

Principles of safeguarding and protection in health and social care essay sample

[Literature](#), [Russian Literature](#)



Outcome 1: Know how to recognise signs of abuse

1. 1 Define the following types of abuse.

Physical abuse:- Physical abuse is defined as any physical force or violence that results in bodily injury, pain, or impairment. It includes assault, battery, and inappropriate restraint.

Sexual abuse:- Sexual abuse refers to any action that pressures or coerces someone to do something sexually they don't want to do. . It can also refer to behaviour that impacts a person's ability to control their sexual activity or the circumstances in which sexual activity occurs.

Emotional/Psychological abuse:- Emotional and Psychological abuse includes a range of non-physical controlling behaviours that cause emotional damage and undermine a person's sense of well-being.

Financial abuse:- The misuse of a person's funds and assets; obtaining property and funds without his/her knowledge and full consent, or in the case of an elderly person who is not competent, not in his/her best interests.

Institutional abuse:- Institutional abuse is the maltreatment of a person (often children or older adults) from a system of power. This can range from acts similar to home-based child abuse, such as neglect, physical and sexual abuse, and hunger, to the effects of assistance programs working below acceptable service standards, or relying on harsh or unfair ways to modify behaviour.

Self neglect:- Self neglect is unlike other forms of abuse which relate circumstances where there is a person other than the adult at risk who is causing significant harm to themselves.

Neglect by others:- Neglect is the failure of any person who has responsibility for the charge, care or custody of an adult at risk to provide the amount and type of care that a reasonable person would be expected to provide.

1. 2 Identify the signs/or symptoms associated with each type of abuse.

Physical abuse

SIGNS

SYMPTOMS

Unexplained cuts, bruises, scalds, burns, bruises and scratches. Injuries and wounds in concealed places.

Appearing sedated i. e. over use of medication

Withdrawn and quiet

Nervous, Tearful, Anxious

Unwilling to undress/ show areas such as sacrum, arms, torso. Unexplained pain i. e. with holding of medication

Sexual abuse

SIGNS

SYMPTOMS

Vaginal/rectal bleeding/discharge/infections

Sores in genital areas

Bruising – especially on the inner thighs

Bite marks, scratches to breasts, face or neck

Difficulty in sitting/walking due to discomfort in the genital area Torn, blood stained clothing

Unexplained problems with catheters

Sudden onset of confusion

Pain, itching

Withdrawn

Nightmares/night terrors

Depression

Changes in behaviour

Fear of making decisions

Obsession with sexual matters

Loss of weight

Emotional/Psychological abuse

SIGNS

SYMPTOMS

Change in body language – avoiding eye contact

Changes in appearance – unkempt

Unexplained changes in behaviour

Withdrawn and depressed

Frightened, anxious, aggressive

Fear of being wrong

Loss of weight

Financial abuse

SIGNS

SYMPTOMS

Lack of money for basic necessities such as food and heating
Missing property such as ornaments, jewellery and family heir looms
Unexplained withdrawals from bank accounts

Inability to explain what is happening to their income

Become secretive

May self neglect due to lack of funds

Fearful of spending money

Anxious, depressed, emotionally unstable when abuser is mentioned

Institutional abuse

treating adults like children

arbitrary decision making by staff group, service or organisation strict,

regimented or inflexible routines or schedules for daily activities such as

meal times, bed / awakening times, bathing / washing, going to the toilet

lack of choice or options, such as food and drink, dress, possessions, daily

activities and social activities lack of privacy, dignity, choice or respect for people as individuals unsafe or unhygienic environment

lack of provision for dress, diet or religious observance in accordance with an individual's belief or cultural background withdrawing people from individually valued community or family contact

