

# **NO SECRETS IN BRISTOL**

**Safeguarding  
Vulnerable Adults from Abuse**

**Guide for  
ALERter'S AND REPORTER'S  
2010**

The responsibility for implementing these procedures rests with all who are in contact with vulnerable people.

All people are entitled to a life without exploitation or abuse

**No Secrets in Bristol**  
Alerter's and Reporter's Guide to  
Protecting and Safeguarding Adults 2010

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## **Part one - Definitions**

### **Who is a vulnerable adult under the No Secrets Policy?**

No Secrets defines a vulnerable adult as someone who is over 18, who has or may need support with everyday living.

This includes disabled people and older people who have physical or sensory impairments, learning difficulties, experience mental illness or emotional distress,

#### **AND**

are unable to care for themselves or protect themselves from significant harm or exploitation.

### **What is significant harm?**

‘Significant Harm’ should be taken to include not only ill treatment (including sexual abuse and forms of ill treatment which are not physical), but also the impairment of, or an avoidable deterioration in, physical or mental health; and the impairment of physical, intellectual, emotional, social or behavioral development “

*Who decides? Law Commission 1995*

### **What is meant by abuse?**

- abuse is the violation of an individual's human and civil rights
- by any other person or persons
- it may be something that is done to the person
- or something not done when it should have been.
- It can be unintentional,
- but if a vulnerable adult is harmed this must be reported.

## **Types of abuse**

There are seven categories of abuse defined in No Secrets. They are:

- Physical Abuse
- Neglect
- Sexual abuse
- Financial or material abuse
- Emotional / Psychological abuse
- Discriminatory abuse
- Institutional abuse

A definition of each, and how to recognise abuse, and what signs to look for in each category is outlined below.

### **Physical abuse**

Includes

- Hitting, slapping, kicking, pushing or burning
- Use of physical restraint without appropriate assessment and monitoring
- Overuse or inappropriate use of medication
- Inappropriate moving and handling

### **Neglect**

Includes

- Failure to maintain dignity
- Neglect of person hygiene
- Failure to provide appropriate food and drink
- Ignoring medical or physical needs
- Withdrawing the person from services or preventing the person from accessing appropriate services
- Failure to facilitate access to services

- Withholding of the necessities of life such as medication

## **Sexual abuse**

Includes

- Any sexual activity to which the person is unable to give informed consent
- Grooming of a vulnerable person
- Observing sexual acts or pornography which they do not want, or cannot comprehend
- Observing or photographing a vulnerable adult for the purposes of sexual gratification

## **Financial or Material Abuse**

Includes

- Theft, fraud or exploitation including the taking of valuables or property
- Pressure in connection with wills, property, inheritance or financial transactions
- Using grooming or duress to borrow sums of money or property

## **Emotional / Psychological Abuse**

Results from acts of omission or commission on the part of others and producing mental anguish in the victim. This can include:

- Denial of basic rights
- Deprivation of normal social contacts
- Bullying
- Threats of harm or abandonment
- Humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse,
- Isolation or withdrawing the person from services or supporting networks.

If any of the above are perpetrated by someone who is or has been an intimate partner or family member of the vulnerable person the abuse can also be seen as **Domestic Abuse**. Family members are defined as - mother, father, son, daughter, brother, sister and grandparents, whether directly related, in-laws or step-family.

Domestic abuse can happen to anyone, in any relationship; heterosexual, gay, lesbian, bisexual or transgendered, and can happen regardless of social group, class, age, race, disability or sexuality.

Domestic abuse can happen at any point of a relationship; in a new relationship or after many years, whilst the couple are still in a relationship, during separation, or even after separation. Separation is sometimes the most dangerous time in a relationship.

Domestic abuse should be viewed far wider than one partner against another and may include other family members.

A person **who is a vulnerable adult as defined in No Secrets in Bristol** and who is subject to Domestic abuse comes under the safeguarding adults process.

## **Discriminatory Abuse**

Includes

“Hate Crime”

A hate crime is any criminal offence that is motivated by hostility or prejudice based upon the victim's:

- disability
- race
- religion or belief
- sexual orientation

- transgender

“All hate crime is important. No hate crime is too minor to report to the police. Anyone can be the victim of a hate crime. We all have a racial identity, all have a sexual orientation, all have some sort of beliefs. Anyone of us could be targeted because of some aspect of our identity. Tackling hate crime supports each and every one of us.” *Home Office webpage 2009*

- hate crime targets people because of their identity. It is a form of discrimination that infringes human rights and keeps people from enjoying the full benefits of our society
- research has shown that hate crimes cause greater psychological harm than similar crimes without a motivation of prejudice
- hate crime creates fear in victims, groups and communities and encourages communities to turn on each other

## **Institutional Abuse**

Includes

- Repeated incidents of poor care
- Neglect or ill treatment of people using services from that agency
- Unsatisfactory professional practices or gross misconduct.

