for Wales – available at <https://socialcare.wales/resources/different-words-different-worlds> (accessed 15 October 15).

Department for Constitutional Affairs (2007) [Mental Capacity Act 2005 Code of Practice](https://www.justice.gov.uk/protecting-the-vulnerable/mental-capacity-act). London: The Stationery Office. The Code of Practice supports the mental Capacity Act (MCA) and provides guidance to all those who care for and / or make decisions on behalf of adults who lack capacity. The Code includes case studies and clearly explains in more detail the key features of the MCA.

Department for Education (2015) [Working Together to Safeguard Children](https://www.gov.uk/government/publications/working-together-to-safeguard-children--2). This statutory guidance on inter-agency working to safeguard and promote the welfare   
of children applies to local authorities and schools in England.

Department of Health (2015) [Winterbourne View: transforming care 2 years on](https://www.gov.uk/government/publications/winterbourne-view-2-years-on). This report is a collective account from partners across the health and care system, which describes the work that has taken place to implement the actions identified in the original [Winterbourne View](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/213215/final-report.pdf) report.

Flynn M (2015) In Search of Accountability: [A review of the neglect of older people living in care homes investigated as Operation Jasmine](http://gov.wales/docs/dhss/publications/150714ojreporten.pdf) and the [Executive Summary](http://gov.wales/docs/dhss/publications/150714ojsummaryen.pdf). Operation Jasmine was a major police investigation that started in November 2005.   
It concerned 63 deaths which were a cause for concern in care homes and nursing homes for older people in south east Wales. This full report outlines in detail an introduction, methodology, overview chronologies, analysis, conclusions, lessons   
and recommendations.

Healthcare Inspectorate Wales (2010) Safeguarding and Protecting Vulnerable Adults in Wales: [A review of the arrangements in place across the Welsh National Health Service](http://www.hiw.org.uk/sitesplus/documents/1047/Pova%20web%20e.pdf). This report aimed to answer two questions: are those working in healthcare organisations aware of their responsibilities in relation to the protection of adults at risk, and do they know how to properly deal with suspected adult protection / safeguarding issues?; And are adults at risk when accessing healthcare services? A series of inspections and spot checks were carried out to answer these questions.

Information and Learning Hub *Advocacy* – available at <https://socialcare.wales/hub/hub-resource-sub-categories/advocacy> (accessed at 16 February 2017). Resources designed to give you an overview of the key aspects of the Act in relation to advocacy and specifically Independent Professional Advocacy. They also aim to build awareness and understanding of advocacy among those who could have the potential to work with, or make referrals to, advocacy services.

Information and Learning Hub *Information and Awareness* – available at <https://socialcare.wales/hub/hub-resource-sub-categories/information-and-awareness> (accessed at 16 February 2017). Resources designed to give you an overview of the Regulation and Inspection of Social Care (Wales) Act 2016 and what it means for the social care sector.

Kingston University Institute for Child Centred Interprofessional Practice (2014) [A Study to Investigate the Barriers to Learning from Serious Case Reviews](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/331658/RR340.pdf). Department for Education. This document reports on a project in England, funded by the Department for Education, which investigated barriers to learning from Serious Case Reviews in order to identify ways of overcoming these barriers and ensure that any learning is embedded in policy and practice.

Klonowski A (2013) [Report of the Independent Reviewing Officer in relation to child sexual exploitation issues in Rochdale Metropolitan Borough Council during the period 2006 to 2013](http://www.rochdale.gov.uk/pdf/2013-20-05-Final%20Report%20of%20IRO%20into%20CSE%20issues%20v2.pdf). Rochdale Metropolitan Borough Council. This independent report looks into Rochdale Borough Council’s response to issues around child   
sexual exploitation. It involved face-to-face interviews with past and present members of staff and an examination of the authority’s children’s services, licensing and legal departments.

Local Government Association *Reforms to Adult Safeguarding* – available at [http://www.local.gov.uk/care-support-reform/-/journal\_content/56/10180/  
6523063/ARTICLE](http://www.local.gov.uk/care-support-reform/-/journal_content/56/10180/6523063/ARTICLE) (accessed 28 September 2015). Although developed to support effective provision of safeguarding adults under the new Care Act in England, this page collates a range of useful, open access resources from SCIE, Skills for Care, ADASS, and LGA such as [Making Safeguarding Personal](http://www.local.gov.uk/web/guest/adult-social-care/-/journal_content/56/10180/6074789/ARTICLE).

