

Decision Support Tool

This Decision Support Tool builds on the work carried out by Blackburn with Darwen Safeguarding Adults Board.

Together with the principles outlined in this Blackpool Adults Safeguarding Board Multi agency policy and procedures, it provides a thinking framework for Adult Safeguarding and aims to support a consistent basis for action.

• A safeguarding alert is the term used when there is a concern about abuse or harm.

Individual agencies who are partners to the Blackpool Adults Safeguarding Board will have aligned their own internal processes with the multi-agency policy - but the matrix highlights the types of situations where they should raise an alert with the local authority and where raising an alert would be appropriate.

The situations described in this matrix are not exhaustive and some thinking will be required by an agency or individual about whether their concern falls into the types and/or level of harm that would indicate that an alert should be raised with the local authority.

It is important to stress that if any agency or individual does have concerns about harm to an adult who may be in need of care and support (whether or not they received that help or support) and is uncertain about raising an alert, they should contact the local authority for advice.

Once an alert is received the local authority will then make decisions on the appropriate pathway to use also based on the matrix. This decision making process may be in consultation with others.

The Tool will establish consistency and a common understanding of the types of actions that may be taken to support those who may be at risk of harm.

IT IS IMPORTANT TO CONSIDER IN THE FIRST INSTANCE WHETHER SOMEONE IS IN IMMEDIATE DANGER - OR HAS BEEN THE SUBJECT OF A CRIME. CRIMINAL ACTS MUST BE REPORTED TO THE POLICE AND/OR EMERGENCY TREATMENT SHOULD BE SOUGHT WHERE NECESSARY.



Type of abuse	Isolated incident	Possibly SAFEGUARDING		SAFEGUARDING	3
	Not SAFEGUARDING	Possible harm – some		Harm caused- medium to	o high risk
	No harm – low risk	risks	A Safeguarding Ad	ults Referral MUST be made	
Physical	Minor one off incident	Inexplicable minor marking	Inexplicable or	Physical restraint	Physical assaults – injury, death.
	causing no harm – e.g. a	found where there is no	significant marks,	undertaken outside of a	
Can include (but not	fall or friction mark on skin	clear explanation as to how	lesions, cuts or grip	specific care plan or not	Grievous bodily harm/assault
exhaustive):	due to ill-fitting hoist sling	the injury occurred.	marks.	proportionate to the risk.	with or without a weapon leading to irreversible damage or death.
- AIt	Minor events that still	Isolated incident involving	Assault	Withholding of food, drinks	
• Assault	meet criteria for 'incident	service user on service user.		or aids to independence.	Any potential criminal act against
Hitting	reporting'.		Repeated falls of	Inexplicable injuries	an adult at risk
 Slapping 		Unwanted physical contact	adult at risk despite		
Pushing	Dispute between service	from 'informal' carer with	preventative advice		
 Misuse of 	users with no harm,	no harm and quickly	re needs given-		
medication	quickly resolved and risk	resolved	harm, distress and		
 Restraint 	assessment in place.		injury occurs		
• FGM	Bruising caused by family	Repeated incidents of bruising caused by carer			
 Inappropriate 	carer due to poor lifting	despite receiving up to date			
physical	and handling technique.	advice /equipment			
restrictions or	No harm intended	advice / equipment			
handling	Immediately resolved	Repeated falls of adult at			
processes	when given correct	risk despite advice/guidance			
 Domestic Abuse 	advice/equipment	to prevent –minor injury			
Domestic Abuse		occurs			
	Adult does not receive prescribed medication (missed/wrong dose) – no harm occurs	Recurring missed medication or administration errors in relation to one service user that caused no harm	Recurrent missed medication or administration errors that affect one or more adult and/or result in harm	Deliberate maladministration of medicines (e.g. sedation). Covert administration without proper medical supervision or outside the Mental Capacity Act	Pattern of recurring administration errors or an incident of deliberate maladministration that results in ill-health or death.



