

# Safeguarding Leads Forum

## Wednesday 20<sup>th</sup> December 2023

### AGENDA:

1. Adopting a trauma informed approach to adult safeguarding
2. Introducing a new adult vulnerability factors alert on EMIS in Southwark
3. Launch of the Southwark Safeguarding Children's Partnership (SSCP)'s Neglect Strategy
  4. Some new posters for your practices
  5. Primary Care Safeguarding Adult Review roll-out
  6. Open discussion



# Safeguarding Leads Forum

## Wednesday 20<sup>th</sup> December 2023

# Adopting a Trauma Informed Approach to (Adult) Safeguarding

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With acknowledgements and thanks to Trish Stewart, Associate Director of Safeguarding, Central London  
Community Healthcare NHS Trust



# A trauma-informed approach takes into account:

- Legal duties
- Impact of trauma and adversity
- Judging situations
- Building resilience to safeguard ourselves and others
- Valuing partnerships and personalisation



# Defining Trauma

- Trauma results from an event, series of events, or set of circumstances that is experienced by an individual as harmful or life threatening.
- While unique to the individual, generally the experience of trauma can cause lasting adverse effects, limiting the ability to function and achieve mental, physical, social, emotional or spiritual well-being.

(Office for Health Improvement and Disparities, 2022)



# Defining Trauma



# Adverse community Environments

- **Poverty**
- **Discrimination**
- **Community disruption**
- **Poor housing**
- **Violence**
- **Lack of opportunity /social capital**





# Adverse Childhood Experiences

What are Adverse Childhood Experiences (ACEs)?  
ACEs are potentially traumatic events that occur in a child's life:



Physical Abuse



Emotional Abuse



Sexual Abuse



Domestic Violence



Parental Substance Abuse



Mental Illness

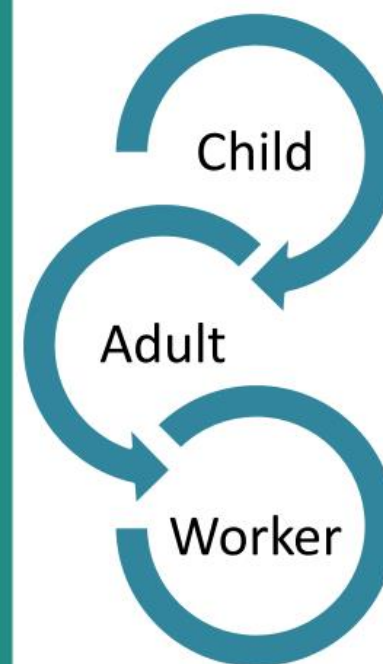


Suicide or Death



Crime or Imprisoned Family

Causing lifelong medical, mental & social suffering



Psychiatric inpatients – childhood sexual abuse **85%**

Borderline PD – sexual abuse in childhood **75%**

Experiences of DV in women - abuse in childhood **46%**

(Read et al., 2005; Merza et al., 2018)





## People abused as children

- **9.3x** more likely to develop psychosis
- 3 kinds of abuse – **18x** more likely to be psychotic
- 5 types of abuse – **193x** more likely

(Shevlin et al., 2007)

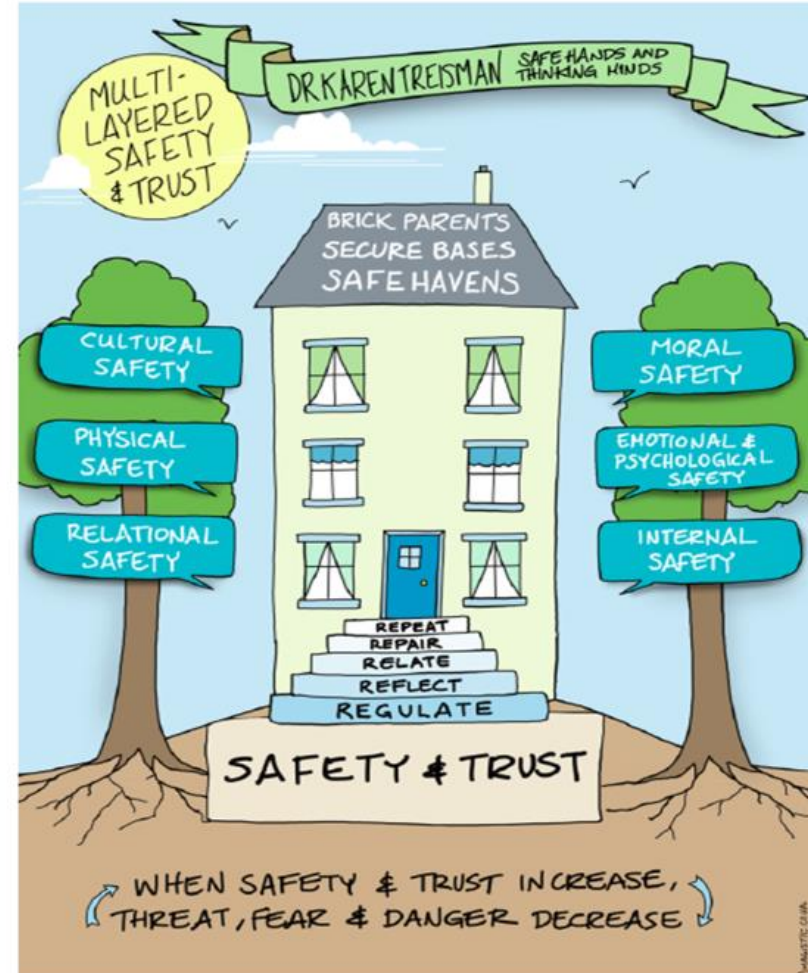
# Working definition of trauma-informed practice