Magill J, Yeates V and Longley M (2010) [Review of In Safe Hands](http://gov.wales/docs/dhss/publications/100914insafehandsreviewen.pdf). Welsh Institute for Health and Social Care and the University of Glamorgan. This independent

report reviewed the Welsh Assembly Governments’ statutory guidance on

‘vulnerable adults’. It aimed to consider and assess the continuing effectiveness, appropriateness and robustness of the guidance, and to make recommendations about where improvements can be made. It acknowledged the important contribution made by the guidance, but concluded that *In Safe Hands* was partially effective, in some important aspects, no longer appropriate, and not sufficiently robust.

NSPCC *Child Protection in Wales*– available at <http://www.nspcc.org.uk/preventing-abuse/child-protection-system/wales/legislation-policy-guidance/> (accessed   
28 September 2015). This page contains up to date links to relevant legislation, policy and guidance, as well as research and resources [child practice reviews](http://www.nspcc.org.uk/preventing-abuse/child-protection-system/wales/child-practice-reviews/).

Older People’s Commissioner for Wales *Adult Protection* – available at <http://www.olderpeoplewales.com/en/adult_protection.aspx> (accessed 20 February 2017). A range of resources about the abuse faced by older people, including the [All Wales Risk Identification Checklist (RIC) and Quick Start Guidance for Domestic Abuse, Stalking and ‘Honour’-Based Violence](http://www.olderpeoplewales.com/en/adult_protection/ric_checklist.aspx).

Research in Practice for Adults (2015) [Research and Policy Update July 2015: Deprivation of Liberty Safeguards](https://www.ripfa.org.uk/publications-resources/safeguarding-and-mental-capacity/186-rpu-july-2015-dols-1). This edition of a monthly bulletin from RiPfA summarises and links to policy, legislation and research related to implementing   
the Deprivation of Liberty Safeguards.

Research in Practice for Adults (2015) [Research and Policy Update April 2015: Safeguarding and Domestic Abuse](https://www.ripfa.org.uk/publications-resources/safeguarding-and-mental-capacity/168-rpu-april2015safeguarding-domestic-abuse). This edition of a monthly bulletin from RiPfA summarises recent policy, legislation and research related to safeguarding adults who have care and support needs from domestic abuse.

Safeguarding Advisory Panel (2013) [Safeguarding and Protection arrangements within the Social Services and Well-being (Wales) Bill 2013](http://gov.wales/docs/dhss/publications/140207reporten.pdf).The Safeguarding Advisory Panel was appointed to provide expert advice to the Welsh Government   
on strengthening safeguarding arrangements for adults and children in Wales. The panel produced this report to develop recommendations in response to Part 7 of   
the then-Bill.

The Scottish Government *Adult Support and Protection* – available at <http://www.gov.scot/Topics/Health/Support-Social-Care/Adult-Support-Protection> (accessed 28 September 2015). This webpage provides information and links to resources about safeguarding adults in Scotland.

The Scottish Government *Child Protection* – available at <http://www.gov.scot/Topics/People/Young-People/protecting/child-protection> (accessed 28 September 2015). This webpage provides information and links to resources about child protection in Scotland.

Social Care Institute for Excellence *Safeguarding Adults Boards checklists and resources*– available at <http://www.scie.org.uk/care-act-2014/safeguarding-adults/safeguarding-adults-boards-checklist-and-resources/> (accessed 28 September 2015). This webpage from SCIE provides resources that aim to increase the effectiveness of Safeguarding Adults Boards in England. It includes, among other things, links to specific tasks of SABs, terms of reference and constitutions, funding and staff, structures, commissioning, strategic plans, annual reports, engagement and communication and quality assurance.

Social Care Institute for Excellence *Adult Safeguarding*– available at <http://www.scie.org.uk/adults/safeguarding/> (accessed 28 September 2015). This webpage from SCIE provides links to a comprehensive suite of information on   
adult safeguarding in England. It includes messages for housing staff, information   
on prevention, resources on mediation and family group conferencing, resources on self-neglect, reports on financial abuse, and e-learning.

Social Services Improvement Agency *Adult Safeguarding Project Resources*– available at <http://www.ssiacymru.org.uk/home.php?page_id=7381> (accessed   
28 September 2015). This page outlines information about various projects relating   
to safeguarding adults that are underway. It includes links to webinars, videos, reports and resources.

Social Services Improvement Agency *Children’s Safeguarding Project Resources*– available at <http://www.ssiacymru.org.uk/home.php?page_id=7007> (accessed 28 September 2015). This page provides links to information about Demonstrating Improvement – Children’s Safeguarding Programme, which gave LSCBs the opportunity to pilot projects related to the development of practice, partnership and improvement in safeguarding.