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	Not SAFEGUARDING	Possible harm – some		Harm caused- medium to	o high risk
	No harm – low risk	risks	A Safeguardin	ig Adults Referral MUST be made	
Sexual	Isolated incident when an	Isolated incident of low level	Verbal and	Recurrent sexualised touching or	Attempted penetration by any
	inappropriate sexualised	unwanted sexualised	gestured	isolated/recurring masturbation	means (whether or not is occurs
Can include(but not	remark is made to an adult	attention/touching directed	sexualised	by another person without	within a relationship) without
exhaustive):	with capacity and no	at one adult by another	teasing.	consent.	consent.
	distress is caused.	whether or not capacity	Carrialianal	Convert bearing and converted and	Conversion of attention in a
		exists – no harm or distress.	Sexualised attention	Sexual harassment - unwelcome	Sexualised attention in a
Inappropriate		Two people who lack	between two	sexual advances, requests for sexual favours, and other verbal	relationship between staff and a service user.
touching		capacity engaged in a sexual	service users	or physical conduct of a sexual	service user.
Indecent		activity or relationship – no	where one	nature.	Sex in a relationship
exposure		distress to either.	lacks capacity		characterised by authority,
Sexual grooming			to consent.		inequality or exploitation e.g.
Sexual					staff and service user
harassment					
Sexual teasing or					Sex without consent / rape.
innuendo					
Subject to					Voyeurism.
pornography or					Being made to look at
witness to sexual					pornographic material against
acts					will/where valid consent cannot
Non-consensual					be given.
sexual activity					Being made to participate in a
Rape					sexual act against will/where
• Rape					valid consent cannot be given.
					Trafficking an adult at risk for
					sexual exploitation



Type of abuse	Isolated incident Not SAFEGUARDING	Possibly SAFEGUARDING Possible harm – some		SAFEGUARDING		
	No harm – low risk	risks	A Safoguardina Ad	Harm caused- medium to Jults Referral MUST be made		
Developing	Isolated incident where		Occasional taunts	Humiliation	Denial of basic human rights or	
Psychological		The occasional withholding		Humiliation	_	
Can include (but not exhaustive): Domestic abuse Threats of harm	adult is spoken to in a rude or other inappropriate way – respect is undermined, but no distress is caused Isolated incident whereby threats occur e.g.	of information to disempower Recurrent incidents of adult being spoken to discourteously Incidents occur e.g. of	or verbal outbursts which cause distress. Treatment that undermines dignity and damages esteem.	Emotional blackmail e.g. threats of abandonment or harm Frequent and frightening verbal outbursts to an adult at risk.	civil liberties, overriding advance directive, forced marriage. Prolonged intimidation Producing and distributing inappropriate photos via any social media means.	
or abandonment Deprivation of contact Humiliation Harassment Control Intimidation Coercion Verbal abuse Isolation Radicalisation	intimidation harassment but no harm or distress occurs	abandonment, verbal abuse, online bullying etc. but no distress is caused	Denying or failing to recognise an adults choice or opinion Frequent verbal outbursts to an adult at risk Deliberate withdrawal of services or supportive networks by carer		Vicious/personalised verbal attacks Forced Marriage of an adult at risk	



Type of abuse	Isolated incident Not SAFEGUARDING	Possibly SAFEGUARDING Possible harm – some		SAFEGUARDING Harm caused- medium to high risk		
			A Safeguarding Adults Referral MUST be made			
Financial or material Can include (but not exhaustive): Theft Fraud Scams (eg telephone, post, internet) Coercion Misuse of finances on someone's behalf Incorrect recording	Inadequate financial records Isolated incident of staff personally benefiting from the support they offer service users in a way that does not involve the actual abuse of money. E.g. accrue 'reward points' on their own store loyalty cards when shopping when the adult has capacity to know what has happened and has agreed.	risks Adult not routinely involved in decisions about how their money is spent or kept safe — capacity in this respect is not properly considered. Staff personally benefit from the support they offer service users. E.g. accrue 'reward points' on their own store loyalty cards when shopping — adult lacks capacity. Failure by relative to pay care fees/charges where no harm occurs - but receives personal allowance or has access to other personal monies. Unwanted cold calling/door stop visits	A Safeguarding Ad Adult's monies kept in a joint bank account – unclear arrangements for equitable sharing of capital and interest. Adult denied access to his/her own funds or possessions. Failure by relative to pay care fees/charges and adult at risk experiences distress or harm through having no personal allowance or risk of eviction/ termination of service.			