- **Recognise the signs, symptoms and widespread impact of trauma**
  - trauma can negatively impact on the ability to feel safe or develop trusting relationships with health and care services and their staff.
  - Trauma can impact on behaviour, reactions to triggering experiences, and a person's vulnerability to abuse, neglect and/or self-neglect
- **Understand wider context**
  - Acknowledge the need to see beyond an individual's presenting behaviours and to ask,
    - 'What does this person need?' rather than 'What is wrong with this person?'
- **Bring down barriers to care**
  - The purpose of trauma-informed practice is not to treat trauma-related difficulties, which is the role of trauma-specialist services and practitioners. Instead, it seeks to address the barriers that people affected by trauma can experience when accessing health and care services.







# Being Trauma Informed to Safeguard

- Safety
- Trust
- Choice
- Collaboration
- Empowerment
- Cultural consideration



acknowledge that people who have experienced or are experiencing trauma may feel powerless to control what happens to them, isolated by their experiences and have feelings of low self-worth



<p>Surround myself with barbed wire</p> 	<p>Go into attack mode like a hungry shark</p> 	<p>Go into my own protective bubble</p> 	<p>Put on my bulletproof vest</p> 	<p>Retreat into my tortoise shell</p> 
<p>Make myself small/invisible</p> 	<p>Hide away in the fog</p> 	<p>Freeze on the spot</p> 	<p>Whizz around like a dart</p> 	<p>Paint on a smile like a clown</p> 
<p>Put up my spikes like a hedgehog</p> 	<p>Zoom away like a speeding car</p> 	<p>Push people away like an opposing magnet</p> 	<p>Think in black and white</p> 	<p>What else?</p> 





# Hoarding and self-neglect are strongly linked to previous trauma

- [Keith's story: a personal and touching film about hoarding - YouTube](#)





# The 3 E's of a trauma informed approach

- **EVENTS** – many different circumstances that are traumatic, may be single event, happen repeatedly, or some may live with a high level of toxic stress that is traumatising
- **EXPERIENCE** of events - Each person may experience events or circumstances in their lives differently.
  - How an event is experienced may also be linked to other factors such as a person's cultural beliefs, availability of social supports, and developmental stage.
  - Here are some questions we can ask ourselves with humility:
    - What are my own beliefs and cultural values?
    - How do these play into how I understand what another person is going through?
    - What questions can I ask to better understand what they're experiencing and not impose my way of viewing things?
  - We can accept that we may never fully know other's experiences but by staying curious and respectful we are able to build stronger relationships and be more responsive. Relationship building focused on genuineness and trust is the foundation for practicing with compassion and facilitating healing.
- **EFFECT** of events - The effects of lived experiences or circumstances that may be traumatic may be immediately apparent or may be invisible, insidious, or have a delayed onset.

## The Four Rs of Trauma-Informed Care



This figure is adapted from: Substance Abuse and Mental Health Services Administration. (2014). SAMHSA's concept of trauma and Guidance for a trauma-informed approach. HHS publication no. (SMA) 14-4884. Rockville, MD: Substance Abuse and Mental Health Services Administration.

# Ask the Questions:

How are things  
at home?

