

## The shaping of safeguarding

Welcome to this final issue of the journal for this year. The issue comprises two distinct parts – in the first part, we are pleased to present a series of articles from the Social Care Workforce Research Unit at King’s College, London, who, as readers will be aware, in recent years have undertaken a series of studies relating to many different facets of safeguarding. These articles are followed by a number of further articles presenting perspectives on different forms of abuse, predominantly related to elder abuse. We commence with a commentary by the Director of the Unit (Prof Jill Manthorpe) on the adult safeguarding articles; this will be followed by a brief outline of the elder abuse articles.

Stories of the abuse and neglect of adults in care homes and in hospitals, and in their own homes, take turns to leap frog over the problems of health and social care in the public eye. Amid these stories, workforce problems can get overlooked. But the care sector and the NHS face real problems in maintaining staffing adequacy and competence to ensure adult safeguarding is not only reactive. If scandals or “meltdowns” are to be averted, then a sustainable workforce has to be part of the solution. For almost two decades, the work of the Social Care Workforce Research Unit at King’s College, London, has investigated social care work in its many different roles and locations, highlighting the efforts that many local councils and care providers are making in local partnerships to address particular problems of poor care and abuse. For councils who are not the main social care employers but who fund a great deal of social care, this is an intriguing position of influence to occupy. And the safeguarding role of NHS colleagues has increased over this period, addressing some profound questions about the safety of patients in the NHS but also the potential of most staff in the NHS to recognise and respond to mistreatment and neglect.

The first part of journal issue reports some of our Unit’s most recent work. These studies build on research we have undertaken with various partners and for different funders. These have included the UK prevalence study of elder abuse and a series of studies investigating the effectiveness of vetting and barring schemes. We have explored the implications of the move to personal budgets and the implementation of these policies. We have also worked with colleagues in NHS Digital to develop a safeguarding outcome measure and with a broad range of stakeholders in the development of the making safeguarding personal practice framework at the national and local levels. These studies aimed to inform policy and practice, and it has been heartening for us to see them being used to critically engage with adult safeguarding and by those needing an evidence base for decisions.

For much of the last decade, there has been interest in social care at policy levels – initially, its goals and legal structures and more recently in its funding and payment arrangements. Most English councils welcomed the Care Act 2014 since it presented a more coherent legal framework for their adult social care and specific safeguarding responsibilities – these being of assistance to local citizens and to the workforce. The shaping of safeguarding has been undertaken over the past two decades not through direct legislation in England but through laws such as the Care Act and others including the Mental Capacity Act 2005. Some of this “shaping” was in response to age-old problems – such as theft, sexual abuse, assault and misuse of power, but also to new social norms. These norms are reflecting less social tolerance of domestic coercion and control, but the autonomy of adults is highly respected. This continues long-standing dilemmas about the appropriateness, legality and practicality of intrusion in family life. The first two articles in this issue emerge from our hinder or helping study which has explored a variety of perspectives on how social workers, in particular, gain access to adults at risk where this is refused, and if and how they

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are able to talk to the individual in private. In the first article, Martin Stevens and other colleagues debate how concepts such as autonomy and privacy remain powerful in practice. In the second (Manthorpe *et al.*), we report the findings from our national survey seeking to establish the extent of problems of gaining access in such circumstances. While there were limited responses to the national survey, it provides new data about prevalence and sets a baseline for any future survey. As with all our studies, we express our thanks to managers and practitioners who have assisted in acquisition of data and, in many cases, have supported our research through advice, practical assistance and encouragement. The richness of adult safeguarding research in the UK owes much to the support of its professionals.

The shaping of adult safeguarding is nonetheless reflecting wider social changes. In this issue, we report on the connections between adult safeguarding and gambling (Manthorpe, Norrie and Bramley), drawing attention to the widespread social changes in the UK that have led to a substantial rise in gambling participation and to the ways in which people with gambling habits have sometimes turned to vulnerable adults for funds. The new social norm of gambling provides the context to consider how a culture of gambling may have pervaded wider cultures of illicit prize draws, scam lotteries and willingness to enter fake sweepstakes or other invitations extended by false friends. This paper is the first in this journal on gambling, and argues that a public health approach is needed, a theme increasingly found in much safeguarding studies.

There is almost uncanny consensus about the problems of social care – and how vacancy levels and turnover are too high in many parts of the sector, although they vary by the type of job role and by area. This is a sector where staffing abilities such as care and competence matter hugely. Increasingly recruitment is in competition with other similar sectors – such as hotel and retail, and with the NHS. Two particular pressure points are registered managers (of both care homes but also home care) and registered nurses for care homes providing nursing. Migration has been one “solution” to such staffing problems but Brexit is adding a new ingredient to debates over whether this is a sustainable solution, particularly in the longer term. These pressures make it very important not to overlook care at home. Our fourth article in this issue on home care services and pressure ulcers (Manthorpe and Martineau), as analysed in a set of *Adult Serious Case Reviews* or *Safeguarding Adult Reviews*, breaks new ground by considering aspects of competence in this setting. Across the years, pressure ulcers have been seen as visible indications of poor care or neglect often in institutional settings; this paper takes the debate beyond individual culpability to explore the nature of support for home care workers and the adequacy of monitoring and interventions from community-based health care professionals.