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	Not SAFEGUARDING	Possible harm – some		Harm caused- medium to	o high risk	
	No harm – low risk	risks	A Safeguarding A	Adults Referral MUST be made		
Neglect and acts of	Isolated missed home care	Inadequacies in care	Recurrent missed	Ongoing lack of care to extent	Failure to arrange access to life	
omission	visit where no harm	provision that lead to	home care visits	that health and wellbeing	saving services or medical care	
	occurs.	discomfort or inconvenience	where risk of	deteriorate significantly e.g.		
Can include (but not exhaustive):	Adult is not assisted with a meal/drink on one	no significant harm occurs,e.g. being left wetoccasionally.	harm escalates, or one missed visit where harm	dehydration, malnutrition, loss of independence or confidence.	Failure to intervene in dangerous situations where the adult lacks the capacity to assess risk	
 Ignoring or failing 	occasion and no harm	,	occurs.		, ,	
to respond to medical,	occurs.	Occasionally not having			Gross neglect resulting in serious	
emotional or	Inappropriate hospital	access to aids to independence (if regular	Poor transfers between services		injury or death.	
physical needs	discharge where no harm	may be restraint).	for example -			
 Failure to provide appropriate care 	occurs	Adult at risk living with	Hospital discharge without			
Failure to follow care plan or	Inadequate care that causes discomfort but no harm	family carer who occasionally fails with caring duties.	adequate planning and harm occurs.			
health advice • Withholding		Temporary environment	Inappropriate or			
necessities of life		restrictions but action to	incomplete DNAR			
 Failure to provide access to essential 		resolve is in place.	(Do Not Attempt Resuscitation).			
services		Occasional inadequacies in	Resuscitation).			
 Failure to follow health and safety legislation 		care from informal carers – no harm occurs.	Carers consistently failing to provide care despite advice/guidance			
Pressure ulcers -	One person one pressure	Pressure ulcers multiple	Pressure ulcers	Mismanagement of pressure	Serious injury or death as a result	
Pressure ulcers - also see BSAB guidance	ulcer of low grade (grade 1 or 2).	grade 2s	grade 3 or 4.	ulcer grade 3 or 4 by professionals / paid carers.	of consequences of avoidable pressure ulcer development e.g. septicaemia.	



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	No harm – low risk	risks	A Safeguarding A	Adults Referral MUST be made	
Organisational Can include (but not exhaustive): • Failure to follow health and safety legislation • Neglect or overall poor practice • Ill treatment • Failure to adhere to care or health advice • Failure to respond to whistleblowing issues • Failure to adhere to legislation (eg) MCA / MHA issues	Short term lack of stimulation or opportunities for people to engage in meaningful social and leisure activities and where no harm occurs. Short term - service users not given sufficient voice or involved in the running of the service e.g. inflexible routines. Service design where groups of service users living together are inappropriate.	Denial of individuality and opportunities for service users to make informed choices and take responsible risks. Care planning documentation not person centred. Denying adult at risk access to professional support and services such as advocacy. Poor or outmoded care practice – no harm occurs.	Rigid or inflexible routines. Service user's dignity is undermined, e.g. lack of privacy during support with intimate care needs, shared clothing, underclothing, dentures etc. Failure to whistle blow on serious issues when internal procedures to highlight issues are exhausted. Failure to refer disclosure of abuse Inappropriate or incomplete DNAR (Do Not Attempt Resuscitation).	Ill-treatment of one or more adults as risk such as unsafe manual handling. Failure to report, monitor or improve bad care practices. Unsafe and unhygienic living environments. Failure to support an adult at risk to access health and or care treatments. Punitive responses to challenging behaviours.	Staff misusing their position of power over service users. Over-medication and/or inappropriate restraint used to manage behaviour. Widespread, consistent ill treatment. Stark or spartan living environments causing sensory deprivation. Intentionally or knowingly failing to adhere to mental Capacity Act e.g. unauthorised Deprivation of Liberty Safeguards (DoLS)



