

Safeguarding Adults is everybody's business

Survey report

April 2021



What is Healthwatch Havering?

Healthwatch Havering is the local consumer champion for both health and social care in the London Borough of Havering. Our aim is to give local citizens and communities a stronger voice to influence and challenge how health and social care services are provided for all individuals locally.

We are an independent organisation, established by the Health and Social Care Act 2012, and employ our own staff and involve lay people/volunteers so that we can become the influential and effective voice of the public.

Healthwatch Havering is a Company Limited by Guarantee, managed by three part-time directors, including the Chairman and the Company Secretary, supported by two part-time staff, and by volunteers, both from professional health and social care backgrounds and lay people who have an interest in health or social care issues.

Why is this important to you and your family and friends?

Following the public inquiry into the failings at Mid-Staffordshire Hospital, the Francis report reinforced the importance of the voices of patients and their relatives within the health and social care system.

Healthwatch England is the national organisation which enables the collective views of the people who use NHS and social services to influence national policy, advice and guidance.

Healthwatch Havering is your local organisation, enabling you on behalf of yourself, your family and your friends to ensure views and concerns about the local health and social services are understood.

Your contribution is vital in helping to build a picture of where services are doing well and where they need to be improved. This will help and support the Clinical Commissioning Groups, NHS Services and contractors, and the Local Authority to make sure their services really are designed to meet citizens' needs.

***'You make a living by what you get,
but you make a life by what you give.'***
Winston Churchill

Introduction

All Safeguarding Adults Boards are obliged to prepare a Safeguarding Strategic Plan annually. The Havering Board felt that a survey would assist in the preparation of their plan for 2021.

Thus, in early 2021, the Board asked Healthwatch Havering to survey people living and working in Havering to find out their understanding of “safeguarding” and its implications. Although safeguarding is a key function and responsibility of both Adult Social Care services and Children’s Services, and professionals in those and related professionals such as Healthcare and Education, there was a concern that the general public’s understanding of safeguarding might not be so keen.

Safeguarding issues regularly appear in the media but they are often raised in sensationalised contexts such as the exposures of individuals’ sexual and other misconducts revealed by the #MeToo campaign, or as a result of reports of court cases: there might be a danger that more everyday safeguarding issues pass people by.

It was decided that the survey should be kept relatively brief and designed to highlight headline safeguarding issues - a more detailed understanding could, if necessary, be sought through further surveys in due course or other means, such as focus groups. An invitation was sent to the members of Healthwatch Havering’s Friends Network and to individuals, groups and organisations known to Healthwatch Havering that might have some interest in issues that could have safeguarding issues, such as disability or mental health, with a request that an invitation to participate in the survey be passed to their members and any others who might be interested.

A total of 116 replies was received. Respondents were given the option of remaining anonymous - 69 chose to do so. 52% of respondents were Havering residents, the remainder worked in the borough or had some other connection to it.

The text of the survey is set out in the Appendix, with the data derived from it, omitting individual comments.

Findings

The majority of respondents revealed that they had had some direct involvement with Adult Social Care services, whether for themselves, a relative or a friend. They were asked to indicate what the term “Safeguarding” meant to them (Question 3) - most defined it by using words or phrases suggesting that there is a good, general understanding of what Safeguarding means such as:

- protecting people from harm
- keeping vulnerable people safe
- safety
- risk
- help
- children
- adults

Respondents were asked to indicate what types of abuse they had heard of (Question 4). Perhaps unsurprisingly, “neglect”, “financial”, “psychological”, “physical”, “sexual” and “domestic abuse” were very well known - all were cited by 95% or more of respondents. Less well known were “modern slavery”, “discrimination”, and “self-neglect”; the least well known appeared to be “organisational”, cited by 68% of respondents.

They were also asked to indicate other forms of abuse of which they had heard: 10% of respondents gave suggestions - two mentioned “racial abuse”, one “mental abuse” and one “animal cruelty”¹.

Asked what made them worry about the safety of adults with care and support needs (Question 5), respondents gave a range of concerns, again unsurprisingly including “abused”, “taken advantage of”, “vulnerable” and “support need”.

¹ At first glance, this might appear odd – but there is a growing theory that people who abuse animals move on to abuse, or even kill, people: see for example <https://www.humanesociety.org/resources/animal-cruelty-facts-and-stats> (Humane Society of America)

Most respondents stated (Question 6) that they would report concerns about the safety of someone with care and support needs to Adult Social Care (90%); other agencies that they might contact included the Police (72%) and their GP (27%). Respondents also named a range of other people or agencies that they might contact, including the victim's family (unless implicated in the abuse), a relevant voluntary organisation (such as The Samaritans, Age Concern, Alzheimer's Society and Citizens Advice), the safeguarding lead at the provider organisation and the local mental health team. One respondent, however, commented, "I've tried most of them and no help".

