



User involvement in adult safeguarding

Key messages

- User involvement is a key development in health and social care policy and practice, but the evidence base for user involvement in adult safeguarding is limited.
- Local authorities and safeguarding adults boards have experience of working in partnership to develop policies and procedures to prevent and respond to abuse. A key area of learning has been how to better involve people who use services in formal safeguarding processes at an individual level and at a strategic level.
- There are a number of barriers to promoting user involvement in adult safeguarding, including concerns about risk, fears of causing harm, the need for diverse approaches, and the challenges of achieving fair representation of user groups.
- Many approaches can be used to support the involvement of people who use services: involving users in training professionals, taking a partnership approach, recognising diversity, taking a rights-based approach, developing accessible information and outreach, and offering support, training and capacity building.

Introduction

This At a glance briefing looks at ways of involving people who use services in adult safeguarding at an individual level and at a strategic level. It describes a range of models of user involvement in adult safeguarding, and looks at what helps and hinders involvement in safeguarding adults. The content is based on SCIE Report 47: *User involvement in adult safeguarding*.

Background

A number of values and principles underpin user involvement in health and social care – these include respect, equality, partnership, social inclusion, empowerment and choice. Increasingly, these values are being written in to adult safeguarding policies at a national, regional and local level.

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The landmark national *No secrets* guidance on adult safeguarding (DH/HO, 2000) included a number of references to the importance of involving and working alongside people who use services to implement the guidance. Nine years later, consultation for the review of

‘For local authorities, user involvement means trying to promote choice and control at the same time as having statutory obligations to protect people from risk of abuse and harm.’

No secrets (DH, 2009) underlined the importance of user involvement, but presented a more complex picture of what user involvement might entail. The review emphasised that for local authorities, user involvement means trying to promote choice and control at the same time as having statutory obligations to protect people from risk of abuse and harm. This is a key issue given the emphasis on personalisation and self-directed support.

The legislative and policy context for user involvement in adult safeguarding continues to develop. The Law Commission (2011) have proposed a new adult social care law to streamline the many pieces of legislation in adult social care, and one of the drivers for this is the need (expressed by professionals and the public) to strengthen the law on safeguarding. More broadly, it appears that the language of safeguarding is moving away from an emphasis on vulnerability towards recognising strengths and capabilities, with the role of safeguarding being to support people to protect themselves.

Formal involvement arrangements

People who use services are involved in formal adult safeguarding processes in a range of ways:

- direct representation on Safeguarding Adults Boards (SABs) (although this is not routine)
- forums and sub-groups (typically up to five) that report to the SAB

- one-off consultation events.

SABs often go beyond a focus on individual situations of abuse to work with communities on awareness-raising and prevention. Other involvement approaches include:

- procedures to increase participation during individual safeguarding investigations
- advocacy and support to promote participation
- debriefing and reviews of services to find out about satisfaction of people who use services
- research and surveys on the experience of people who have been through a safeguarding procedure (Braye et al, 2010).

Examples: Approaches to involvement

Central Bedfordshire and Bedford Borough Councils worked with an independent advocacy charity to provide a representative of people who use services to the SAB. They set up a support group for people who had been through a safeguarding process, and one member of this group became the SAB user representative.

In **Barnet**, instead of direct representation on the SAB, the Council set up a safeguarding adults forum of approximately 30 people who use a range of services, with staff as facilitators. The SAB is accountable to the forum via its sub-groups which are expected to present their work to the forum for advice. The forum is also able to raise issues via the Council's safeguarding lead and work on specific projects, such as awareness campaigns.

Barriers to involvement

Risk

Concerns about risk can block the involvement of people who use services in adult safeguarding. The relationship between managing risk and promoting choice and control is raised frequently, although researchers have found little evidence of the views of people who use services on risk (Stalker, 2003; Mitchell and Glendinning, 2007).

In the consultation on *No secrets*, many people said that they were offered safety, 'often at the expense of other qualities of life, such as dignity, autonomy, independence, family life and self determination' (DH, 2009, p 16).

Risk-averse work practices: Researchers have found that social workers' attitudes to risk vary according to the groups of people who use services. Social workers often saw people who use mental health services as posing a risk to others, but for other groups, including older people and people with disabilities, they were more likely to see risk as a part of normal life, needing to be managed, but having positive potential in terms of self-development; see for example, Stalker (2003), Mitchell and Glendinning (2007) and Barry (2007).

Risk of involvement causing further harm: Pinkney et al (2008) found that social workers in adult protection often wished to engage people who use services more fully, but were concerned about the complex situations for victims of abuse, who might not agree they were at risk of harm or might not want to come forward and be identified.

Failure to recognise groups: Some groups, for example people with mental health problems are unrecognised or 'misrecognised' (that is, where people are seen as lacking value and as inferior) (Lewis, 2009). As a result, they are effectively excluded from individual or strategic involvement. Similarly, women who experience domestic violence may be excluded from consultations because they are seen as unreliable witnesses (Mullender and Hague, 2005). Older people may not be sufficiently heard and enabled to report abuse. The research literature indicates a need for special attention to the issues working against involvement of people in these groups.

Representation: One of the practical challenges for SABs can be achieving fair representation across a wide range of stakeholders. This is reported by Braye et al (2010), who found that SABs were unclear, for example, about whether staff of organisations working for people who use services should sit on SABs on their behalf.