	One off incident of low staffing due to unpredictable circumstances, despite management efforts to address. No harm caused	More than one incident of low staffing levels, no contingencies in place. No harm caused.	Single incident of low staffing resulting in harm to one or more persons.	staffing resulting in harm to	Low staffing levels which result in serious injury or death to one or more persons (corporate manslaughter)
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D'andada.	No harm – low risk	risks	, ,	g Adults Referral MUST be made	
Can include (but not exhaustive): Harassment / slurs rooted in discrimination of protected characteristics Failure to respond to equality and diversity needs FGM Honour based violence Hate crime Radicalisation	Isolated incident when an inappropriate prejudicial remark is made to an adult and no distress is caused. Care planning fails to address an adult's culture and diversity needs for a short period	Isolated incident of teasing motivated by prejudicial attitudes – service user to service user.	Recurring taunts. Recurring failure to meet specific needs associated with culture and diversity. Teasing by person in position of trust.	Denial of civil liberties, e.g. voting, making a complaint. Humiliation or threats. Denial of an individual's appropriate diet, access to take part in activities related to their faith or beliefs or not using the individual's chosen name. Making an adult at risk partake in activities inappropriate to their faith or beliefs	Hate crime resulting in injury/emergency medical treatment/fear for life. Hate crime resulting in serious injury or attempted murder/honour based violence. Exploitation of at adult at risk for recruitment or radicalisation into terrorist related activity Female genital mutilation of an adult at risk Honour based violence



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Self-Neglect Can include (but not exhaustive): Hoarding Self- neglect of personal hygiene / nutrition/ hydration causing harm or risk to health Self- neglect causing risk to others	Self-care causing some concern-no sign of harm or distress Property neglected but all services work Some evidence of hoarding-no impact on health/safety	Some signs of disengagement with professionals Property neglected-evidence of hoarding beginning to impact on health/safety Lack of essential amenities No access to support services	Refusal of health/medical treatment High level of clutter/hoarding Insanitary conditions Disengagement with professionals High risk to safety	Lack of self-care resulting in deterioration of health & wellbeing Environmental a danger to self and others Behaviour poses risk to self and others	Life is in danger without intervention Chaotic substance misuse Imminent danger to self/others due to risk of fire/harm in property Multiple concerns from other agencies



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Can include (but not exhaustive): Trafficking Forced marriage Denial of access to health or social care in the context of slavery			Under control of another e.g. dealer, pimp, gang master Unable to access medical treatment Poor living conditions/low wages	Numerous addresses to avoid detection Lives at place of work Not in possession of ID or passport	Lives in sheds, lock up containers Risk of fatality or serious injury due to work conditions No freedom/unable to leave Wages used to cover debts Forced marriage



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Domestic Abuse NB - Children present in house-refer to	Isolated report of abuse- low level threat Adult has capacity and no vulnerabilities identified	Ongoing report/incidents of domestic abuse Adult not accessing support services but adequate	Adult subjected to controlling behaviour	Adult subjected to severe controlling behaviour e.g. financial/locked in property/withholding of medical treatment/deliberately isolated	Adult subjected to violent assault(s) Threats to kill
MASH Can include(but not exhaustive):	Refer to Domestic Abuse	protective factors	Frequent reports of verbal and physical	Assault-physical or sexual causing serious harm	Rape Female Genital Mutilation Honour Based Abuse and/or
Physical /Sexual /Financial /	Services for early intervention and support	Refer to Domestic Abuse Services for early intervention and support	assaults Adult subjected to	Consider MARAC	Forced Marriage Consider MARAC
PsychologicalStalkingFGMHonour based violence			stalking/haras sment Adult assessed as not having capacity		
			Consider MARAC		

NOTE: The Care Act 2014 has introduced the requirement to record additional categories of abuse such as FGM, modern slavery, self-neglect and Domestic Abuse.

However the types of harm perpetrated within these categories may fall within several sections of the matrix above and as such should not be seen as needing to occur separately before a safeguarding alert is made.



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