Are you worried or  
fearful about anything  
or anyone?

Do you feel safe?



# Make reasonable adjustments

Approach with understanding. Bad experiences in the past may harbour distrust and trigger confrontational behaviour. Take time to listen, gain trust, create a safe space.





# The cost of caring?

Staff in public services work with service users who may have complex health and social care needs

Prolonged exposure to the trauma of others can cause compassion fatigue.

This places workers at greater risk of psychological, and emotional stress



# What is Compassion Fatigue?

"Compassion Fatigue is a state experienced by those helping people; it is an extreme state of tension and preoccupation with the suffering of those being helped, to the degree that it can create a secondary traumatic stress for the helper."

[Dr. Charles Figley 1995](#)



## Compassion fatigue and burnout:

Emotional and physical exhaustion leading to a diminished capacity to connect with, empathise and feel compassion for others.

Often described as the negative cost of caring.

This is when we lose the balance between caring for ourselves and caring for others and these two elements are not aligned.



## **Secondary or vicarious trauma:**

Being traumatised by the experiences of others, for example dreaming about or not being able to stop thinking about the stories people have told us.



## Re-traumatising:

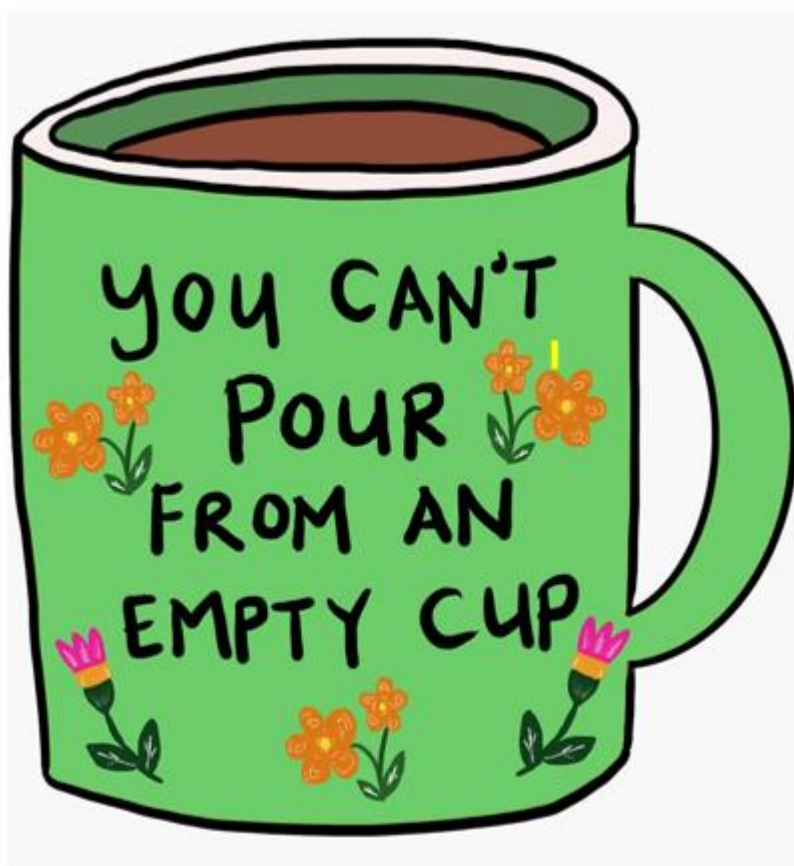
Everyone will have had their own experiences of difficulty and adversity within their lives, and these experiences will vary among professionals.

Working with individuals who have experienced significant trauma and adversity in their lives, some of which may at times mirror some of our own experiences or hold similarities, can be understandably triggering at times.

As staff we need appropriate support and self-awareness to care for ourselves and keep ourselves safe within this work.