This can encompass all types of abuse – neglect, emotional abuse, sexual abuse, physical abuse, financial abuse and discrimination.

## **What Doesn't Come Under “ No Secrets in Bristol” Safeguarding Adults**

**Historical Abuse** – if a vulnerable person discloses abuse that happened when they were a child and from which they are now safe, i.e. they have no contact with the alleged perpetrator, this is not a concern

that needs to be reported under safeguarding adults. However several courses of action can still be considered.

- If the person has the capacity to decide they may wish to report their abuse to the police. This decision must not be rushed and the person should be well supported throughout the process
- The person may also wish to disclose details to the Children and Young Peoples service (CYPS) if children are thought to be at risk from the alleged perpetrator.
- If you have details of the alleged perpetrator and have a belief that other children are at risk then you have a duty to report this information to CYPS.
- If the person does not have the mental capacity to make those decisions for themselves, a report may be made on their behalf if it is decided it is in their best interests to do so.

**Self-Neglect** – No Secrets in Bristol applies to people who are being allegedly harmed by someone else. If a vulnerable person is neglecting their health, hygiene, nutrition etc and is believed to be at risk of serious harm as a result this does not come under the safeguarding adults process. However action should still be taken in situations where the person does not have the mental capacity to understand the risks they are taking or cannot care for themselves **OR** in situations where serious harm may result from self-neglect. Agencies concerned about such situations must work together to offer timely assistance. Members of the public should telephone Bristol Care Direct (see below) to report their concerns.

## Part Two - How to recognise abuse

Abuse can happen in any setting, and comes to light in different ways. Sometimes a person may tell you that they are being abused, but more often concerns are raised by something that you see or behaviour observed by you or others, or be discovered on admission to hospital.

There are some situations that will alert you to the possibility that a vulnerable person is being abused. They are not proof in themselves that abuse has taken place as each indicator may have a different explanation other than abuse, but you must report your concerns.

When you notice an injury you may have an opportunity to enquire of the vulnerable person in an open way about how it happened. It is very important not to suggest explanations, or put words into people's mouths, but a simple sympathetic "How did that happen?" may be helpful. Any injury that is not fully explained by the history given should alert you to the possibility of abuse. You should also be alert to frequent changes of address, changes of names or aliases and complex and inconsistent family histories that are not substantiated.

The following are examples of possible signs and symptoms of abuse, arranged according to type of abuse. It is important to remember that different types of abuse may, and very often are, happening at the same time.

### **What to look for – signs and symptoms**

#### **Indicators of possible physical abuse**

- Physical abuse may present as unexplained bruises or marks anywhere on the person, particularly clusters of bruises forming

regular patterns, in various stages of healing, reflecting the shape of an object or the imprint of a hand. Finger mark bruises are potential indicators of abuse.

- These may be indicators of unsafe moving and handling, which is physically abusive.
- You should also be concerned about unexplained burns.
- Unexplained fractures to any part of the body, or multiple fractures of same or varying age are cause for concern.
- Often if a person has been physically abused they will be reluctant to expose their body during personal care, and may flinch, or show fear at being touched.
- Where another person is responsible for giving medication signs of over use of medication is a potential sign of physical abuse.
- Be alert to frequent changes of G.P, carer or other professional staff.

### **Indicators of possible neglect**

Neglect usually shows in the physical condition of the person e.g. pressure sores. Their clothing may be in a poor condition, and they may have poor personal hygiene, with wet, soiled or inappropriate clothing, or soiled bedding.

- They may show a significant weight loss, either rapid or continuous
- Symptoms of dehydration because they are not given enough to drink.

- There may be a failure to give prescribed medication, diet or fluids,
- A failure to access appropriate medical care.
- Sensory deprivation such as no access to hearing aid, glasses or other aids to daily living which would include dentures, or
- not providing adequate heating and lighting, or
- failure to ensure privacy and dignity.
- They may be prevented from having social contact, as well as access to health and social care agencies.

### **Indicators of possible sexual abuse**

Disclosure or hints of sexual abuse is the most obvious cause for concern, and should never be dismissed without further consideration. Sexualised behaviour is also a possible indicator.

