

Decision Making Framework: making and assessing adult safeguarding abuse alerts

First issue: February 2019

Approved by MKSB Adult Programme Board: March 2019

Introduction

1. This document is designed to provide guidance to professionals when they encounter adults at risk who they believe may be suffering from, or be at risk of abuse. The overarching intention is to have an effective system in place to ensure that adults at risk get the right response from the right service at the time they need it.
2. Safeguarding is everybody's business, agencies need to work together to empower and support adults at risk to protect themselves, or to work together in the best interests of people who are unable to protect themselves from the abuse or risk thereof. Adults who are being, or who are at risk of abuse, are safeguarded best when safeguarding procedures are consistent.
3. This document seeks to clarify how alerts should be made, how the adult at risk should be involved, and the processes involved in the deciding of the outcome of the alert. It is important that there are clear consistent criteria for taking action and providing help across this process.
4. Professionals in any agency who work with adults who may be at risk share a commitment to safeguard them when necessary. Everyone who works with adults who may be at risk has a responsibility to make sure they are equipped with the appropriate level of knowledge and support to be able to judge when they need to seek further information, or need to seek advice from a manager, their designated lead or report to the appropriate lead agency.

Making an adult safeguarding referral

How to make a referral

The Care Act 2014 confirms adult safeguarding as a statutory function for the local authority. The Care Act Statutory Guidance sets out certain requirements a local authority must comply with and states clear aims a local authority should work to. Therefore, when there is any concern for the wellbeing of an adult due to abuse or the risk of, a safeguarding alert should be sent to Milton Keynes Council, by the following methods:

Professionals: through the website at: <https://www.milton-keynes.gov.uk/social-care-and-health/safeguarding-people-at-risk>

Public: by telephone to 01908 253772 08.30 – 17.00 Monday to Friday, or 01908 725005 at other times

If there are concerns that a criminal act has occurred, or there are immediate concerns for the life of a person the police should be contacted immediately.

Before making a safeguarding adult referral the referrer should consider the following principles.

Making Safeguarding Personal

Making safeguarding personal (MSP) is a person-led and outcome-focused approach, which is how we should be managing safeguarding. The MSP framework encourages engagement with the person in a conversation about how best to respond to their safeguarding situation in a way that enhances

involvement, choice and control as well as improving quality of life, wellbeing and safety. The key principle of the Making Safeguarding Personal approach is that the process is secondary to the outcome and the process should be flexible where this supports the choice, control and well-being of the customer. It is expected that the named adult at risk in the safeguarding alert will be aware of and consenting to the safeguarding alert being made. It is also expected that the adult has been given or offered appropriate support to be involved in this decision, such as advocacy or translation services, where appropriate. It is acknowledged that there may be circumstances where referral is made without this, such as:

- i) The adult lacks capacity to consent and referral is made based on a Best Interest decision
- ii) Informing the adult that a referral is to be made may increase risk of abuse to them
- iii) Where the nature of the concern places others, including children at risk of harm
- iv) Where the concern is of a criminal nature or so significant to effect vital or public interests
- v) There is other justification, such as the person is subject to coercion or undue influence, to share proportionate information

The following points should be used as a reference to check that the key principles of the MSP framework are being considered in the management of safeguarding during the screening process:

- safeguarding should be done with and not to a person
- should focus on achieving meaningful improvement to person's circumstances rather than just an impact during 'investigation' and 'conclusion'
- should involve the person in recognising and working towards their chosen outcome

Levels of Risk

The indicators of level of risk in the tables at the end of this document are intended to help practitioners to identify the level of risk that the presenting situation may entail. The indicators are divided into four levels of risk indicated by Green - very low risk, Yellow - low risk, Amber - medium risk, and Red - high risk.

The indicators listed under each level have relevant examples of each of the categories of abuse indicated within the Care Act 2014. Only by discussing with the adult(s) at risk in more detail to explore the context and the factors behind the need, will the practitioner be able to form a judgement as to the level of support needed. The indicators are intended to be a guide and not a pre-determined level of response or a comprehensive list of all possible issues.

Deciding the outcome of the alert

Safeguarding is the protecting of an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted.