Our research indicates that when thinking about safeguarding work, it is helpful to go beyond social care and to take a wider view of systems of care and support. It is timely to do so as NHS England’s strategy, Five Years Forward View, means relationships between services, and the re-design of workforce structures and accountability are being re-negotiated. Service re-design is developing under strategic transformation plans (STPs). A few STPs are currently flagging-up safeguarding as an area of work they need to consider, although responsibilities are as yet unchanged. This “whole system” approach to health and social care delivery, characterising STPs, is not of course a whole system. In adult safeguarding, we have learned that we need to look beyond health and social care and to take account of policing, trading standards, housing and social security – and to partner with different sectors and citizen groups.

Over the past two decades, there have been great changes in adult safeguarding. One of these is not always acknowledged. England is fortunate in decisions made over a decade ago to invest in good workforce data collection in social care – the National Minimum Data Set for Social Care (NMDS-SC) (run by Skills for Care), which celebrates its tenth anniversary in 2017. It provides tailored local information, which can be analysed with other data from local councils, such as their user surveys. Just as importantly, “soft” data from local audits, engagement with citizen forums, provider groups and user organisations can help spot developing trends, but also bring together people who often work on their own or in very small organisations to reflect on common challenges and innovate responses. While we often hear from large care providers or see them on the national news, the reality is that the social care sector is also characterised by small organisations, with few employees, and often working very locally. Their concerns are hugely important to address if the sector is to be sustainable in these difficult financial times. For many

people, social care is their protection from neglect and self-neglect and the mistreatment of others. The NMDS-SC provides good data about this valuable resource. In adult safeguarding research, we must make the most of national data on a variety of topics to inform our studies. This is illustrated in Caroline Green's article on human rights in care homes, where the use of data and information from the Care Quality Commission (the regulator of health and social care in England) has been helping exploration of what human rights mean in practice.

We hope that you enjoy the Unit's articles in this issue and would be pleased to hear comments or respond to queries. The journal has been a substantial resource to us over the years; I am able to remember its first issue, bringing fresh ideas, good evidence and sound analysis to the safeguarding community. We are proud to present our work to its readers.

The following articles in this issue present recent work on different facets of abuse, relating to mainly elder abuse. We commence with a paper by Louise McCarthy and colleagues, which reports on a systematic review on screening tools used in elder abuse. The review considered 11 different screening tools (although 3 were revised/modified versions of tools). The tools varied in lengths and in types of elder abuse detected – the settings in which they were tested out also varied, as did methods used to evaluate the effectiveness of the tools. The findings of the review are discussed and some suggestions made about future work in the area of screening for abuse. The second article is by Ana Santos and colleagues from Portugal (Lisbon and Porto), and considers the issue of assessment of psychological abuse of older people with a comparison of two different thresholds for abuse indicators and effects of these different measures on the prevalence of psychological elder abuse and associated characteristics. The findings illustrate how operational definitions of abuse can impact on evidence obtained from research and the need to closely analyse the effect of using different criteria to define abuse on the outcomes of studies.

The third paper in this section of the issue, by Gillian Dalley and colleagues from Brunel and Cardiff Universities, reports on an exploratory study of the issue of financial abuse of adults who lack capacity (many of whom are older people), using a variety of different methods. These included a review of safeguarding adult statistics; analysis of court case findings; classification of types of financial abuse, victims and perpetrators; and qualitative exploration of professional views of the nature of financial abuse of those lacking mental capacity and consideration of policy implications. The study demonstrates the lack of both statistical data available about financial abuse and the outcomes of official investigations into reported cases; this clearly limits analysis and understanding of this aspect of mistreatment.

The following article in the issue is by Marie Beaulieu and colleagues from Quebec in Canada (from the University of Sherbrooke and Montreal Police Department). The paper reports on the development and evaluation of an integrated inter-agency approach, which was embedded within a police intervention model concerning elder abuse. This action research project developed, tested and implemented the police intervention model, including inter-agency practice. Barriers and facilitators to the success of the model are identified and suggestions made about future work in this area, and the importance of inter-professional collaboration (and evaluation of this) is underlined in the paper.

The final article is by Independent Researcher, Steve Moore, and discusses aspects of commissioning and regulatory practices within the care home sector that have relevance for safeguarding and prevention. The paper explains how theoretical perspectives from commissioning and regulation could be applied to the oversight of care homes and lead to possible strategies from which preventative strategies can be developed. Several approaches to improve prevention of elder abuse in care homes are outlined in the paper.

We hope that this variety of articles will provide much food for thought for readers and will add to your interest in adult safeguarding (and elder abuse). As ever, we are keen to showcase work that is happening in this broad area and to encourage contributions. If anyone has any ideas for papers for future issues and wishes to discuss these further, please do get in touch with one of the editors (Margaret Flynn and Bridget Penhale). We are also grateful to our Guest Editor, Jill Manthorpe, for providing the commentary for this issue. Enjoy the remainder of 2017, and we look forward to welcoming you to next year's volume in our twentieth anniversary year!