

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 Not SAFEGUARDING No harm – low risk	Possibly SAFEGUARDING Possible harm – some risks	SAFEGUARDING Harm caused- medium to high risk <i>A Safeguarding Adults Referral MUST be made</i>		
<p>Physical</p> <p>Can include (but not exhaustive):</p> <ul style="list-style-type: none"> • Assault • Hitting • Slapping • Pushing • Misuse of medication • Restraint • FGM • Inappropriate physical restrictions or handling processes • Domestic Abuse 	<p>Minor one off incident causing no harm – e.g. a fall or friction mark on skin due to ill-fitting hoist sling</p> <p>Minor events that still meet criteria for ‘incident reporting’.</p> <p>Dispute between service users with no harm, quickly resolved and risk assessment in place.</p> <p>Bruising caused by family carer due to poor lifting and handling technique. No harm intended Immediately resolved when given correct advice/equipment</p>	<p>Inexplicable minor marking found where there is no clear explanation as to how the injury occurred.</p> <p>Isolated incident involving service user on service user.</p> <p>Unwanted physical contact from ‘informal’ carer with no harm and quickly resolved</p> <p>Repeated incidents of bruising caused by carer despite receiving up to date advice /equipment</p> <p>Repeated falls of adult at risk despite advice/guidance to prevent –minor injury occurs</p>	<p>Inexplicable or significant marks, lesions, cuts or grip marks.</p> <p>Assault</p> <p>Repeated falls of adult at risk despite preventative advice re needs given-harm, distress and injury occurs</p>	<p>Physical restraint undertaken outside of a specific care plan or not proportionate to the risk.</p> <p>Withholding of food, drinks or aids to independence. Inexplicable injuries</p>	<p>Physical assaults – injury, death.</p> <p>Grievous bodily harm/assault with or without a weapon leading to irreversible damage or death.</p> <p>Any potential criminal act against an adult at risk</p>
	<p>Adult does not receive prescribed medication (missed/wrong dose) – no harm occurs</p>	<p>Recurring missed medication or administration errors in relation to one service user that caused no harm</p>	<p>Recurrent missed medication or administration errors that affect one or more adult and/or result in harm</p>	<p>Deliberate maladministration of medicines (e.g. sedation). Covert administration without proper medical supervision or outside the Mental Capacity Act</p>	<p>Pattern of recurring administration errors or an incident of deliberate maladministration that results in ill-health or death.</p>

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<p>Sexual</p> <p>Can include (but not exhaustive):</p> <ul style="list-style-type: none"> • Inappropriate touching • Indecent exposure • Sexual grooming • Sexual harassment • Sexual teasing or innuendo • Subject to pornography or witness to sexual acts • Non-consensual sexual activity • Rape 	<p>Isolated incident when an inappropriate sexualised remark is made to an adult with capacity and no distress is caused.</p>	<p>Isolated incident of low level unwanted sexualised attention/touching directed at one adult by another whether or not capacity exists – no harm or distress.</p> <p>Two people who lack capacity engaged in a sexual activity or relationship – no distress to either.</p>	<p>Verbal and gestured sexualised teasing.</p> <p>Sexualised attention between two service users where one lacks capacity to consent.</p>	<p>Recurrent sexualised touching or isolated/recurring masturbation by another person without consent.</p> <p>Sexual harassment - unwelcome sexual advances, requests for sexual favours, and other verbal or physical conduct of a sexual nature.</p>	<p>Attempted penetration by any means (whether or not it occurs within a relationship) without consent.</p> <p>Sexualised attention in a relationship between staff and a service user.</p> <p>Sex in a relationship characterised by authority, inequality or exploitation e.g. staff and service user</p> <p>Sex without consent / rape.</p> <p>Voyeurism.</p> <p>Being made to look at pornographic material against will/where valid consent cannot be given.</p> <p>Being made to participate in a sexual act against will/where valid consent cannot be given.</p> <p>Trafficking an adult at risk for sexual exploitation</p>

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<p>Psychological</p> <p>Can include (but not exhaustive):</p> <ul style="list-style-type: none"> • Domestic abuse • Threats of harm or abandonment • Deprivation of contact • Humiliation • Harassment • Control • Intimidation • Coercion • Verbal abuse • Isolation • Radicalisation 	<p>Isolated incident where adult is spoken to in a rude or other inappropriate way – respect is undermined, but no distress is caused</p> <p>Isolated incident whereby threats occur e.g. intimidation harassment but no harm or distress occurs</p>	<p>The occasional withholding of information to disempower</p> <p>Recurrent incidents of adult being spoken to discourteously</p> <p>Incidents occur e.g. of abandonment, verbal abuse, online bullying etc. but no distress is caused</p>	<p>Occasional taunts or verbal outbursts which cause distress.</p> <p>Treatment that undermines dignity and damages esteem.</p> <p>Denying or failing to recognise an adults choice or opinion</p> <p>Frequent verbal outbursts to an adult at risk</p> <p>Deliberate withdrawal of services or supportive networks by carer</p>	<p>Humiliation</p> <p>Emotional blackmail e.g. threats of abandonment or harm</p> <p>Frequent and frightening verbal outbursts to an adult at risk.</p>	<p>Denial of basic human rights or civil liberties, overriding advance directive, forced marriage.</p> <p>Prolonged intimidation</p> <p>Producing and distributing inappropriate photos via any social media means.</p> <p>Vicious/personalised verbal attacks</p> <p>Forced Marriage of an adult at risk</p>