Finally, respondents were asked (Question 7) to indicate the priorities from a range of options for keeping adults with care and support needs safe. The highest priority was accorded to "supporting staff to safeguard adults with care and support needs" (85%), followed by "raising awareness of different types of abuse" (83%), and "mental health" (79%). Other actions with lesser priority were:

- Social isolation - 75%
- Safeguarding in care homes - 73%
- Engaging with the community - 72%
- Learning disabilities - 72%
- Financial abuse - 69%
- Neglect and self-neglect - 68%
- Mental capacity and liberty protection safeguards - 66%
- Physical abuse - 66%
- "Mate" crime (people feigning friendship) - 65%
- Understanding experience of safeguarding - 61%
- Homelessness - 59%
- Working with adults 18-25 years old - 55%
- Keeping safe in hospital - 54%
- Fire safety - 45%

Respondents were also asked to suggest other priorities that might be considered in the Safeguarding Adults plan. Suggestions included:

- Local press and online social networks
- Reporting suspicions to get help
- Adults with special needs live longer than 25. Don't label or set age barriers
- Visit regularly and don't assume all is well
- Support groups and safe places for men who are victims
- Training for family members of people living with dementia
- Provide communal meeting places and transport for people who are isolated or housebound
- Make the process easier
- Ensure proper assessments and checks with carers

Conclusions

It is clear from the survey results that the great majority of respondents had a good or better understanding of the general parameters of safeguarding and were able to identify the key forms that safeguarding needs may take. They were also aware of the key agencies and other possible avenues for reporting safeguarding concerns.

This indicates that there may be a need to reach out to local voluntary organisations and agencies that are not normally thought of as part of the usual safeguarding networks to ensure that they are apprised of the actions to take if they are approached by someone with a safeguarding issue.

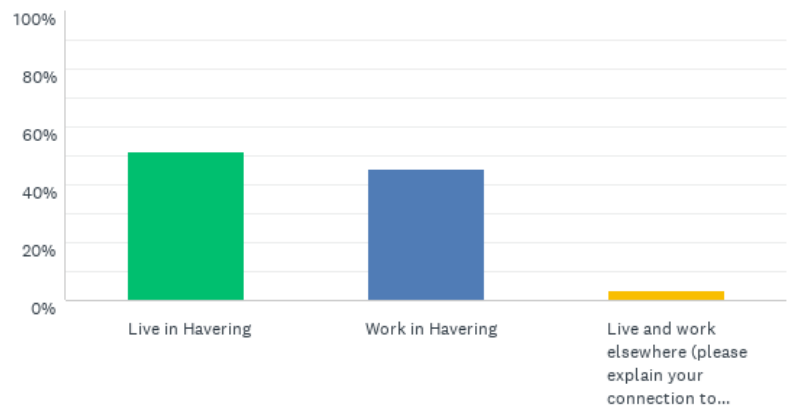
People's priorities for keeping adults safe featured support for those providing safeguarding and raising awareness of the different types of abuse, with a range of types of abuse featuring. Perhaps of greater interest is the list of suggestions for "other priorities" in Question 7, including the suggestion that the need for protection of adults for special needs does not end at the threshold age of 25 and that men, as well as women, can be vulnerable.

Healthwatch Havering thanks all contributors to this survey for sharing their thoughts, which is much appreciated.

Appendix

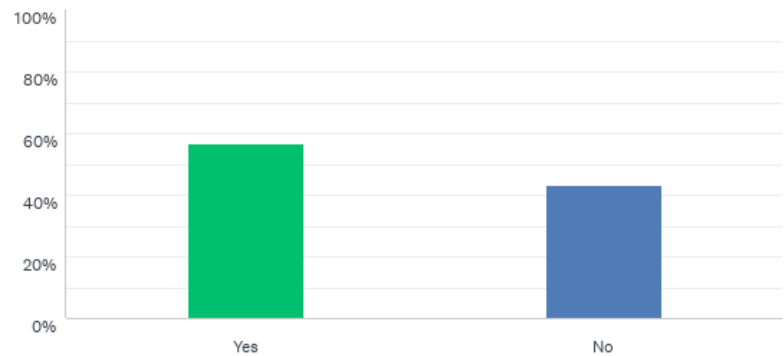
Survey and response - raw data

Q1 - Do you live or work in Havering?