There may be physical evidence such as torn, stained or bloody underclothing, love bites, bruises or finger marks, or symptoms such as lacerations, bruises or bleeding in genital area. You may observe that a person has unusual difficulty in walking or sitting

Sexual abuse may result in sexually transmitted disease, urinary tract or vaginal infections, or the onset of faecal or urinary incontinence for no other reason.

Significant change in sexual behaviour, language or outlook and signs of depression or stress, and incidents of self harm are all associated with sexual abuse. Most obviously, pregnancy in a woman who is unable to give consent is the consequence of abuse.

### **Indicators of possible emotional or psychological abuse**

A person's attitude to their possible abuser may indicate a cause for concern. People who are subjected to psychological abuse can avoid eye

contact, flinching on approach, and may show over deference, resignation and passivity, or unexplained fear or defensiveness, and are often ambivalent about the person allegedly abusing them.

Psychological abuse has an effect on a person's self esteem, and they may use punitive or derogatory language to describe themselves, maybe emotionally withdrawn, have sleep disturbance and may deliberately self harm. All these behaviours are cause for concern and the reasons for them need to be established.

Abusive behaviours may be observed as bullying or repeatedly shouting, having a punitive approach to bodily functions or incontinence and "teasing", or threats and intimidation, particularly threats to abandon or "put away" the vulnerable person. Talking about the person as if they were a child or object. The abuser may attempt to control the vulnerable person and those who have contact with them as will locking a person in at home or in a car, and allowing few visitors, phone calls or outings.

### **Indicators of possible financial abuse**

You should be alerted by any unusual bank account activity where sums withdrawn cannot be accounted for recent change of deeds or title of property, or significant sums of money borrowed and not repaid, or only repaid in part.

A person living in poverty who cannot afford the basic necessities of life but has adequate income may be being deprived of money by others.

Sometimes vulnerable adults are manipulated or "groomed" for financial gain, e.g. disclosing sad family circumstances, borrowing small sums of money, breaching professional boundaries. Family members, friends or professionals may be the perpetrators of such abuse.

Lasting Power of Attorney ( LPA) over property and affairs must be obtained when a person has the capacity to understand the consequences of this action. If an LPA is obtained when a person is unable to consent, because they have lost the mental capacity to choose their Attorney, it is invalid and any action taken unlawful. If the person managing financial affairs is evasive, uncooperative or withholding money or care i.e. not acting in the persons “best interest” you should be alert to the possibility of financial abuse.

### **Indicators of possible discriminatory abuse**

Harassment, including unwelcome comments and gestures, jokes of a derogatory nature, offensive language, and the presence of offensive materials and graffiti relating to the vulnerable adults disability, age, sexual orientation, race. Bullying, including verbal abuse and comments about the person’s condition that are felt as insults are included as discriminatory abuse.

**Hate crime is defined as a crime that takes place due to the perpetrators discriminatory actions e.g. being assaulted because you are disabled.**

It also encompasses exclusion, shunning of particular people or other differential treatment, e.g. failure to provide for cultural needs.

### **Indicators of possible institutional abuse**

Sometimes your concerns will not be about an individual, but about how a group of people are treated. Poor practice by paid carers can be abusive, and if staff members misuse their position of power over a group of people they care for, this may be institutional abuse.

A poorly managed can reveal a number of indicators e.g. lack of staff

training which leads to neglect or accidents, insufficient staff to maintain peoples' safety and dignity.

All our services should be person-centred, promote choice and encourage independence. People using services must be enabled to speak for themselves, or have their views heard.

### **Situations of increased risk**

You will also be able to identify abusive situations more clearly if you are aware of factors that can, potentially, increase risk.

The profile and circumstances of the alleged abuser are more significant than the profile, or degree of dependence of the vulnerable adult. This is likely to be the same in domestic and other settings.

These factors can act as a flag for closer assessment:

- Addictions
- Dependency upon each other, e.g. for money, accommodation.
- Pre-existing abusive relationships
- Stress for carer

In these situations consider the possibility of abuse.

**Remember that people who sexually abuse children may also sexually abuse a vulnerable adult.**

## **Part Three - What you should do**

Hearing allegations of abuse and reporting your concerns is not always easy, you may feel you are betraying someone, perhaps a colleague, a neighbour or a relative. If you work for an organisation it is your duty to report your concerns, and it may be considered a disciplinary offence not to do so. Your organisation should have policies in place to protect and support you in taking action e.g. whistle-blowing policies.