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<p>Financial or material</p> <p>Can include (but not exhaustive):</p> <ul style="list-style-type: none"> • Theft • Fraud • Scams (eg telephone, post, internet) • Coercion • Misuse of finances on someone’s behalf • Incorrect recording 	<p>Inadequate financial records</p> <p>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.</p>	<p>Adult not routinely involved in decisions about how their money is spent or kept safe – capacity in this respect is not properly considered.</p> <p>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.</p> <p>Failure by relative to pay care fees/charges where no harm occurs - but receives personal allowance or has access to other personal monies.</p> <p>Unwanted cold calling/door stop visits</p>	<p>Adult’s monies kept in a joint bank account – unclear arrangements for equitable sharing of capital and interest.</p> <p>Adult denied access to his/her own funds or possessions.</p> <p>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.</p>	<p>Misuse/misappropriation of property, possessions or benefits by a person in a position of trust or control.</p> <p>Personal finances removed from adult’s control without legal authority.</p>	<p>Fraud/exploitation relating to benefits, income, property or will. Theft.</p> <p>Doorstep crimes – e.g. fraudulently obtaining money for services/goods</p>

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<p>Neglect and acts of omission</p> <p>Can include (but not exhaustive):</p> <ul style="list-style-type: none"> • Ignoring or failing to respond to medical, emotional or physical needs • Failure to provide appropriate care • Failure to follow care plan or health advice • Withholding necessities of life • Failure to provide access to essential services • Failure to follow health and safety legislation 	<p>Isolated missed home care visit where no harm occurs.</p> <p>Adult is not assisted with a meal/drink on one occasion and no harm occurs.</p> <p>Inappropriate hospital discharge where no harm occurs</p> <p>Inadequate care that causes discomfort but no harm</p>	<p>Inadequacies in care provision that lead to discomfort or inconvenience – no significant harm occurs, e.g. being left wet occasionally.</p> <p>Occasionally not having access to aids to independence (if regular may be restraint).</p> <p>Adult at risk living with family carer who occasionally fails with caring duties.</p> <p>Temporary environment restrictions but action to resolve is in place.</p> <p>Occasional inadequacies in care from informal carers – no harm occurs.</p>	<p>Recurrent missed home care visits where risk of harm escalates, or one missed visit where harm occurs.</p> <p>Poor transfers between services for example - Hospital discharge without adequate planning and harm occurs.</p> <p>Inappropriate or incomplete DNAR (Do Not Attempt Resuscitation).</p> <p>Carers consistently failing to provide care despite advice/guidance</p>	<p>Ongoing lack of care to extent that health and wellbeing deteriorate significantly e.g. dehydration, malnutrition, loss of independence or confidence.</p>	<p>Failure to arrange access to life saving services or medical care</p> <p>Failure to intervene in dangerous situations where the adult lacks the capacity to assess risk</p> <p>Gross neglect resulting in serious injury or death.</p>
<ul style="list-style-type: none"> • Pressure ulcers - also see BSAB guidance 	<p>One person one pressure ulcer of low grade (grade 1 or 2).</p>	<p>Pressure ulcers multiple grade 2s</p>	<p>Pressure ulcers grade 3 or 4.</p>	<p>Mismanagement of pressure ulcer grade 3 or 4 by professionals / paid carers.</p>	<p>Serious injury or death as a result of consequences of avoidable pressure ulcer development e.g. septicaemia.</p>

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<p>Organisational</p> <p>Can include (but not exhaustive):</p> <ul style="list-style-type: none"> • 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 	<p>Short term lack of stimulation or opportunities for people to engage in meaningful social and leisure activities and where no harm occurs.</p> <p>Short term - service users not given sufficient voice or involved in the running of the service e.g. inflexible routines.</p> <p>Service design where groups of service users living together are inappropriate.</p>	<p>Denial of individuality and opportunities for service users to make informed choices and take responsible risks.</p> <p>Care planning documentation not person centred.</p> <p>Denying adult at risk access to professional support and services such as advocacy.</p> <p>Poor or outmoded care practice – no harm occurs.</p>	<p>Rigid or inflexible routines.</p> <p>Service user’s dignity is undermined, e.g. lack of privacy during support with intimate care needs, shared clothing, underclothing, dentures etc.</p> <p>Failure to whistle blow on serious issues when internal procedures to highlight issues are exhausted.</p> <p>Failure to refer disclosure of abuse Inappropriate or incomplete DNAR (Do Not Attempt Resuscitation).</p>	<p>Ill-treatment of one or more adults as risk such as unsafe manual handling.</p> <p>Failure to report, monitor or improve bad care practices. Unsafe and unhygienic living environments.</p> <p>Failure to support an adult at risk to access health and or care treatments. Punitive responses to challenging behaviours.</p>	<p>Staff misusing their position of power over service users.</p> <p>Over-medication and/or inappropriate restraint used to manage behaviour.</p> <p>Widespread, consistent ill treatment.</p> <p>Stark or spartan living environments causing sensory deprivation.</p> <p>Intentionally or knowingly failing to adhere to mental Capacity Act e.g. unauthorised Deprivation of Liberty Safeguards (DoLS)</p>

