WOKINGHAM BOROUGH SAFER COMMUNITIES PARTNERHIP

ADULT SAFEGUARDING PATHWAY DECISION MAKING TOOL

This document has been developed to support a shared understanding of what constitutes an adult safeguarding concern. It supports decision making around when an issue is suitable for a standard agency response (green), when a consultation with the safeguarding service should be undertaken (amber) for further advice and when there is a clear safeguarding concern (red). It should be noted that this guide uses examples of behaviours or issues that may be encountered, but it is not exhaustive and as such, professional judgement must be used alongside it. If in any doubt, consultation should be made with the Local Authority safeguarding service.

Definitions:

Agency response

- Notification to Local Authority quality team, using agreedmechanism.
- CQC notification where required.
- Internal fact-finding and lessons learned.
- Internal processes such as performance or capability.
- Duty of Candour.

Requires Consultation

Contact should be made with the Local Authority safeguarding service to discuss the specifics of the issue identified as this will enable an appropriate pathway to be considered. The outcome of this consultation will be that either advice is provided, actions agreed, and this is recorded as a case not, or a request will be made for it to be formally raised as a safeguarding concern.

Always reportable

Issues of this nature should automatically be raised as a formal safeguarding concern.

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Physical Abuse

Agency response	Requires consultation	Always reportable
• Incident causing no/little harm, e.g., friction mark on skin due to ill-fitting hoist sling, minor/small accidental skin tear. • Light marking or bruising found on one occasion with no other concern, where probable cause is known. • Minor events that still meet criteria for 'incident reporting'. • Isolated incident* involving service user on service user where no harm or residual distress is caused.	• Recurrent incidents causing some harm. • Unexplained marking, lesions, cuts, or finger marks on one occasion, or lesser marks on more than one occasion. • Accumulation of minor incidents. • Incident with potential serious consequences. • Recurrent incidents involving service user on service user, or one incident where harm or residual distress is caused.	• Unexplained fractures or other serious injuries. • Inappropriate restraint. • Withholding of food, drinks, or aids to independence. • Alleged assault. • Deliberate maladministration of medications. • Covert administration without proper medical authorisation. • Service user on service user incident(s) where the perpetrator has capacity or where there is intent or where there is targeting or where injury occurs.
Supporting Guidance Note – *any* incident which *may* constitute sexual abuse should be reported, regardless of whether it is an isolated incident.		

Neglect & Acts of Omission

Agency response	Requires consultation	Always reportable
• Isolated incident of missed or late service delivery where no harm or distress is caused, and no other customers are affected same day. • Failure to deliver care/support (such as not assisted with meal/drink) on one occasion and no harm occurs. • Care not delivered in the way customer would like but no harm occurs (possible complaint). • One incident of inadequate care that causes discomfort or inconvenience (e.g., left wet	• Recurrent incidents of missed or late service delivery where risk of harm escalates. • One incident of missed or late service delivery where harm occurs. • Missed or late service delivery where more than one customer is affected. • Hospital discharge without adequate planning and harm occurs. • Isolated medication error, which did not cause harm, but carried risk of harm. • Repeated failure to follow care plan or agreed actions.	• One off omission or act that causes or carries risk of significant harm. • Repeated or ongoing lack of care, or failure to adhere to the care plan, to the extent that health and wellbeing deteriorate significantly e.g., pressure wounds, dehydration, malnutrition, loss of independence or confidence. • Failure to arrange access to important or lifesaving services or medical care. • Undue delay in arranging access to important or lifesaving services or medical care, which impacts on outcomes.

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Agency response	Requires consultation	Always reportable
on an occasion) but no significant harm occurs. • Isolated incident of not having access to aids for independence that have been provided. • Isolated medication error which did not cause or carry risk of harm. • Provider not following care plan or agreed actions, but no significant harm occurs.		• Failure to intervene in dangerous situations where the adult lacks capacity or *may* lack capacity to assess risk or make relevant decisions. • Isolated medication error that caused harm, a pattern of medication errors, or a medication error that affected more than one customer.

