

British Association of Social Workers (BASW)
**Professional practice guidance for Safeguarding Adults during
Covid-19 Pandemic:**

Addendum: Safeguarding adults in placements

Published date 29 April 2020

Updated 30 November 2020

A note on language

Terminology about safeguarding adults from abuse and neglect differs in different countries. This guidance talks about *safeguarding adults*. This means to support and protect adults from abuse and neglect. Other terminology around areas of safeguarding such as mental capacity/ incapacity also differs, along with names for bodies such as local multi-agency forums. This guidance aims to use language that can be understood across the UK.

The term 'placement' is used throughout. This applies to registered care and nursing homes and may also apply to non-registered placements e.g. supported living.

Purpose and background

BASW has published Professional Practice guidance on Safeguarding Adults (updated Nov 2020). This highlighted a number of safeguarding issues and set out approaches to safeguarding adults during Covid-19.

The guidance flagged that there are particular issues around safeguarding adults who are in placements and said that BASW will address these in more detail in an addition to this guidance shortly.

This Addendum sets out some additional considerations about the role of social workers in safeguarding adults in placements.

Please use the guidance to:

- Guide and inform your practice
- Request appropriate support and guidance from your employer
- Raise professional concerns and questions about local practice or guidance with your employer, health and safety representative, trade union and BASW

Safeguarding adults in placements

Social worker role

The social worker role in working with adults in placements includes ensuring that their rights and entitlements are upheld and that their dignity is respected.

This is particularly important because adults in placements face additional risks, including:

- Adults are likely to have complex needs, may have limited social support and resources, may have limited capacity to make particular decisions about managing risk, may have limited voice and advocacy to raise issues
- As with much institutional care, placements may pose risks of cultural and structural discrimination to individuals. This may arise from limited investment, insufficient resources to positively manage risk and meet personalised needs, staff who are insufficiently supported or trained in all types of need, and there may be limited scrutiny or concern by the public, professionals, inspectorates and/or elected representatives
- In addition to the risks associated with a particular adult's needs and support plan, there may also be a risk of institutional abuse, i.e. risk to all residents arising from the way the placement is managed, and/or its overall organisational culture. Again, this will be exacerbated by lack of external scrutiny.

UPDATE V2: Throughout the pandemic it has become clear that social workers have not always been admitted or had the necessary PPE or interagency agreements and protocols to access facilities such as care homes and hospitals - or people's homes - to ensure safety and wellbeing. BASW is working across the four nations of the UK to ensure social workers are recognised as essential professional visitors, particularly in their safeguarding roles, and are therefore always given priority for testing and PPE (and a vaccine in the future) to enable them to fulfil their safeguarding role. For more information see <https://www.basw.co.uk/covid-19/test-safe-access-promote-rights>

Issues with safeguarding adults during Covid-19

These issues are worsened during Covid-19 because of heightened difficulties including:

- Placing people in appropriate placements
- Ensuring sufficient, personalised care and support in placements
- Managing infection risk
- Obtaining appropriate additional support for example healthcare or interpretation/communication support
- Reduced monitoring of care and support e.g. through social worker reviews
- Upholding rights for example to family life, to privacy, to freedom from degrading treatment, to liberty as a result of reduced services and staff time
- Managing discharge from placements.

Approaches to safeguarding adults in placements during Covid-19

Below are some considerations around how social workers can safeguard adults. These are aimed at preventing safeguarding issues and responding to them quickly.

1. Before a placement

Coronavirus testing - In line with recent public health guidance, all people being discharged from

hospital to a placement, or being transferred between placements, should be tested for coronavirus infection. Depending on national guidance this may include both symptomatic and asymptomatic people. The results should be known, and an infection risk management plan agreed with the placement before transfer.

Placement infection status – The infection status of other residents in the receiving placement, and their measures to manage infection risk, should be known and deemed satisfactory before a new person is admitted. BASW supports national policies of blanket testing symptomatic and asymptomatic residents

Person-centred assessment and plan – Social workers should lead on working with the adult to create a picture of individual need and support required; this must include how to minimise infection risk.

'Fit' with placement – Placements may be more rushed or there may be less choice than usual; social workers still have to work with people and those who know them, to agree the best fit; social workers should be prepared to advocate for additional expenditure to minimise risk, including to support the adult to return home.

Contingency planning – Social workers can ensure that there is a contingency plan for how the person will receive care if they or other residents get Covid-19. This is particularly important if the proposed placement has already reported cases of Covid-19.

Agreeing oversight – The plan must include named team and worker for oversight and specify everyone who is involved within the placement and externally (e.g. holders of powers of attorney, family and friends, advocates, named professional responsible for placement review) and how they will communicate about any issues.

Healthcare rights – All placements should ensure residents have access to personalised healthcare support from general practitioners and specialists as necessary. Social workers should confirm healthcare providers are following good practice and legal requirements in relation to (e.g.) advanced statements of wishes and 'Do Not Resuscitate' statements.

2. During a placement

Human rights – Providers should be supported to meet essential human rights including minimising threat to life from Covid-19, access to treatment, maintaining family or social connections, ensuring privacy and liberty as far as possible, upholding dignity.

Oversight – Many adults do not have social worker involvement or monitoring by social care; BASW advises that there should be a named social work team for all adults during this time, and that there must be social work involvement if an institution has any cases of Covid-19.

Changes in infection status – Placements should have clear plans for identifying new infection risks, re-testing all residents and adjusting infection management approach as needed.

Deprivation of liberty – If restrictions on liberty are in place, then the appropriate legal procedure and national and local good practice guidance should be followed.

Safeguarding enquiry – BASW advises that if a proposed placement has reported cases of Covid-19, and the adult's support plan does not address how the risk to the adult will be managed, then this should be regarded as a safeguarding risk and an enquiry should take place; this should involve a multi-agency response to identify how to safeguard residents.

Monitoring – Adults should be helped to contact their local council team; providers should work with social care to ensure there are virtual means for contact where this is appropriate; providers should give updates on residents on a regular basis; practitioners should be able to ‘visit’ virtually or with minimum infection risk for example visiting people in a garden or through a window.

3. Ending a placement

Discharge planning – If a placement was intended to be temporary, then social workers should proactively plan for the person to leave as soon as possible with appropriate infection control measures in place (e.g. Personal Protective Equipment for home care staff).

Risk management – Due to the infection risk in group placements, social workers should review placements proactively to consider if a more suitable place can be found with lower risk.

Employer support for social workers

Employers should work with providers to ensure that social workers can take a lead role in supporting adults who are going into, are in or are leaving placements.

Employers should identify additional resources to support social workers to commission lower risk placements or care at home.

Employers should support there to be named teams and workers to support all placements and their residents.

Employers should enable proactive social work involvement including safeguarding enquiries if an institution has Covid-19.

Employers should support proactive review of placements to identify lower risk options.

Employers should ensure social workers have the protocols, advice and equipment required to carry out their work safely and should work with local providers to ensure all staff have appropriate resources for safe practice.