

# **Good Practice Guidance in Joint Working between Inverclyde Adult Protection Committee and Social Housing Providers in Inverclyde**

## **ADULT PROTECTION & ADULT IN NEED**

### **1. PURPOSE OF THIS GUIDANCE**

- 1.1 To establish a unified approach to dealing with adult protection concerns and adults in need across all socially rented housing in Inverclyde.
- 1.2 This guidance sits alongside Best Practice Guidance on Child Protection and Children in Need. Both documents can be accessed via Inverclyde Child Protection Committee Web Site ([www.inverclydechildprotection.org](http://www.inverclydechildprotection.org)), Inverclyde CHCP website (see section 7) and through the web sites of Cloch Housing Association, Larkfield Housing Association, Oak Tree Housing Association and River Clyde Homes.

### **2. INTRODUCTION**

- 2.1 Registered Social Landlords (RSL's) are committed to the support and protection of Adults at Risk of Harm and regard protecting such adults and promoting their wellbeing as of paramount concern.
- 2.2 RSL's consider it the duty of all those employed or involved with the provision of affordable housing to act to promote the wellbeing of Adults at Risk of Harm and prevent the neglect or abuse of such adults with whom they come into contact, including reporting any abuse or neglect discovered or suspected. RSL's will do this by working with others to:-
  - Put the Adult at Risk at the centre and develop a shared understanding within and across agencies
  - Use common tools, language and processes, considering the adult as a whole, and promoting closer working where necessary with other practitioners.

### **3. DEFINITIONS**

#### **3.1 Who is an Adult at Risk of Harm?**

- The legal definition of an Adult at Risk of Harm is a person (aged 16 or over) who meets the following three criteria:-
- Are unable to safeguard their well-being, property, rights or other interests;

- Are at 'risk of harm' (either from another person's behaviour or from their own behaviour), and
- Because they are affected by disability, mental disorder, illness, physical or mental infirmity, are more vulnerable to being harmed than adults who are not so affected.

3.1.2 The presence of a particular condition or disability does not automatically mean that a person is an adult at risk of harm. A person can have a disability or condition but be perfectly able but unwilling to look after their own health, safety and well-being. Their circumstances as a whole should be considered, and **all** three elements above must be met to be an Adult at Risk of Harm as defined by legislation.

3.1.3 For the purpose of this guidance Adults at Risk are generally defined as those over the age of 16. In some circumstances a person aged 16 or 17 will also be legally considered a child (for example a young person who is subject to a Compulsory Supervision Order or a young person affected by disability). If in doubt this can be confirmed by contacting social work services – duty team for children and families (for contact details see section 7).

3.1.4 It may not always be possible to determine if an individual fits the specific definition and criteria. For avoidance of doubt, where any person is suspected to be an Adult at Risk of Harm they should be treated as such, until their status is deemed otherwise by Social Work professionals.

### 3.2 **What is meant by Risk of Harm?**

An Adult is at 'Risk of Harm' if:-

- Another person's conduct is causing (or likely to cause) the adult to be harmed;
- The adult is engaging (or likely to engage) in conduct, which causes (or is likely to cause) self harm.  
'Conduct' includes self neglect or the neglect or other failures to act by another person with carer responsibilities.

### 3.3 **What is Harm?**

'Harm' includes all harmful conduct and, in particular includes:-

- *Physical Harm*. This means hurting a person's body or stopping a person moving about. Can include:
  - Hitting a person
  - Shaking a person
  - Locking a person up
- *Psychological Harm*. This means hurting someone mentally. Can include:
  - Upsetting a person's feelings
  - Making a person feel scared
  - Leaving a person alone for too long.

- *Financial Harm.* This means stopping a person from having their money or belongings. Can include:
  - Stealing money from a person
  - Stopping someone using their own money
  - Stopping someone using the things they own
- *Sexual Harm.* This means getting a person to do sexual things they don't want to do or don't understand. Can include:
  - Making a person have sex
  - Taking photos at private times
  - Making a person look at sex DVD's or photos
  - Getting a person to do sexual things for money or presents
- *Neglect.* This means stopping a person getting the things they need to be well. Can include:
  - Stopping a person from seeing their doctor
  - Stopping a person from getting their medicine
  - Stopping a person from getting their food
- *Discriminatory Harm (also known as Hate Crime).* This means hurting someone by being hateful or bigoted towards them or their family. Can include:
  - Harassment
  - Mistreating or behaving differently towards someone due to their gender, sexual orientation, race, disability, age, colour, language, religion or belief, and politics.

### 3.4 **Who can cause harm?**

Anyone can cause harm. It could be a friend, relative, worker, carer, partner, volunteer or other adults at risk. More than one person may be involved in abusing the adult.

### 3.5 **Where can harm happen?**

Harm can happen anywhere; in social or health care setting, family home, own home, someone else's home, hospital ward, care home, social club or social activities.