# Compassion Fatigue

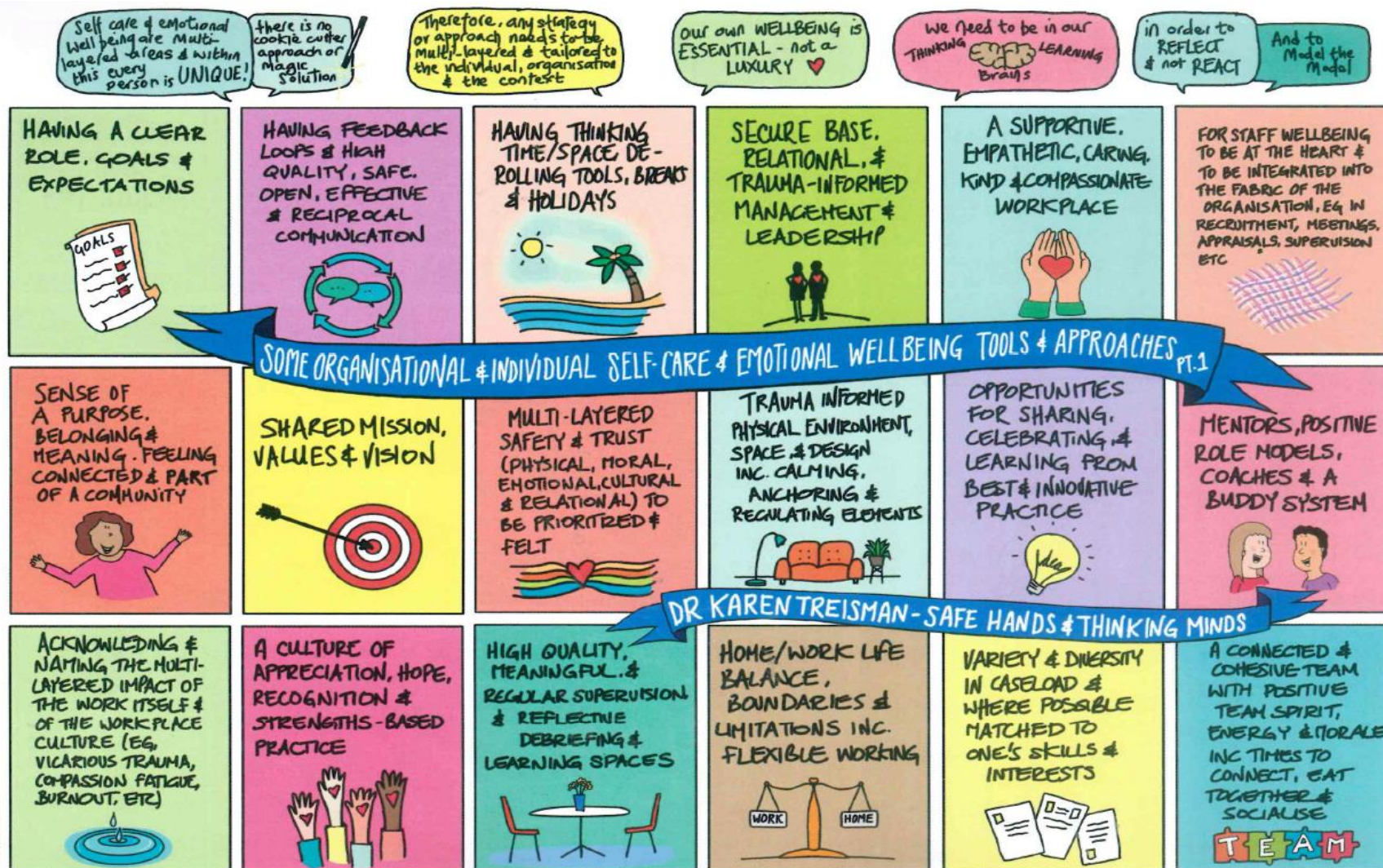


## What keeps us safe?

- Recognising our role
- Personal space
- Supervision
- Boundaries














# Trauma-Informed Approach – Work





# Trauma-Informed Approach –Self

**SOME ORGANISATIONAL & INDIVIDUAL SELF-CARE & EMOTIONAL WELLBEING TOOLS & APPROACHES PT.2**

<p>MINDFULNESS YOGA, STRETCHING, BREATHING &amp; RELAXATION EXERCISES &amp; OPPORTUNITIES</p> 	<p>EMOTIONAL, COGNITIVE NURTURING, GROUNDING, NOURISHING, REGULATING, &amp; SENSORY TOOLS</p> 	<p>BRAIN BREAKS &amp; MIND SPAS (EG CALM SPACE, MINDFUL WALKS, ETC)</p> 	<p>RE-CONNECTING WITH THE REASONS &amp; MOTIVATORS FOR DOING THE WORK &amp; REFLECTING ON THE JOURNEY WHICH HAS ALREADY BEEN TAKEN</p> 	<p>BEING SELF-AWARE, CURIOUS &amp; REFLECTING ON ONE'S OWN EXPERIENCES, VALUES, FEELINGS, HOTSPOTS, HOPES, MOTIVATIONS, &amp; TRIGGERS</p> 	<p>INTEGRATING MOMENTS &amp; AN ATMOSPHERE OF FUN, JOY, LAUGHTER &amp; PLAYFULNESS</p> 	<p>HAVING CREATIVE, PHYSICAL, SOCIAL, ENVIRONMENTAL, AND/OR SPIRITUAL OUTLETS</p> 
<p>AN ONGOING REFLECTION ON PAST OBSTACLES FACED &amp; WHAT INDIVIDUAL/ FAMILY/TEAM/ ORGANISATIONAL SKILLS, RESOURCES &amp; STRENGTHS WERE USED TO NAVIGATE &amp; OVERCOME THESE.</p> 	<p>HAVING &amp; REVIEWING AN INDIVIDUAL SELF- CARE &amp; WELLNESS PLAN &amp; PLEDGE</p> 	<p>SOCIAL ACTION &amp; ACTIVISM</p> 	<p>HAVING A POSITIVE SUPPORT NETWORK &amp; COMMUNITY INCLUDING ONE'S OWN LIFE INSPIRERS &amp; CHEER LEADERS</p> 	<p>REFLECTING ON ONE'S OWN RESILIENCY, SKILLS SURVIVORSHIP &amp; POSITIVE QUALITIES</p> 	<p>OPPORTUNITIES FOR SKILL &amp; KNOWLEDGE DEVELOPMENT</p> 	<p>FEELING HEARD, SEEN, CARED FOR, NOTICED, VALUED, APPRECIATED, RESPECTED &amp; LISTENED TO.</p> 
<p>SEEING, NOTICING, CELEBRATING &amp; MAGNIFYING THE SPARKLE MOMENTS, THE CHANGES MADE, WHAT IS GOING WELL, &amp; THE JOURNEY TRAVELLED (EG SKYSCRAPER, TREASURE BOX, VISION BOARD, ETC)</p> 	<p>POSITIVE AFFIRMATIONS A GRATITUDE LIST, POSITIVE SELF-TALK, INSPIRATIONAL QUOTES, POSITIVE MANTRAS, WELL- BEING MESSAGES ETC</p> 	<p>ACCESS TO WELLBEING ACTIVITIES &amp; RESOURCES, (EG BIKES, WELL-BEING LUNCHES, GYM, COUNSELLING)</p> 	<p>INTEGRATING DAILY FEEL-GOOD REMINDERS (EG MUG, HAND CREAM, SCREEN SAVER, RINGTONE, WELLBEING LANYARD ETC)</p> 	<p>ACKNOWLEDGEMENT OF BEING HUMAN, BEING ABLE TO SHOW VULNERABILITY, &amp; TO FEEL ABLE TO LEARN FROM "MISTAKES"</p> 	<p>SUPPORT STRUCTURE EG PARENTAL LEAVE/ SABBATICALS/WELL- BEING COMMITTEE, WELLBEING CHAMPIONS ETC</p> 	<p>WHAT ELSE ???</p>