ANSWER CHOICES	RESPONSES	
Live in Havering	51.72%	60
Work in Havering	45.69%	53
Live and work elsewhere (please explain your connection to Havering in the box below)	Responses 3.45%	4
Total Respondents: 116		

Q2 - Have you had any direct involvement with Adult Social Care services? This might have been for yourself, or a relative or friend, and could include arranging home or residential care



ANSWER CHOICES	RESPONSES	
Yes	56.90%	66
No	43.10%	50
TOTAL		116

Q3 - What does the word ‘safeguarding’ mean to you?



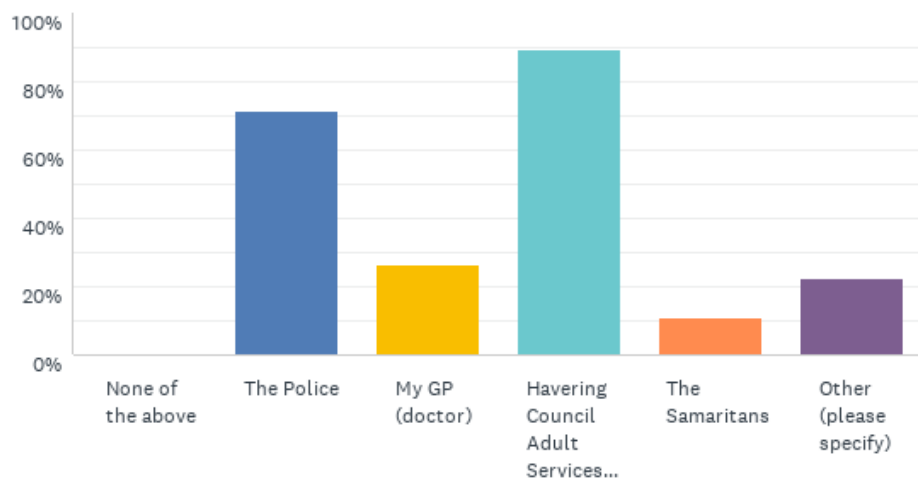
Q4 - What types of abuse have you heard of?



Q5 - What makes you feel worried about the safety of adults with care and support needs? An adult "with care and support needs" is someone who may need extra help in managing their day-to-day lives and being independent. People with care and support need can include someone who has a learning disability, is frail, has mental health needs or has a physical disability

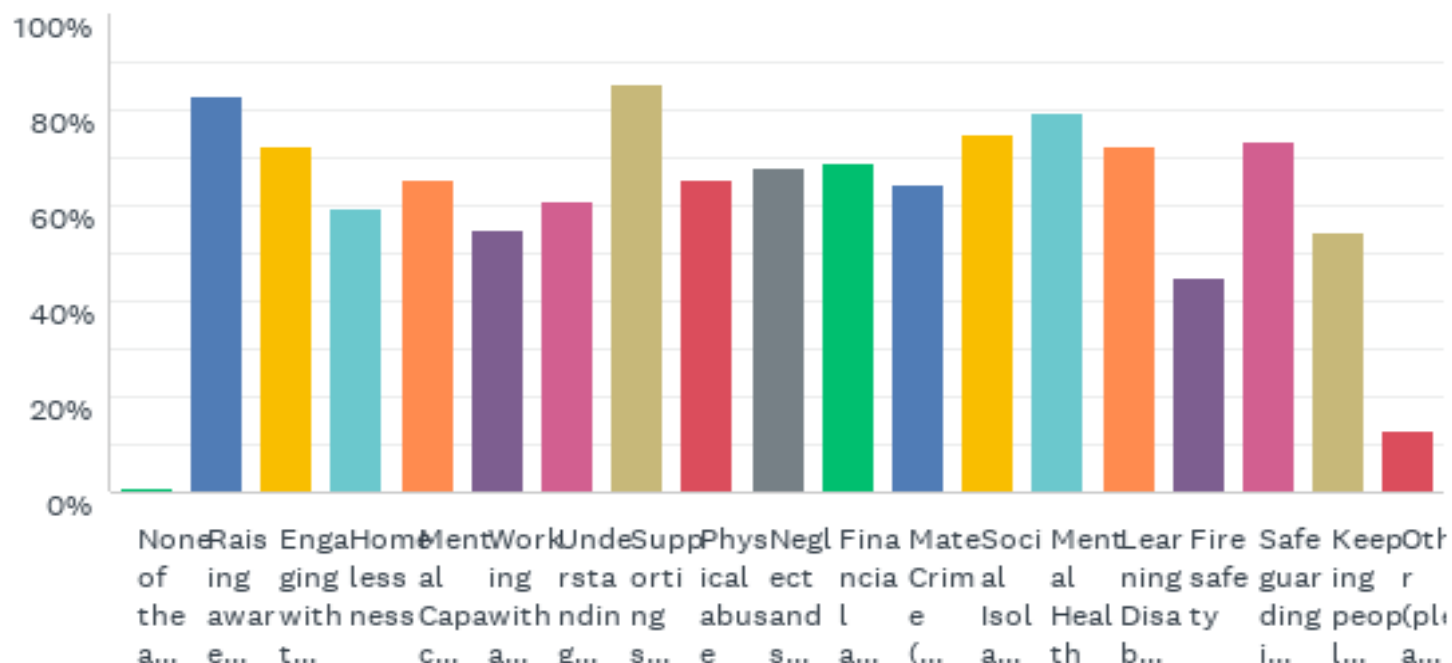
know support needed feel often risk open others properly services support
someone ensure care also adults many needs neglected
may unable people may taken advantage abused
sometimes taken advantage vulnerable abuse vulnerable
protect person able care support need financial will access
Vulnerability fear worry abuse neglect help