### **Immediate protective action**

- Ensure that the person subject to alleged abuse is safe and supported before proceeding with any other action
- Ensure they receive any medical attention required.
- In certain circumstances it will be necessary to take immediate action to protect the vulnerable adult by calling the police and/or by suspending a member of staff.

### **When and how to contact the police**

Direct calls to the police should be reserved for incidents of incidents of assault and violence where an element of urgency applies. If you require immediate response and assistance from the police, that is if you cannot stop the incident that is currently happening, or you think that it will re-occur shortly, you should make an emergency 999 call.

If you believe a crime has been committed call the police on **101**. Make a note of the log or “STORM” number you are given and include it in any referral to Bristol Care Direct.

### **Suspending staff**

If you are suspending a member of staff remember that suspension does not confirm guilt, and it is not a disciplinary penalty in itself. Frontline

managers should be aware of their own organisation's disciplinary procedures, and in particular what arrangements are required if suspension is needed out of normal working hours.

### **Preserving evidence**

Be aware that in certain situations medical, or other evidence will be needed. You may need to lock rooms, or ensure that equipment and documents are secured appropriately so that evidence cannot be tampered with.

If there has been physical or sexual assault you should not clear up, move things, wash people, things, bedding or clothing before you report the incident or taken the advice of the police.

### **Remember to:**

- Stay calm
- try not to show if you are shocked,
- listen carefully and be sympathetic, you don't need to press the person for lots of detail, indeed taking a full written statement from the person at this point could be too stressful and jeopardise any future police investigation.
- tell the person they have done the right thing in telling you, and that the abuse is not their fault
- tell the person that you are treating what they said seriously and that you will be talking to your manager about it.
- tell them that you will do you best to support them.
- clarify with them the nature of the abuse and establish if it needs an urgent response. If so keep them as calm as possible until the police arrive.

- make sure that everything you do keeps the person safe for now. For example if you contact or question the alleged abuser you may be placing the vulnerable adult at risk.
- do keep to information sharing protocols, only share the persons' information with the people who need to know, observe the confidentiality of all concerned at all times.

It may be that the person you are seeking to protect asks you not to do anything at all, although they say they are being abused. Whilst respecting this it is important that you **MUST** share it with your manager, but assure them that you are listening to them and will let your manager know that they want nothing more to happen.

- Remember to fill in a Regulation 37 form for the Commission for Quality Care if your service is registered with them.

### **Reporting your concerns to Bristol Care Direct**

Any member of the public, and any organisation, can refer safeguarding concerns via Bristol Care Direct.

### **Care Direct Contact Details**

Telephone: 0117 9222700

Fax: 0117 9036688

Whatever the source of the information it must be treated seriously, checked, recorded and shared with your manager. All care agencies and professions share equally the responsibility for the identification of abuse, and for ensuring appropriate action is taken.

### **How to report your concerns**

When you come to report your allegation you will be expected to give relevant details of the person you seek to protect, and it will help greatly if

you give good organised information when you report the allegation or suspicion of abuse. Your organisation may have a specific form for reporting allegations and concerns. A referral form is attached for you to use, you do not need to fill in every box, but it is useful to know the vulnerable adults’:

- name and date of birth if known
- circumstances, where they live and with whom
- services they receive and from whom

also

- who is providing the information
- who was the person suspected or implicated in the abuse
- your concerns, and the reasons for those concerns

If you do not have all this information and the situation is urgent do not delay, report it first.

If you are quoting someone else then be sure that you tell us this, it is important that the initial referral is clear, so try to recall what was said using the person's own words. Do sign and date the record.

There should be no delay in reporting serious concerns. The information will be treated in the strictest confidence within the limits of the law, which requires that the police are informed where there is serious risk to life, or information about a serious crime is discovered.

### **What happens next?**

A Safeguarding Adults referral will be given high priority. It indicates that there is a risk to an individual’s physical, emotional, or mental well being and is considered a critical or substantial risk to independence under the Fair Access To Care Services (FACS) eligibility criteria.

Bristol Health & Social Care (H&SC) have the duty to co-ordinate the interagency response to safeguarding adults referrals, and will consult with the Care Quality Commission (CQC), the Police, and other relevant agencies where this is appropriate. If an investigation is indicated they will convene a strategy discussion to decide the best way to investigate the allegation(s).

A team manager or someone of equivalent seniority will be the co-ordinating manager responsible for ensuring that the allegation is dealt with properly.

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