### 3.6 **Adult in Need**

It is recognised that on the majority of occasions RSL employed staff will come into contact with persons that may not be considered to meet the defined criteria of the Adult Support and Protection (Scotland) Act 2007, but who may be vulnerable and may need additional support. They may be an 'Adult in Need' which is defined as:-

*A person in need of additional care and/or support. This usually means an individual who requires an assessment of their needs to support them within the community.*

## **4 CONSENT**

### **4.1 'Adult at Risk'**

4.1.1 If it is known or believed that a person is an 'Adult at Risk of Harm' and that protective action is needed, the legislation states that you must report the situation to a Social Worker.

### **4.2 'Adult in Need'**

4.2.1 If it is known that a person is an 'Adult in Need' then their consent should be sought. This is because adults are entitled to make their own choices and are responsible for how they live their lives. However consent is not required if there is concern about a person who lacks capacity and/or appears to have a mental disorder and who may require assessment and treatment. Where this is the case enquiries can be made under the auspices of two other pieces of legislation which can also be used to protect adults:-

- Adults with Incapacity (Scotland) Act, 2000;
- Mental Health (Care and Treatment) Scotland Act, 2003.

### **4.3 What if the person requires immediate medical assistance or there is concern for their immediate safety?**

4.3.1 Seek appropriate medical assistance including contacting emergency services as required. Uncertainty about consent and capacity should not prevent the provision of urgent medical assistance or contact with emergency services.

### **4.4 What if I suspect an offence has been committed and do I need the adult's consent?**

4.4.1 An adult's consent should usually be sought and before the police are contacted. Adults at Risk are individuals in their own right and must be allowed to exercise their right to choose the way they live their life unless:

- The adult is at immediate risk of significant harm (See 4.3).
- The adult does not have the capacity to understand his/her choice or consequences (See 4.2).
- There is concern the adult is being unduly pressurised to withhold their consent.
- The situation involves a service provider or employee of any organisation/agency and other adults may also be at risk.
- There is a public safety concern and it is in the public interest to override consent because of the seriousness of the incident or concern and/or risk to other people.
- An employee witnessed a crime being committed.

## **5 RESPONDING AND REPORTING GUIDELINES**

### **5.1 Reporting Concerns**

- 5.1.1 Any concerns a member of staff may have regarding the safety and wellbeing of an Adult at Risk should be brought to the attention of their manager. This would include situations where staff observe occurrences or behaviour themselves. It will also include situations where staff receive information about such occurrences and behaviour that lead them to suspect an Adult at Risk is being abused or neglected.
- 5.1.2 Staff should write down the nature of their concern including anything the Adult at Risk may have told them using, as far as possible, the words used by the adult. Where possible gather relevant information (see appendix 1). Notes should be signed and dated.
- 5.1.3 The manager should ensure that the necessary practical steps to manage any immediate risk have been taken. The manager is responsible for ensuring that adult protection concerns are reported directly to Social Work Services, and where necessary the Police without delay (contact details can be found in section 7). If Inverclyde CHCP Social Work Services office is closed and an immediate social work response is required contact can be made with the West of Scotland Out of Hours Standby Social Work Service. (contact details can be found in section 7).
- 5.1.4 Any concerns reported to a manager should be notified to the Designated Manager for Adult Protection as soon as practically possible for oversight and monitoring purposes.
- 5.1.5 Where there are significant concerns about imminent possible risk to Adults at Risk and/or where there is no line management support available, staff themselves should take immediate practical steps to manage this risk and should report adult protection concerns directly to Social Work Services, and where necessary the Police without delay (contact details can be found in section 7). If Inverclyde CHCP Social Work Services office is closed staff should contact the West of Scotland Out of Hours Standby Social Work Service (contact details can be found in section 7). They should report their concerns and the action taken to their manager as soon as practically possible thereafter.
- 5.1.6 Staff or managers making direct contact with Social Work Services and / or the Police must make a note of the following:
- date and time of the contact.
  - name, address and full details of those contacted.
  - full details of who should be contacted for future follow up.

## 5.2 **What if it is someone within your RSL that you are concerned about?**

If a member of staff observes another member of RSL staff acting in a way that causes concern for the safety or wellbeing of an adult they should report this in the same way as is outlined in 5.1 above.

## 5.3 **Supporting the Adult at Risk**

In the event that an Adult at Risk tells a member of staff about something that has happened to them that causes concern it is important that the member of staff acts in a supportive manner.

Staff should:-

- Continue to listen with care.
- Reassure the Adult at Risk he/she was right to tell, if appropriate.
- Affirm the Adult at Risk's feelings as expressed by them.

Staff should not:-

- Interrogate the adult.
- Show disbelief.
- Be judgmental.
- Do not introduce personal or third party experiences of abuse.
- Display strong emotions.

See Appendix 1 for further guidance.

## 5.4 **Referring an Adult in Need**

An Adult in Need may be referred depending on consent (see 4.2.1) to either

- The duty team for adult services if no allocated worker (see section 7).
- The team where they already have an allocated worker. In joint health and social work teams the allocated worker may have either a health or a social work background (see section 7). If unknown contact duty team.

## 5.5 **Confidentiality**

If an adult is known or believed to be at risk of harm, this will always override a professional or organisational requirement to keep information confidential. Those employed or involved with the RSL have a responsibility to act to make sure that an adult at risk whose safety or wellbeing may be at risk is protected from harm.