Care Act principles

During the decision-making process a number of the Care Act 2014 principles will be considered:

Wellbeing Principle

The Care Act 2014 states:

'Wellbeing' is a broad concept. It is described as relating to the following areas in particular:

- *personal dignity (including treatment of the individual with respect)*
- *physical and mental health and emotional wellbeing*
- *protection from abuse and neglect*
- *control by the individual over their day-to-day life (including over care and support provided and the way they are provided)*
- *participation in work, education, training or recreation*
- *social and economic wellbeing*
- *domestic, family and personal domains*
- *suitability of the individual's living accommodation*
- *the individual's contribution to society*

This will be used to establish the extent of the impact on the adult at risk, and to help decide who may need to be involved in any solutions, plans or further activity.

Making Safeguarding Personal

The principal as discussed above will be applied to the decision-making process, of obtaining the adult's wishes and outcomes, and working with them to meet these.

Six Safeguarding Principles

The Care Act also identifies the following six key principles that should be considered throughout the safeguarding decision-making process:

Empowerment - *People being supported and encouraged to make their own decisions and informed consent*

Prevention - *It is better to take action before harm occurs*

Proportionality - *The least intrusive response appropriate to the risk presented*

Protection - *Support and representation for those in greatest need*

Partnership - *Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse*

Accountability - *Accountability and transparency in delivering safeguarding*

Three Step Test

The three step test (3ST) is an important tool of this decision-making framework. It outlines the adult safeguarding duties for the local authority and the criteria at each step to support professional judgement to decide on the required action upon receipt of a safeguarding concern. The Care Act states that the statutory safeguarding duty applies to an adult who:

- has needs for care and support (whether or not the local authority is meeting any of those needs) and;
- is experiencing, or at risk of, abuse or neglect, and;
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

Therefore the role of the decision-making process is to establish the available information to be able to determine the current level of risk and the level and timeliness of further safeguarding actions. If a safeguarding concern cannot be resolved through the screening activities, the local authority's duty under section 42 continues, and a safeguarding intervention should be undertaken.

Level of Risk Matrix

The level of risk matrix at the end of this document will be used alongside the other available information to inform the level, and the timeliness of response required.

The screening decision will depend on many factors, however as a guide, it can be expected that:

Level 1 - Very Low Risk, (green) – will not require a safeguarding response

Level 2 - Low Risk, (yellow) - is considered a safeguarding issue, but currently managed, or not requiring a safeguarding enquiry, response should occur within 5 working days.

Level 3 - Medium Risk, (amber) – is regarded as a safeguarding issue that requires action, possibly an enquiry, response in 2 working days.

Level 4 - High Risk, (red) – always a safeguarding issue, always an enquiry is required, response in 2 working days

Other considerations

Within the decision-making process a number of other issues and information may be considered as necessary, to ensure that the decision-making is as robust as possible. This includes, but is not limited to:

- relevant known history of the adult at risk
- relevant known history of the source of risk
- relevant known history of any health/social care provider involved in the issue
- consideration of any other adult(s) or child(ren) that may be at risk
- any current plans or actions that are intended to manage or mitigate the ongoing risk, and their effectiveness

Decision-making outcomes

The referrer, and the adult at risk would always be informed of the outcome of any screening, if required, others who may be informed include, CQC, commissioners, MK Safeguarding Board, amongst others.

The outcome from the decision-making process is most likely to be one of the following:

- referral to a relevant service
- assessment for a relevant service
- review of current service provision
- not a safeguarding issue, to be pursued through appropriate complaint process
- police action
- safeguarding issue, but no enquiry required
- safeguarding issue, section 42 enquiry required
- safeguarding enquiry, other safeguarding enquiry required

It is important to note that this guidance is **not** a substitute for professional judgement. Rather, the guidance should be used as a framework for decision-making and to support professional judgement. If, at the point of referral there is insufficient information to apply safeguarding thresholds then further enquiries should be made to gather this information.

This guidance should be used to:

- Help to determine a consistent approach to identifying what kind of incidents may require a safeguarding response in line with the safeguarding procedures.
- Aid decision-making about the kind of incidents that may be addressed through alternative processes (*eg* lower level concerns)

Level 1

No further safeguarding activity is required, however referral to other services for assessment or review, may be required, or information to be passed to commissioners, CQC, etc

