



Macc webinar: Safeguarding in the Community

Date of webinar: 30 April 2020

Q&A

Q: Is there free e-learning on children/young people safeguarding too?

A: Yes, Manchester Safeguarding Partnership offers free children and adult safeguarding related elearning to all partner agencies through Virtual College.

<https://manchesterscb.virtual-college.co.uk>

Q: Does care and support include accessing drug/alc and mental health services or is it more social services type services?

A: Mostly yes... when substance misuse has resulted in physical and/or mental health needs then Manchester's Substance Misuse team can work with Mcr citizens who want support to reduce or stop their substance misuse. Probably not everyone's drug and alcohol support will meet 'care and support' - it'd depend on the situation (e.g. someone attending AA meetings may not have any other 'care and support' needs - would they want/need a social worker to offer a risk assessment/support plan?)

Q: If an adult is not receiving formal support or care but either informal care or not any maybe they fall short of criteria for formal care) but you believe that they're at risk is there scope for formal safeguarding?

A: It's still worth raising a safeguarding concern with your manager/Contact Service as the MASH (Multi-Agency Safeguarding Hub) can check with Police and Health if there are any other concerning factors (e.g. recent police call outs to the property and/or multiple attendances at A&E with unexplained injuries etc). The social worker can offer a community care assessment and/or carer assessment too - it's a chance to talk through what's happening...the person might not want anymore help, but they'd know they can request it at a later date.

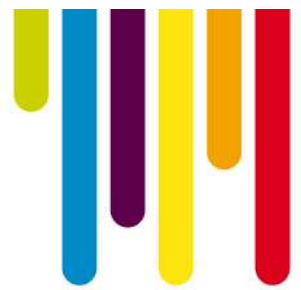
Q: If an adult has mental health issues and is going through a particular period of distress but family trying to get hospital care are being told decision is up to the ill person to request and they are not capable of requesting. Is there any course of action?

A: Sorry I've not worked in mental health services - but am a family carer and know how hard it can be to get the right m/h help. We wrote a list of early warning signs, (when well) and gave it to GP and mental health team and what action was needed/wanted. Then whenever I've spoken to GP/crisis teams (as early warning signs were present and becoming worse) they've always prioritised and responded well. The Mental Capacity Act still applies - even if a person has been sectioned under Mental Health Act.

Q: Is there still the Crisis Clean service for severe cases of hoarding etc?

A: Yes, Mcr's Crisis Clean is a small team though (as far as I know it's just 3 part-time workers). They don't 'take over' or 'throw everything out' - they will spend time getting to know and work with the person - and I think there's probably still a waiting list.

Make the referral to the Contact Service as you would a safeguarding concern.



Q: What happens if the person in the house says that they don't have a problem with the flat?

A: It's difficult - it depends 'who has the problem with it' - if the person has asked for help, then it's different than if family/neighbours/housing association/fire brigade have raised the concern. The response depend on what the risks are - many people recognise risk of fire, and often they will let firefighters in to do a fire risk assessment.

Q: Referrals made to contact centre i'm I right by guessing its for Manchester resident's only?

A: Mostly yes - but also it's for any harm or abuse or concerns in a City of Manchester setting e.g. if Trafford funds a resident in a Manchester care home, then any concerns are raised to Manchester's Contact Service, and Manchester will inform Trafford social services as the funding authority. Likewise, if a Manchester citizen is harmed in say a Stockport care home, the concern should be raised through Stockport Borough Council, and Manchester (as the funding authority) should be informed by Stockport social services.

Q: What if they don't think they are in danger but you do know?

A: Someone needs to have a conversation about risk/likelihood/safety planning - this can be a social worker/Section 42 lead enquirer or the most appropriate person. If the person doesn't want to talk to the social worker, and there are no doubts about their mental capacity then they have the right to decline and to change their mind if things get worse.

Q: What do you do if they don't give consent e.g. the hoarding enquiry?

A: It's a very common response - social workers need time to build up trust and offer suggestions and alternatives. Research shows swooping in and clearing out a person's 'treasures' often doesn't work - they'll just replace everything.

The person might need a mental health assessment (as there's a form of dementia 'senile squalor') - and the mental capacity act might need to be applied, maybe supported decision-making needs to be offered and information and time given for the person to consider the risks/actions needed.

Resources

1. Manchester Community Central – Coronavirus safeguarding page
www.manchestercommunitycentral.org/coronavirus-advice-and-resources/safeguarding
2. Skills for Care
www.skillsforcare.org.uk/Home.aspx
3. NCVO Safeguarding Resources
<https://knowhow.ncvo.org.uk/safeguarding>



Further training

Manchester Safeguarding Partnership Training

<https://manchestersafeguardingpartnershiplearning.co.uk/>

Social Care Institute of Excellence – resources and training

<https://www.scie.org.uk/safeguarding>

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