## **5.6 Role of Designated Manager for Adult Protection**

- 5.6.1 The designated manager for adult support and protection must ensure proper recording of all relevant reports, concerns, incidents, where appropriate.
- 5.6.2 All concerns regarding an Adult at Risk of Harm must be reported promptly to Social Work Services via the Adult Services duty system / Out of Hours West of Scotland Standby Social Work Service and to the Police where appropriate. Social Work Services and/or the police will make enquiries and investigate the concerns in a proportionate manner.
- 5.6.3 Social Work Services and/or the police will provide feedback to the RSL Manager acknowledging the referral and that the concerns raised are being addressed.
- 5.6.4 RSL staff with an ongoing working relationship with the Adult at Risk should be informed that they should be given the opportunity to become part of the multiagency team to support the Adult at Risk where one is established.
- 5.6.5 If the RSL Manager is unhappy with the response from Social Work Services they should contact the responsible Service Manager for the relevant Adult Services Team (see section 7) and outline their concerns to them.

## **6 WHAT HAPPENS NEXT?**

- 6.1 It is the duty of Social Work Services to investigate matters of concern in relation to the protection of an Adult at Risk. Where appropriate other investigations may also be triggered. This may include investigations by Police, Mental Welfare Commission, Care Inspectorate, and Public Guardian.
- 6.2 The investigating Social Worker/Police Officer may require to speak directly to the person who raised the concerns. All RSL staff should co-operate fully with any future enquiries.
- 6.3 Following a case conference RSL staff with an ongoing working relationship with the Adult at Risk in a support role may be invited to join the core group / team established to contribute to the planning and delivery of support. RSL staff should consider such requests and where possible attend and contribute to these meetings.

## 7 CONTACTS

Agency / Organisation	Contact Details
Inverclyde Social Work Services – Adult Services	Duty Team – Adult Services Telephone: 01475 715365
Social Work Services - Out of Hours Service	Social Work Stand By Telephone: 0800 811 505
Police Scotland	Telephone 101 to report your concerns to your local police office (phone 999 in an emergency)
Inverclyde Social Work Services – Children and Families	Duty Team – Children and Families Telephone: 01475 715365  Service Manager – Children’s Services Telephone: 01475 715365

### Who should I report concerns to in Inverclyde CHCP Social Work Services?

- The Duty Senior Social Worker who can be contacted via **01475 715365**.
- The Senior Social Worker/Social Worker to which the person is already allocated (**see numbers below**).
- **Out of Hours** – West of Scotland Standby Service (before 8.40 and after 5.00 Monday to Thursday, before 8.40 and after 4.00 on Fridays, and weekends) **0800 811 505**.

Contact numbers and details for Social Work Offices in Inverclyde are listed below:

- **Central Office** **01475 715365**
- **Greenock Health Centre** **01475 715010**
- **Inverclyde Royal Hospital** **01475 504422**
- **Community Mental Health Team & Older Persons Mental Health Team** **01475 558000**
- **Inverclyde Alcohol Services** **01475 715812**
- **Inverclyde Community Drugs Team** **01475 499000**
- **Learning Disability Team** **01475 499059**

Where an Adult at Risk concern involves a registered service the following should be notified immediately:

- Care Inspectorate **0141 843 4230**
- CHCP Contract Monitoring & Complaints Team **01475 715365**



More detailed procedures are set out in Inverclyde CHCP Adult Protection Policy, Practice Standards and Operational Procedures

<http://library.nhsggc.org.uk/mediaAssets/CHP%20Inverclyde/Adult%20Protection%20Policy,%20Practice%20Standards%20&%20Operational%20Procedures.pdf>

## **ADULT PROTECTION APPENDIX 1**

### **What is relevant Information?**

Relevant details relating to the case should include:

- Name, address, date of birth, ethnic origin, gender, religion, type of accommodation, family circumstances, support networks, physical health, any communication difficulties, mental health and any associated statutory orders, or whatever information is available.
- The staff member's job title and the reason for their involvement.
- The nature and the substance of the allegation or concern.
- Details of any care givers and/or significant others.
- Details of the alleged perpetrator, where appropriate, and his or her current whereabouts and likely movements over the next 24 hours, if known.
- Details of any specific incidents (e.g. dates, times, injuries, witnesses, evidence (such as bruising)).
- Background relating to any previous concerns.
- Any information given to the person, their expectations and wishes if known.

### **Checklist:**

- Record the date, time and where the harm is alleged to have taken place or where it was witnessed.
- Record details of anyone else who was there.
- Record what the adult at risk of harm says using the words of the person making the disclosure even if they seem rude or embarrassing.
- Tell the adult at risk you need to speak to your manager.
- Try to separate the factual information from any opinions.
- Date and sign your report.
- Don't forget your report may be required as part of any legal action or disciplinary proceedings.
- Managers in Services also need to report to Care Inspectorate and Inverclyde Contract Monitoring and Complaints team if the person alleged to be causing the harm is a member of staff.