**DR KAREN TREISMAN - SAFE HANDS & THINKING MINDS**



## Adopting a Trauma-Informed Approach to Safeguarding Adults

### Reflection

- Language
- Behaviours
- Actions
- Reactions
- Being Human
- Kindness



# New Adult Vulnerability Factors Alert on EMIS

Piloted here in Southwark 2019 onwards in a couple of practices

Re-developed with SNOMED codes to offer to all practices in South East London ICB

Collaboration with Named GPs across SEL ICB and Ardens

Designed to highlight codes in pt's history considered adversity factors (both current and historic) which may make them more vulnerable to mental health difficulties, abuse, neglect, and/or self-neglect.

Not designed to create any more work but to help a clinician think in a more trauma-informed way whilst consulting

The screenshot displays a software interface with a light blue header and a white main area. A prominent alert box is shown, containing the following text:

- May be VULNERABLE due to illness or circumstances.**
- Consider making routine enquiries and/or reasonable adjustments. Click to add data using a template.
- Clinical code of concern: Senile dementia 08-Aug-2023
- Alert provided by [www.ardens.org.uk](http://www.ardens.org.uk)

Below this alert, a list of other alerts is visible, each with a yellow triangle icon and a blue circular icon with a question mark:

- Eligible for Weight Management ES
- May be VULNERABLE due to illness...
- Seasonal Flu Vacc recommended
- COVID-19: Eligible for seasonal va...
- COPD Review Overdue
- Dementia Care Plan QOF
- Notes not Summarised
- Patient on QOF Registers

# Searching for soft indicators of neglect or self-neglect

Often more difficult to spot

Alert tool will flag if someone has a long term condition and has not had their medication issued in the last year

May be **VULNERABLE** due to having a long term condition and have not had medication issued in the last year.