Q6 - Who would you contact if you had any concerns that you or someone you know with care and support needs was unsafe?



ANSWER CHOICES	RESPONSES	
None of the above	0.00%	0
The Police	71.55%	83
My GP (doctor)	26.72%	31
Havering Council Adult Services (Social Services)	89.66%	104
The Samaritans	11.21%	13
Other (please specify)	Responses 22.41%	26
Total Respondents: 116		

Q7 - What should we prioritise to help keep adults with care and support needs in the Borough of Havering safe?



ANSWER CHOICES	RESPONSES	
None of the above	0.86%	1
Raising awareness of different types of abuse	82.76%	96
Engaging with the community	72.41%	84
Homelessness	59.48%	69
Mental Capacity and Liberty Protection Safeguards	65.52%	76
Working with adults aged between 18 – 25 years old	55.17%	64
Understanding the person's experience of adult safeguarding	61.21%	71
Supporting staff to safeguard adults with care and support needs	85.34%	99
Physical abuse	65.52%	76
Neglect and self-neglect	68.10%	79
Financial abuse	68.97%	80
Mate Crime (when people are being abused by people pretending to be their friends)	64.66%	75
Social Isolation	75.00%	87
Mental Health	79.31%	92
Learning Disabilities	72.41%	84
Fire safety	44.83%	52
Safeguarding in care homes	73.28%	85
Keeping people safe in hospitals	54.31%	63
Other (please specify)	Responses 12.93%	15
Total Respondents: 116		

Participation in Healthwatch Havering

Local people who have time to spare are welcome to join us as volunteers. We need both people who work in health or social care services, and those who are simply interested in getting the best possible health and social care services for the people of Havering.

Our aim is to develop wide, comprehensive and inclusive involvement in Healthwatch Havering, to allow every individual and organisation of the Havering Community to have a role and a voice at a level they feel appropriate to their personal circumstances.

We are looking for:

Members

This is the key working role. For some, this role will provide an opportunity to help improve an area of health and social care where they, their families or friends have experienced problems or difficulties. Very often a life experience has encouraged people to think about giving something back to the local community or simply personal circumstances now allow individuals to have time to develop themselves. This role will enable people to extend their networks, and can help prepare for college, university or a change in the working life. There is no need for any prior experience in health or social care for this role.

The role provides the face to face contact with the community, listening, helping, signposting, providing advice. It also is part of ensuring the most isolated people within our community have a voice.

Some Members may wish to become **Specialists**, developing and using expertise in a particular area of social care or health services.

Friends Network

Participation in the Healthwatch Havering Friends Network is open to every citizen and organisation that lives or operates within the London Borough of Havering. The Friends Network enables its members to be kept informed of developments in the health and social care system in Havering, to find out about Healthwatch activities and to participate in surveys and events

Interested? Want to know more?



Call us on **01708 303 300**

email enquiries@healthwatchhavering.co.uk

To join the Healthwatch Havering Friends Network,
[click here](#) or contact us as above



*Healthwatch Havering is the operating name of
Havering Healthwatch C.I.C.
A community interest company limited by guarantee
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