Social Services Improvement Agency *Protection of Vulnerable Adults*– available at <http://www.ssiacymru.org.uk/home.php?page_id=2592> (accessed 28 September 2015). This page is maintained by four forums across Wales who protect adults in need of safeguarding. It provides links to policy, All Wales information, reports, resources and learning.

UK Government (2016) [Modern Slavery Act 2015 review: one year on](file:///C:\government\uploads\system\uploads\attachment_data\file\542047\2016_07_31_Haughey_Review_of_Modern_Slavery_Act_-_final_1.0.pdf). The review looks at how well the criminal justice provisions in the [Modern Slavery Act 2015](https://www.gov.uk/government/collections/modern-slavery-bill) have been implemented and identifies gaps in the legislation, recommending ways to address issues identified.

UK Government (2016) [Revised Prevent Duty Guidance: for England and Wales.](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/445977/3799_Revised_Prevent_Duty_Guidance__England_Wales_V2-Interactive.pdf)

Guidance for specified authorities in England and Wales on the duty in the Counter-Terrorism and Security Act 2015 to have due regard to the need to prevent people from being drawn into terrorism.

Wales Audit Office (2015) [Review of Corporate Safeguarding Arrangements in Welsh Councils](http://www.assembly.wales/laid%20documents/agr-ld10316/agr-ld10316-e.pdf). In this report the Wales Audit Office examine the extent to which councils have put in place, and are operating, effective management and assurance processes and controls for safeguarding children. The review focuses on education services and cultural and leisure services. Findings and recommendations are outlined.

Wales Council for Voluntary Action Third Sector Safeguarding <http://www.wcva-safeguarding.org.uk/> (accessed 20 February 2017). This is a resource for the third sector organisations in Wales working with children, young people and adults at risk.

Welsh Government *Safeguarding* – available at <http://gov.wales/topics/health/socialcare/safeguarding/> (accessed 28 September 2015). This webpage provides an introduction to safeguarding in Wales and links to further resources relevant to both children’s and adults safeguarding, including the National Action Plan to tackle Child Sexual Exploitation (Wales).

Welsh Government *Anti-slavery* – available at <http://gov.wales/topics/people-and-communities/communities/safety/anti-slavery/?lang=en> (accessed 20 February 2017). Awareness raising materials about modern slavery.

Welsh Government *Live Fear Free* <http://livefearfree.gov.wales/?lang=en> (accessed 20 February 2017). Advice, guidance and resources on violence against women, domestic abuse or sexual violence.

Welsh Government (2010) [Information and Guidance on Domestic Abuse: Safeguarding Children and Young People in Wales](http://learning.gov.wales/docs/learningwales/publications/130509-domestic-abuce-safguarding-en.pdf). This document aims to provide information to those working with children in education and youth settings in Wales to help protect them from the issues relating to domestic abuse and try to reduce future incidents via preventative work.

Welsh Government (2010) [Safeguarding Children and Young People from Sexual Exploitation: Supplementary guidance to Safeguarding Children: Working Together Under The Children Act 2004](http://gov.wales/docs/dhss/publications/policy/110107guidanceen.pdf). This guidance is designed to assist practitioners in preventing child sexual exploitation (CSE), protecting children and young people who are at risk of abuse or are abused through sexual exploitation, and disrupting and prosecuting those who perpetrate this form of abuse.

Welsh Government (2013) [Protecting Children in Wales: Guidance for Arrangements for Multi-Agency Child Practice Reviews](http://www.sewsc.org.uk/fileadmin/sewsc/documents/Published_SCR_CPR/Child_Practice_Review_Guidance_-_Welsh_Government.pdf). The Child Practice Review (CPR) framework was developed to aid learning from child protection cases. This guidance sets out arrangements for CPRs, and replaced Chapter 10: Serious Case Reviews   
in Safeguarding Children: Working Together under the Children Act 2004.

Welsh Government (2013) [Integrated Assessment, Planning and Review Arrangements for Older People](http://gov.wales/docs/dhss/publications/131217reporten.pdf). This guidance sets out the responsibilities of health and social care professionals in supporting people who are aged 65 years and over to improve their health care and well-being. It replaces the Unified Assessment Process (UAP) in its application to people aged 65 years and over.

Welsh Government (2012) Strategic framework for Welsh language services in Health, Social Services and Social Care: ‘More that just words…’ – available at <http://gov.wales/docs/dhss/publications/121121narrativeen.pdf> (accessed 15 October 2015).

Welsh Government (undated) More than just words… the Active Offer: what is this? – available at <http://gov.wales/topics/health/publications/health/guidance/words/?lang=en> (accessed 15 October 2015).

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