Self neglect

SIGNS

SYMPTOMS

Absence of required aids, canes and walkers

Inappropriate clothing

skin sores

poor hygiene

Confusion

Dehydration

Malnourishment

Under or over medication

Neglect by others

SIGNS

SYMPTOMS

Weight loss

Deterioration in appearance or personal hygiene

Inadequate food, drink or medical care

Bed sores, rashes

Unhygienic and unsafe environment

Changes in behaviour

Depression

No interest in life

Lack of social interaction/stimulation

Lethargy

1. 3 Describe factors that may contribute to an individual being more vulnerable to abuse. The client might have a mental disability such as; dementia or autism which might make it harder for them to convey to the care worker if they are being abused or ask for help due to their diminished mental capacity. If the individual is secluded or isolated or vulnerable this can make it easier for them to be vulnerable to abuse, especially self neglect as they might feel that they are not worthy or not care anymore about their overall health and wellbeing. The abuser, in this case the care worker may either lack the appropriate training or they might be abusing their power. Sometimes personal issues have a part to play which could include the carer/abuser being stressed or having a history of abuse and continuing the cycle. Outcome 2: Know how to respond to suspected or alleged abuse

2. 1 Explain the actions to take if there are suspicious that an individual is being abused. If any suspicions of abuse exist, the care worker or individual who suspects its occurrence must report their concerns to the appropriate individuals such as; the care coordinator and line manager. Record the facts on appropriate paperwork, listen do not judge the complainant, stay calm and collected and do not tamper with evidence. 2. 2 Explain the actions to take if an individual alleges that they are being abused. The company or agency that the care worker is employed at should have policies and procedures already in place which need to be followed by their employees in situations where allegations of abuse are brought to light.

Most companies' policies and procedures, would state that the employee must report any abuse allegations to the appropriate person(s) within the company/agency, record the facts on appropriate paperwork, listen not judge the complainant, always establish what it is that has occurred and report any suspicions to the appropriate manager, reassuring the employee at all times and take every allegation seriously, always date the paperwork and have it signed by any witness (if any), take photographs of evidence if possible. 2. 3 Identify ways to ensure that evidence of abuse is preserved. Always record the facts immediately on the appropriate paperwork. Do not tamper with the individual's clothing or bedding.

Preserving any first aid items that are used.

Not tampering with the area of abuse; i. e. if it occurred in the client's living room, the care worker should leave the area as they found it and ensure that no one else enters there. Report evidence immediately to your line manager.

Do not tamper with any evidence collected or given to the appropriate person(s) within the company. Have an efficient storage system to ensure that all evidence is kept safe and remains confidential.

Outcome 3: Understand the national and local context of safeguarding and protection from abuse 3. 1 Identify national policies and local systems that relate to safeguarding and protection from abuse. National Policies:- Safeguarding Vulnerable Groups Act (2006), the Vetting and Barring Scheme run by the Independent Safeguarding Authority (ISA), Disclosure and Barring Service, Human Rights Act (1998).

Local Systems:- Safeguarding Adults Boards, Safeguarding policies and procedure for vulnerable adults.

3. 2 Explain the roles of different agencies in safeguarding and protecting individuals from abuse. Safeguarding Adults Boards:- These bring together various local agencies such as; MIND, the police, housing teams and advocacy groups; that work with vulnerable adults and enable them to effectively share information and monitor their work.

Police:- The police are expected to safeguard vulnerable adults by, investigating all reports of vulnerable adult abuse and to uphold and protect the rights of vulnerable adults.

Care Quality Commission (CQC):- The CQC's role is to monitor and provide guidance on what all health and social care providers must do in order to safeguard vulnerable adults from abuse this includes; the development of

procedure and policies used in order to prevent vulnerable adults from being abused and monitoring the correct use of said policies and procedures in all health and social care settings. 3. 3 Identify reports into serious failures to protect individuals from abuse. A report about Castlebeck Care Ltd which failed to ensure that the vulnerable individuals living at Winterbourne View hospital were adequately protected from any risk or harm, including the risks of unsafe practices that were carried by its own staff. Individuals at Winterbourne View were pinned down, slapped, doused in cold water and repeatedly taunted and bullied by staff. Castlebeck care Ltd neglected to inform the CQC of these incidents of abuse, injuries to individuals and of occasions when individuals had gone missing, even after some employees had informed the management of their concerns.