Supporting Guidance

Pan Berkshire Pressure Ulcer Pathway - https://www.berkshiresafeguardingadults.co.uk/wokingham/procedures/?procId=1454 For easy reference:

The person is to be referred to safeguarding if:

- Significant pressure damage i.e. category 3 or 4, unstageable ulceration, deep tissue injury or multiple category 2, and
    - There are reasonable grounds to suspect it was preventable, or
    - Inadequate measures were taken to prevent development of pressure ulcer, or
    - Inadequate evidence to demonstrate the above, or
    - There are concerns about self-neglect
- Grade 3 and 4 *always* refer as Safeguarding with as much information as possible about how pressure ulcer pathway wasfollowed.
- Grade 1 and 2 refer where there is any concern that there *may have* been a lapse in care, an omission or the pressure ulcer pathway may not have been followed.
- Multiple (more than 1) of any grade – always refer.

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Financial & Material

Agency response	Requires consultation	Always reportable
• Non-payment of care fees where customer has capacity, is not relying on another person to do this, and there are no concerns of coercion or undue influence.	• Staff personally benefit from customers funds, e.g., accrue 'reward' points on their own loyalty cards when spending with/for customer. • Money not recorded safely or appropriately. • Adult not routinely involved in decisions about how their money is spent or kept safe and capacity in this respect is not clear. • Adult's monies kept in a joint bank account with unclear arrangements around proceeds and/or access. • Incidences of scamming of a person with care and support needs where they lack capacity or *may* lack capacity. • Non-payment of care fees where another party is managing finances, (even under a legal framework) or there is concern of coercion or undue influence.	• Misuse/misappropriation of property, possessions, or benefits by a person in a position of trust or control • Misuse of legal Power such as LPA, Deputyship etc. • Personal finances removed from adult's control with no appropriate legal framework in place or concerns of coercion/undue influence. • Exploitation relating to benefits, income, property, or wills. • Adult denied access to his/her own funds or possessions. • Theft or fraud. • Mate crime. • Cuckooing.

Supporting Guidance

Mate Crime – 'When a person is harmed or taken advantage of by someone, they thought was their friend".
Cuckooing – targeting of the home of a vulnerable adult for purposes of exploitation, drug dealing and other criminal activities

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Self-Neglect

Agency response	Requires consultation	Always reportable
• Self-care causing some concern – no signs of harm or distress.	• Refusing medical treatment where capacity to make that decision is unclear and implications serious. • Moderate level of clutter or hoarding (clutter index 4-5). • Insanitary conditions in property impacting on wellbeing. • Continued non-engagement with professionals with concerns for wellbeing. • Potential fire risks/gas leaks. • Multiple reports of concern from others. • Chaotic behaviours which risk serious harm or death, and where adult lacks capacity or may lack capacity.	• Self-neglect is life threatening. • Lack of self-care results in significant deterioration in health or wellbeing. • Environment injurious to health. • Imminent fire risk or gas leak. • Others affected by self-neglect. • Multiple reports of significant concern from other agencies • Access to/in property severely compromised • Clutter Index rating 6-9.
Supporting Guidance *only exceptional cases will trigger a safeguarding response. All proportionate interventions must be used first to manage risk, e.g., assessment, case management, CPA, MDT, MARM Clutter Index tool - **https://hoardingdisordersuk.org/research-and-resources/clutter-image-ratings/**		

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Psychological

Agency response	Requires consultation	Always reportable
• Isolated incident where adult is spoken to in a rude or other inappropriate way – respect and dignity undermined but no or little residual distress caused.	• Adult receiving occasional taunts or verbal outbursts from others, with negative impact on them. • Withholding of information to disempower them. • Treatment that undermines adult at risks dignity and esteem with negative impact on them. • Denying or failing to recognise adult's choice or opinion. • Adult receiving frequent verbal outbursts or harassment from others.	• Humiliation. • Taunting, mimicking, inappropriate treatment by a person in a position of trust or control. • Emotional blackmail e.g., threats of abandonment or harm • Frequent and frightening verbal outbursts. • Hate crime. • Denial of basic human right/civil liberties, e.g., over-riding advance decisions, blanket decisions around DNA-CPR. • Prolonged or repeated intimidation. • Vicious or personalised verbal attack. • Adult is being targeted.

Supporting Guidance

Hate crime – ''Any criminal offence which is perceived by the victim or any other person, to be motivated by hostility or prejudice based on a person's race or perceived race; religion or perceived religion; sexual orientation or perceived sexual orientation; disability or perceived disability and any crime motivated by hostility or prejudice against a person who is transgender or perceived to be transgender'.