Physical	Sexual	Organisational	Financial / Material
<ul style="list-style-type: none"> • Incidents which become physical but result in no injury between adults. • Manual handling or mobility plans not followed with no injury being incurred • One off incidents, little or no risk of re-occurrence with no injury • Accidental incidents, such as a fall 	<ul style="list-style-type: none"> • Use of verbal stereotypes or gendered beliefs 	<ul style="list-style-type: none"> • Unclean living environment • Lack of adequate maintenance of property such as worn carpets, where no risk to others, low risk to individual. • Incidents internally and externally that could provide health and safety risk to person <i>eg</i> unsecured gate. 	<ul style="list-style-type: none"> • Single incidence of person forgetting or losing money / possessions • Provider / carer fails to maintain accurate records and providing receipts when undertaking tasks for a client
<p>Neglect / Acts of omission</p>	<p>Domestic Abuse</p>	<p>Psychological</p>	<p>Self Neglect</p>
<ul style="list-style-type: none"> • Clothes ruined in organisational laundry process • Poor quality food • Neglect of care with no impact, <i>ie</i> lack of supervision for a short time. 	<ul style="list-style-type: none"> • Carer struggling to cope resulting in verbal arguments • Minor conflicts and difficulties between adults which may result in damage to property or removing themselves from property 	<ul style="list-style-type: none"> • Carer leaving person to attend to daily activities which causes distress • Not listening or taking action that is against the views\needs and wishes or the individual • Isolated use of negative nicknames, with no other evidenced safeguarding concerns 	<ul style="list-style-type: none"> • Reduced level of cleanliness within the living environment • Lack of personal hygiene including wearing dirty clothing • Low finances affecting ability to care for yourself properly
		<p>Discriminatory</p> <ul style="list-style-type: none"> • Respect of person is undermined by inappropriate comments and behaviour • Single incidents of bullying and not valuing individuals views and wishes • Isolated incidents involving taunts or verbal outbursts which do not cause distress. 	<p>Modern Slavery</p> <ul style="list-style-type: none"> • See level 4

Level 2

Low level of safeguarding risk, currently managed or mitigated appropriately, may require referral to other process, no further safeguarding activity required

Physical	Sexual	Organisational	Financial / Material
<ul style="list-style-type: none"> Unexplained small bruising Minor injuries that do not fit with explanation given Carer error on one occasion causing no harm or minor injury. <i>Eg</i> skin friction mark due to ill-fitting hoist sling Isolated incidents between adults not resulting in injury, <i>eg</i> pushing 	<ul style="list-style-type: none"> Unwanted verbal sexual advances 	<ul style="list-style-type: none"> Disorganised or poor care that results in things being missed or delays that could be recorded Poor personal hygiene of service users that are on-going Poor management decisions that affect ability to provide adequate care Recurrent minor complaints or safeguarding alerts for same provider or person Lack of stimulation or social activities within care setting or home Absence of policies or procedures or training/supervision in relation to key aspects of practice but which do not result in harm Poor diet, cheap food, or lack of fluids within organisational setting Poor care planning and / or 	<ul style="list-style-type: none"> Regular loss of control of finances Financial decisions made without consent Failure to meet agreed contribution to care by family/attorney but resident still has personal allowance and the placement is not at risk Inappropriate housing, failure to maintain rent or amenities
<p>Neglect / Acts of omission</p> <ul style="list-style-type: none"> Single missed home visits Single medication errors, with no impact on adult Reduced level of personal hygiene or nutritional care One off incidents of failure to follow care plans, with no adverse effects Lack of access to aid and appliances to support independence Isolated incident where an adult does not receive necessary help to get to the toilet to maintain 	<p>Domestic Abuse</p> <ul style="list-style-type: none"> Verbal arguments that become physical – no injury Verbal threats that aim to control behaviour On-going occurrences of level 1 incidents, or long history of domestic abuse Social pressure to control people to conform within a community / society Family member or other living in property, unwanted by the resident(s) 		<p>Self Neglect</p> <ul style="list-style-type: none"> Non-compliance with services affecting wellbeing On-going signs of inability to care shown by lack of or deterioration of personal hygiene Struggling to manage and maintain property which may lead to safety risk Refusing to take prescribed medication, follow medical advice Loss of weight due to inability to provide adequate nutritional provision or food preparation Socially isolated Withdrawn, isolated/unwilling to

<p>continence, or have appropriate assistance with changing incontinence pads</p> <ul style="list-style-type: none">• The adult is discharged from hospital without adequate discharge planning, procedures not followed, but no harm occurs		<p>documentation</p> <p>Psychological</p> <ul style="list-style-type: none">• Lack of control with others for short periods• Verbal threats or bullying to control behaviour• Withholding of information with intent to influence decision making adversely• Unexplained change in behaviour possible linked to actions of others <p>Discriminatory</p> <ul style="list-style-type: none">• Language or behaviour that are felt to be discriminating between one person or another• Reduced ability to access resources between one person or another	<p>engage</p> <ul style="list-style-type: none">• Repeats of level 1 <p>Modern Slavery</p> <ul style="list-style-type: none">• If occurring always a level 4
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Level 3