A report into the murder of Steven Hoskin, a young man with learning difficulties who was abused and murdered in 2006. Not only was pushed over the railway and had subsequently fallen from a great height, it was found that he had consumed some paracetamol tablets, he was intoxicated and had sustained recent cigarette burns. In addition to this, he suffered appalling treatment from his abusers who took over his bed sit and he had visible neck bruising as a result of being hauled around his home using his pet dog's lead, he was also found to have marks of footprints on the backs of his hands. 3. 4 Identify sources of information and advice about your own role in safeguarding and protecting individuals from abuse. Company's policies and procedures on safeguarding

Manager, colleagues

Training and advice from training centres

The internet

Books

Care Quality Commission

Independent Safeguarding Authority

Social Services

Outcome 4: Understand ways to reduce the likelihood of abuse 4. 1 Explain how the likelihood of abuse may be reduced by;

Working with person centred values:- If person centred values are taken into account when offering support to individuals, the likelihood of abuse occurring will be diminished; as all the staff will be working in the same way and will feel ashamed if they abuse their clients because of the way that they have been taught to work. If an individual is expected to have a say in what they want and make their opinions be the centre of any decision, this will make it unlikely for abuse to occur as the individual will know what suits them best and will not get so frustrated with the level of support being offered to them as it would be tailored to suit them.

Encouraging active participation:- Ensuring the active participation of the individual in the daily activities that they require support with such as; choosing their meal of choice will not only foster their independence, it will also prevent abuse from occurring as the individual will not be afraid to voice their displeasure with anything if they are routinely being encouraged to do so.

Promoting choice and rights:- Promoting the individual's choice and rights will decrease the incidences of abuse occurring as they will have a clear understanding that they should be allowed to make their own choices like; what they should wear and the care workers should also support them and ensure that they have the same rights as anyone else. 4. 2 Explain the importance of an accessible complaints procedure for reducing the likelihood of abuse. An accessible complaints procedure resolves complaint more quickly as the complainant feels that their complaint is being taken seriously and they that have full access to how to make a complaint, the steps that need to be taken when the complaint is investigated further and provides flexibility in relation to target response times. This sets up an open culture of making sure that abuse will not be tolerated in any form and it also encourages the complainant not to accept any form of abuse occurring.

Outcome 5: Know how to recognise and report unsafe practices 5. 1 Describe unsafe practices that may affect the well being of individuals. Unsanitary conditions can arise as a result of care workers neglecting their client, this is dangerous as it can spread infection as cross contamination can occur and pose a threat to the client's well-being.

Not carrying out adequate risk assessments in service user's residences can cause the service user to injure themselves which will cause a problem if no one is around to call for or offer help to the individual.

Instances where the service user is left in their soiled bed linen for a prolonged period of time, ignoring or not listening to them in general or to

their concerns also amounts to abuse, as the care worker is neglecting the service user.

Marks on the service user's body and complaints not being taken seriously and can put them at more danger, harm and be at risk of abuse. 5. 2 Explain the actions to take if unsafe practices have been identified. If unsafe practices have been identified, the care worker must follow their company's whistle-blowing procedure which should be made available to them in their care worker handbook; and report the instances of unsafe practices to report to the appropriate person(s) i. e. my manager immediately or if it involves them then to another another appropriate individual within the company.

5. 3 Describe the action to take if suspected abuse or unsafe practices have been reported but nothing has been done in response. In the event when suspected abuse or unsafe practices have been reported but nothing has been done in response to them or if the complaint involves the care worker's immediate manager then they should escalate the matter and report it to the next level manager, then to the social worker and safeguarding team and to the care quality commission and even to the police depending on the response received.