Organisational

Agency response	Requires consultation	Always reportable
• Lack of stimulation or opportunities for social and leisure activities, but no harm caused. • Customers not given sufficient voice of involved in the running of the service, but no harm caused. • Denial of individuality and opportunities for customers to make informed choices and take positive risks. • Care planning documentation not person-centred, but with no harm caused.	• Rigid or inflexible routines. • Decisions made for the convenience of the organisation, to the detriment of the customer. • Customer's dignity is undermined.	• Bad practice not being reported and/or addressed.

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Agency response	Requires consultation	Always reportable
		• Recurrent ill-treatment or wilful neglect.

Supporting Guidance

Definition of organisational abuse (taken from Care & Support Statutory Guidance updated 24 June 2020) – "Including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation".

Discriminatory

Agency response	Requires consultation	Always reportable
• Isolated incident of teasing motivated by prejudicial attitudes towards an adult's individual differences with no harm or residual distress caused. • Isolated incident of taunting which is linked to the person's protected characteristics, causes no harm or residual distress, and is dealt with through other frameworks. • Isolated incident of care planning that fails to address an adult's specific diversity associated needs for a short period of time, with no significant or lasting harm caused.	• Inequitable access to service provision as a result of a diversity issue.	• Humiliation or threats on a recurring basis. • Recurring taunts that are linked to protected characteristics. • Hate crime resulting in injury or a fear for safety/life.

Supporting Guidance

Note – any concern involving behaviours by a person who is in a position of power (paid employment or voluntary work) must as a minimum have a consultation with the Local Authority.

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Sexual

Agency response	Requires consultation	Always reportable
• Isolated or low frequency incidents of unwanted peer flirtation, which causes no harm or residual distress and that is effectively addressed.	• Verbal sexualised insults or 'banter' that causes harm or distress. • Incidents of unwanted sexualised attention (verbal or physical) directed at a vulnerable adult, whether or not mental capacity exists.	• Recurring sexualised touching or attention without consent.

Supporting Guidance

Any concern of sexual behaviour that involves someone in a position of Power **must** be referred under Safeguarding.

Domestic Abuse

Agency response	Requires consultation	Always reportable
• Capacitated adult with no care and support needs or additional vulnerabilities identified or suspected. • Isolated incident of an abusive nature, which does not cause or carry risk of significant harm.	• Adult has care and support needs and the outcome of the DASH indicates moderate risk.	• Adult has care and support needs and the outcome of the DASH indicates high risk. • Adult at risk *may* lack or *does* lack capacity around relevant decisions. • Assault causing serious harm. • Indicators of stalking or harassment. • Sexual assault. • Victim is afraid.

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Agency response	Requires consultation	Always reportable
• Occasional taunts or verbal outbursts where the victim has no current fears and there are adequate protective factors.		• Coercion and control impacting victim's ability to protect self. • Regular violent behaviour. • Threats to kill/choke/suffocate. • Sex without valid consent (rape). • Female Genital Mutilation. • Concerns of Forced Marriage. • Indicators of Honour Based Abuse.

Supporting Guidance

- Where Domestic Abuse is disclosed and children are part of the household, or present, a referral must be made to Children's Services.
- Disclosures of Domestic Abuse should trigger an offer of referral to Domestic Abuse services for early intervention.
- A DASH-RIC should be completed for each new incident of Domestic Abuse - https://safelives.org.uk/sites/default/files/resources/Dash%20risk%20checklist%20quick%20start%20guidance%20FINAL.pdf
- A DASH-RIC with an outcome of high risk **must** be referred to MARAC (Multi-agency Risk Assessment Conference). Standard or medium risk cases may be referred using professional judgement. Where there are repeat incidents that do not meet the threshold for MARAC, consideration should be given to a MATAC referral.

Modern Slavery & Human Trafficking

Agency response	Requires consultation	Always reportable
	• Adult with care and support needs or additional vulnerabilities who appears to be under the control of another or fearful. • Adult at risk is spending long periods of work. • Adult at risk is unable to seek medical treatment. • Adult at risk appears to have poor living conditions and low wages.	• Adult is being regularly moved to avoid detection.

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Agency response	Requires consultation	Always reportable
		• Not in possession own ID or passport.

Supporting Guidance

Modern Slavery is the severe exploitation of other people for personal or commercial gain.

END

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