Unmanaged risk present, risk present to one or more adult, enquiry may be completed by other organisation, or adult social care

Physical	Sexual	Organisational	Financial / Material
<ul style="list-style-type: none"> • inexplicable fractures • Inexplicable marking, bruising or lesions, cuts or grip marks • Ongoing incidents between residents that are escalating or becoming more aggressive • Deliberately withholding of food, drinks or aids to independence • Physical assault resulting in injury, or ongoing assaults / bullying • Predictable and preventable incident between adult's where injuries have been sustained or emotional distress caused • Lack of management of these issues in care setting 	<ul style="list-style-type: none"> • Unequal sexual relationship • Unsuccessful sexual Intimidation to try and get other adults to do things they do not want to do – eg requesting to take naked photos • Unusual requests of a sexual nature such as exposing breasts. • One off touching inappropriately over clothes without consent 	<ul style="list-style-type: none"> • Inappropriate decisions affecting quality of life of service users • Restrictive practices within organisation, inappropriate restraint , inappropriate use of DoLs • Failure to react to ongoing incidents between residents and put adequate plans in place to prevent them • Lack of training, knowledge or skills of staff for service user group • Restriction or denial of service linked to service users presentation or beliefs • Faulty equipment provided by organisation • Any incidents where no harm occurs but staff do not take action to reduce significant risk when aware and able to do so 	<ul style="list-style-type: none"> • Individuals, carers , or family are benefiting from exploitation • Risk to wider group of adults through bad decision making about finances – risk of homelessness • Misuse/misappropriation of property, possessions or benefits by a person in a position of trust or control. • Theft or fraud, causing loss but not impacting on lifestyle
<p>Neglect / Acts of omission</p> <ul style="list-style-type: none"> • Recurrent missed domiciliary care visits • Recurrent medication errors, or single error that could be 	<p>Domestic Abuse</p> <ul style="list-style-type: none"> • Intimidation such that ability to leave is compromised • Total loss of control in relationship • Disclosure of plans around forced marriage • Physical assault which results in minor injury • Damaging property and threats to kill 		<p>Self Neglect</p> <ul style="list-style-type: none"> • Decisions made affecting quality of life, risk to personal health including refusal to eat. • Displaying anti-social behaviours / breach of peace in community eg posting faeces through door of neighbour /banging on neighbour's door • Poor living conditions – risk of fire or to health • Appears aggressive in appearance / behaviour

<p>life limiting</p> <ul style="list-style-type: none"> • Lack of provision of care or failure to follow care plans resulting in harm or risk to health • Pressure area care causing unavoidable grade 1 or 2 ulcers • Repeatedly not following or updating care plans, causing harm or distress • Any evidence of Wilful Neglect • The adult is discharged from hospital without adequate discharge planning, procedures not followed, • Fall occurs resulting in injury and there is evidence that existing falls care plan or risk assessments are not being followed appropriately 	<ul style="list-style-type: none"> • Controlling access to support services or finances • Emerging behaviours which could suggest sexual, criminal exploitation or cuckooing • Presence of ‘trilogy of risk’ factors mental health needs, domestic abuse and substance misuse. If children are involved a referral must be made to Children’s Services 	<ul style="list-style-type: none"> • A number of falls have occurred, resulting in minor injury, and there is no evidence of any steps taken by the service provider to reduce the risk, such as undertaking or updating risk assessments/care plans • Punitive responses to challenging behaviours • Denial of individuality and opportunities to make informed choice <i>eg</i> denial of rights; impairment of or deterioration in health or wellbeing • Failure to whistle blow on serious issues when it has not been possible to resolve issues internally Failure to refer disclosure of abuse <p>Psychological</p> <ul style="list-style-type: none"> • Threats of harm, abandonment, humiliation, harassment, control, intimidation having serious effect on person’s daily life • Person feels ‘bullied’ by situation they are in 	<ul style="list-style-type: none"> • High risk substance using behaviours <i>eg</i> mixing substances, using high amounts of substances, injecting, sharing using equipment <p>Modern Slavery</p> <ul style="list-style-type: none"> • If occurring, always a level 4
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