Consider neglect or self-neglect and take appropriate action to discuss with patient and/or carer. Click to add vulnerability data using a template.

Alert provided by [www.ardens.org.uk](http://www.ardens.org.uk)

BR

- ▲ Eligible for Weight Management ES
- ▲ May be **VULNERABLE** due to havi...
- ▲ Seasonal Flu Vacc recommended
- ▲ COVID-19: Eligible for seasonal va...
- ▲ COPD Review Overdue
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## Template Runner

### Vulnerability

If you wish to put your patient on your practice Vulnerable Adult register, please select:

Vulnerable Adult (code) - > "Vulnerable adult" will be added to the patient's problem list. Please make it significant and active -> add to practice vulnerable adult register and flag on registration details to allow staff and clinicians to make reasonable adjustments eg

- Double appointments
- Follow up call if did not attend/was not brought
- Flexible policy if late to appointment
- Specialised communication methods

- |  |      |                      |                   |
|--|------|----------------------|-------------------|
| <input type="checkbox"/> Vulnerable adult  | Text | <input type="text"/> | No previous entry |
| <input type="checkbox"/> Requires reasonable adjustment for health and care access (Equality Act 2010) | Text | <input type="text"/> | No previous entry |

### Safeguarding

If you have identified a current safeguarding concern through the course of your routine enquiry, please consider/code:

- |   |      |  |                   |
|---|------|--|-------------------|
| <input type="checkbox"/> Adult safeguarding concern           | Text | <input type="text"/>   | No previous entry |
| <input type="checkbox"/> Referral to safeguarding adults team | Text | <input type="text" value="completed an adult safeguarding concern form and sent to adult social care."/> | No previous entry |
| <input type="checkbox"/> Victim of domestic abuse             | Text | <input type="text"/>   | No previous entry |

If there is no adult safeguarding concern then there is no need to code.

Think family and consider if there are other vulnerable adults or children in the household who may be affected > make a children's safeguarding referral alongside, if appropriate, for any dependent children.

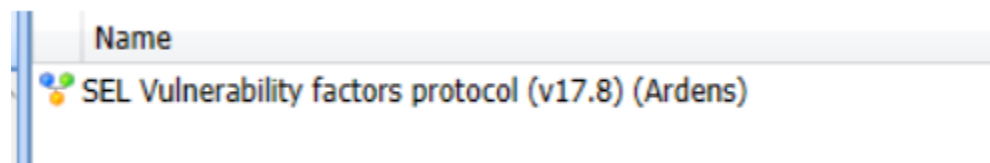
### Online visibility

Consider removal of online records visibility if appropriate.

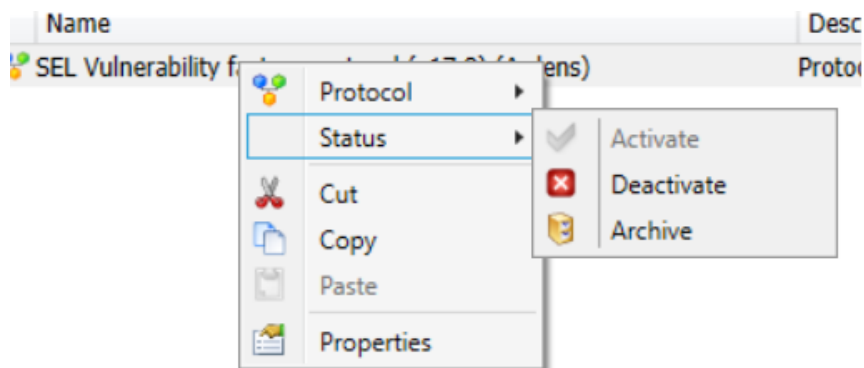


# Making the alert active on your practice systems:

- Use the search function in Resource Publisher to identify the alert



- Right click and then activate (it will not be greyed out):





# Cuckooing Raising Awareness in Southwark

Cuckooing is affecting our most vulnerable residents. It happens when a person's home is taken over for illegal activities. By being alert and reporting any suspicions to the authorities, we can collectively safeguard people who are falling victim to this harmful practice.

Scan the below  
QR code to  
learn more.



Southwark  
Council  
southwark.gov.uk