	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.	Repeated incidents of low staffing resulting in harm to one or more persons	Low staffing levels which result in serious injury or death to one or more persons (corporate manslaughter)
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Discriminatory Can include (but not exhaustive): <ul style="list-style-type: none"> • Harassment / slurs rooted in discrimination of protected characteristics • Failure to respond to equality and diversity needs • FGM • Honour based violence • Hate crime • Radicalisation 	<p>Isolated incident when an inappropriate prejudicial remark is made to an adult and no distress is caused.</p> <p>Care planning fails to address an adult’s culture and diversity needs for a short period</p>	Isolated incident of teasing motivated by prejudicial attitudes – service user to service user.	<p>Recurring taunts.</p> <p>Recurring failure to meet specific needs associated with culture and diversity.</p> <p>Teasing by person in position of trust.</p>	<p>Denial of civil liberties, e.g. voting, making a complaint.</p> <p>Humiliation or threats.</p> <p>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.</p> <p>Making an adult at risk partake in activities inappropriate to their faith or beliefs</p>	<p>Hate crime resulting in injury/emergency medical treatment/fear for life.</p> <p>Hate crime resulting in serious injury or attempted murder/honour based violence.</p> <p>Exploitation of at adult at risk for recruitment or radicalisation into terrorist related activity</p> <p>Female genital mutilation of an adult at risk</p> <p>Honour based violence</p>

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<p>Self-Neglect</p> <p>Can include (but not exhaustive):</p> <ul style="list-style-type: none"> • Hoarding • Self- neglect of personal hygiene / nutrition/ hydration causing harm or risk to health • Self- neglect causing risk to others 	<p>Self-care causing some concern-no sign of harm or distress</p> <p>Property neglected but all services work</p> <p>Some evidence of hoarding-no impact on health/safety</p>	<p>Some signs of disengagement with professionals</p> <p>Property neglected-evidence of hoarding beginning to impact on health/safety</p> <p>Lack of essential amenities</p> <p>No access to support services</p>	<p>Refusal of health/medical treatment</p> <p>High level of clutter/hoarding</p> <p>Insanitary conditions</p> <p>Disengagement with professionals</p> <p>High risk to safety</p>	<p>Lack of self-care resulting in deterioration of health & wellbeing</p> <p>Environmental a danger to self and others</p> <p>Behaviour poses risk to self and others</p>	<p>Life is in danger without intervention</p> <p>Chaotic substance misuse</p> <p>Imminent danger to self/others due to risk of fire/harm in property</p> <p>Multiple concerns from other agencies</p>

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<p>Modern Slavery</p> <p>Can include (but not exhaustive):</p> <ul style="list-style-type: none"> • Trafficking • Forced marriage • Denial of access to health or social care in the context of slavery 			<p>Under control of another e.g. dealer, pimp, gang master</p> <p>Unable to access medical treatment</p> <p>Poor living conditions/low wages</p>	<p>Numerous addresses to avoid detection</p> <p>Lives at place of work</p> <p>Not in possession of ID or passport despite having</p>	<p>Lives in sheds, lock up containers</p> <p>Risk of fatality or serious injury due to work conditions</p> <p>No freedom/unable to leave</p> <p>Wages used to cover debts</p> <p>Forced marriage</p>

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<p>Domestic Abuse</p> <p>NB - Children present in house-refer to MASH</p> <p>Can include(but not exhaustive):</p> <ul style="list-style-type: none"> • Physical / • Sexual/ • Financial/ • Psychological • Stalking • FGM • Honour based violence 	<p>Isolated report of abuse-low level threat</p> <p>Adult has capacity and no vulnerabilities identified</p> <p>Refer to Domestic Abuse Services for early intervention and support</p>	<p>Ongoing report/incidents of domestic abuse</p> <p>Adult not accessing support services but adequate protective factors</p> <p>Refer to Domestic Abuse Services for early intervention and support</p>	<p>Adult subjected to controlling behaviour</p> <p>Frequent reports of verbal and physical assaults</p> <p>Adult subjected to stalking/harassment</p> <p>Adult assessed as not having capacity</p> <p>Consider MARAC</p>	<p>Adult subjected to severe controlling behaviour e.g. financial/locked in property/withholding of medical treatment/deliberately isolated</p> <p>Assault-physical or sexual causing serious harm</p> <p>Consider MARAC</p>	<p>Adult subjected to violent assault(s)</p> <p>Threats to kill</p> <p>Rape</p> <p>Female Genital Mutilation</p> <p>Honour Based Abuse and/or Forced Marriage</p> <p>Consider MARAC</p>

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.