- Self harming behaviour or threats of suicide
- Signs of severe depression and social isolation
- Lack sense of safety and putting themselves at serious risk of harm
- Practice is non-compliant with the Mental Capacity Act resulting in emotional distress

Discriminatory

- Harassment, slurs or similar treatment due to age, gender, race, gender identity, disability, sexual orientation or religion having an effect on all daily activities
- Denial of civil liberties, such as voting
- Adult at risk is repetitively not supported to attend place of worship or receive pastoral visits which causes distress

Level 4

Urgent action required to manage risk, safeguarding enquiry within Adult Social Care

Physical	Sexual	Organisational	Financial / Material
<ul style="list-style-type: none"> Life changing injuries due to abuse Covert administration of medication without medical authorisation where there has been detrimental impact Repeated minor injuries affecting health or risk to life Allegation of physical abuse causing injury by care professional 	<ul style="list-style-type: none"> Rape / serious sexual assault Subjected to pornography / sexual acts without consent Source of risk is in position of power / professional Female Genital Mutilation Coercion into sexual acts or exploitation for the benefit of others Sexual assault Recurrent sexualised touching without consent Exploitation of an adult into unwanted sexual activity Non-consensual sexual activity between adults in care home 	<ul style="list-style-type: none"> Inappropriate use of DoLs Culture exists in provider that is detrimental to service users Care to all or some of the service users places them at risk to health Decisions made affecting level or effectiveness of care provision Failure to improve on actions from level 1, 2 and 3 Non-compliance with safeguarding process or procedures Ongoing concerns across agencies such as CQC, CCG or contract team MKC 	<ul style="list-style-type: none"> Theft, fraud, exploitation, where adult is unable to take action and impact to lifestyle Inappropriate use of LPA or appointeeship not acting in the best interests of the person Misuse or misappropriation of property, possessions or other assets Inappropriate financial transactions against person wishes or without their knowledge or consent Risk to placement / service provision by actions of others.
<p>Neglect / Acts of omission</p> <ul style="list-style-type: none"> Lack of care such that there is risk of life changing illness / injury or death Withholding or preventing access to professionals that may cause risk of death of life changing illness / injury Pressure care causing unavoidable grade 3 or 4 ulcers No care plans, plans not being followed, or harm 	<p>Domestic Abuse</p> <ul style="list-style-type: none"> Forced marriage against 	<p>Psychological</p> <ul style="list-style-type: none"> Threats of harm, abandonment, humiliation, harassment, control, intimidation resulting in total loss of control, and risk to life or life changing injury 	<p>Self Neglect</p> <ul style="list-style-type: none"> Adult making unwise decisions that may result in life changing illness / injury or death Behaviour that could result in a serious risk to others in regard to public health or fire risk <p>Modern Slavery</p> <ul style="list-style-type: none"> Use of fear, coercion, financial control, or force to hold people in

caused by inappropriate care plan

- Restricting access to adequate food, water and resources to maintain health and well-being
- Unsafe or unhealthy environmental conditions

free will, either planned or occurred / honour based violence concerns

- Serious and persistent physical / sexual or emotional abuse by partner resulting in negative impact on mental health or serious physical injury.
- Controlling behaviour that negatively impacts on life choices or decision making

- Withholding resources or medication which adversely effects mental health.
- Risk of Radicalisation resulting in PREVENT or Channel referral

Discriminatory

- Harassment, slurs or similar treatment due to age, gender, race, gender identity, disability, sexual orientation or religion having a severe affecting on all daily activities risk of self injurious behaviours including suicide
- Hate Crime

employment, trafficking of people for work such as sex trade, nail bars, car washes or agriculture.

- Injuries apparently as a result of assault or controlling measures which may be untreated
- May look malnourished or unkempt, anxious/ agitated or appear withdrawn and neglected.
- Adult rarely be allowed to travel on their own may travel in groups, seem under the control, influence of others, rarely interact or appear unfamiliar with their neighbourhood or where they work
- Relationships which don't seem right – for example a young teenager appearing to be the partner of a much older adult where there appears to be a power imbalance
- Living in dirty, cramped or overcrowded accommodation, and/ or living and working at the same address
- Have no identification documents or travel documents, have few personal possessions and wearing the same clothes day in day out.
- Appearing frightened or hesitant to talk to professionals and fearful of law enforcers

-
- | | | |
|--|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | | <ul style="list-style-type: none">• Little access to money or where their money is kept.• Appears to be working long hours for little or no pay, or unsure about what their pay arrangements are |
|--|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|