Research shows that even groups who are seldom heard can be involved, given enough investment

‘There is a dilemma on how to get real representation. The problem is how to reach people who are least able to participate.’

Safeguarding Adults Coordinator from the Royal Borough of Kensington and Chelsea

of time and using methods that work for those groups. Involvement of people who use services is beneficial in a wide range of ways – to the people themselves and to the staff who work with them, and can improve services provided.

What supports involvement?

A range of support: Braye et al (2010) call for SABs to set out clear rules of engagement, with resources for participation, and to set standards for empowerment in all aspects of safeguarding. They say that what helps involvement is:

- vision and will, support and leadership from senior staff
- open and honest communication and commitment to a rights-based approach
- creativity and imagination in finding ways of communicating
- resources of time and energy, not just money.

Professional training: Involvement is now a central and invaluable part of social work training and research has shown that it helps social work students become more aware of values such as respect, partnership, equal relationships and expertise based on personal experience (Stevens and Tanner, 2006).

A partnership approach: Social care organisations can support involvement by taking a partnership approach to safeguarding. The Department of Health (2010) has emphasised this need for organisations to take on and understand user and carer engagement and co-production and to develop co-production strategies.

Support for people who use services: The involvement of people who use services in safeguarding needs to be supported in a range of ways, for example: briefing and information on what is expected, debriefing, accessible information and meeting formats, mentoring, semi-formal meetings with a social element, advocacy, and advice on benefits and payment. Several researchers emphasise the importance of involvement skills training and capacity building for people who use services (Levin, 2004; Branfield, 2007).

‘Rushing through a process can leave people feeling anxious. As long as you make sure they are safe, sometimes it is better to do things at their own pace so they feel listened to.’

Safeguarding Adults Development Manager,
Islington Council

Recognise diversity: Factors found to help involve people from diverse communities include:

- time and money to enable people to have access to information and get to meetings
- taking into account the complexities people’s individual lives, and of issues including age, disability, gender, sexual orientation, social class, religion, faith and ethnicity
- finding a range a range of methods to engage people beyond simply inviting them to meetings.

A rights-based approach: Involvement should be supported on the basis that it is a human right. Mind quote the United Nations Convention on the Rights of Persons with Disabilities, ratified by the UK Government in June 2009 and called for a revision of adult safeguarding procedures in the wake of this ratification.

Information: Several of the local authorities involved in sharing good practice for the report described efforts to improve information on safeguarding that is distributed in the community and to reach out to wider parts of the community. In one example, safeguarding staff at the London Borough of Barnet have worked with people who use services to produce an accessible leaflet on what happens after abuse is reported, what social workers do, and on how they work with others on keeping people safe. That leaflet has now been adopted by many local authorities across the country.

Learning from audits of safeguarding processes

No secrets (DH/HO, 2000) stated that agencies should routinely gather information on the outcomes of investigations and users’ views on how well this has worked for them. It is clear from the good practice examples in the report that auditing involvement is working well in terms of learning from experience and changing staff attitudes.

Examples: Changes made following audits

Islington Council revamped its audit tool to ensure they record the evidence of people who use services, carers and advocates.

The Royal Borough of Kensington and Chelsea Safeguarding team have devised a set of questions to ask people who use services directly about their experience of the safeguarding process. This is to find out what is really happening, rather than just asking them to complete a form.

East Sussex County Council has learned that, when a person who uses services has felt unable to attend a safeguarding case conference, it is not enough simply to tell them what happened and give them the notes. Now, the care coordinator visits the person to explain to them the actions arising from the case conference.

‘We don’t ask people what the safeguarding process was like. Instead we ask, “has it improved your quality of life?” This information is used to develop our services and our safeguarding processes.’

Sutton Council Safeguarding lead

Recommendations

- It is not always necessary to have users directly represented on SABs, though some areas have done this. Forums or sub-groups of the SAB can work well if there is good two-way communication and feedback of decisions. Whatever model is used for the SAB, ensure that there is good communication between all elements of the board, so that people who use services can have input into decision making.
- Involve the adult at risk in agreeing safeguarding procedures, with the help of independent advocacy where it is needed. Risk enablement panels or family group conferences can help with the process of discussing and sharing risk-taking decisions. Keep people who use services informed throughout a safeguarding procedure, rather than only communicating the eventual outcome.
- Encourage and train practitioners to record the views of people who use services during safeguarding processes. Having notes that record users’ views accurately is a way of involving them, particularly given that some may not want to be asked to recall distressing experiences later for audit purposes.
- Involve service users in design and carrying out of research, for example by checking draft surveys with a range of stakeholders, ensuring

support for survey participants, and learn from other areas on what type of survey or audit and involvement has worked there.

- Ensure that time and resources are committed to overcoming barriers to involvement, particularly with groups who are seldom heard, for example women experiencing domestic abuse, BME elders, and people with dementia.
- Provide all staff with training in adult safeguarding policies, the provisions of the Mental Capacity Act and other relevant human rights legislation, and make sure that they are aware of local advocacy providers including those providing independent Mental Capacity Advocacy.

Further reading

SCIE’s resources on adult safeguarding
www.scie.org.uk/adults/safeguarding

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