# Principles of Safeguarding in Health and Social Care

## Learning Outcomes

The student should be able to

<table>
<thead>
<tr>
<th>Learning Outcomes</th>
<th>Assessment Criteria</th>
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</table>
| 1 Understand how to recognise signs of abuse or harm | 1.1 Define three of the following types of abuse:  
- bullying  
- emotional abuse  
- financial abuse  
- institutional abuse  
- neglect by others  
- physical abuse  
- psychological abuse  
- self-neglect  
- sexual abuse  
| 1.2 Identify the signs and symptoms identified with three types of abuse |
| 2 Understand how to respond to incidents of abuse or harm | 2.1 Explain what action to take if there is evidence of suspected or actual abuse  
| 2.2 Evaluate the roles of practitioners and agencies involved in safeguarding |
| 3 Understand the policy context of safeguarding | 3.1 Identify the legislation, policy and guidelines relating to safeguarding  
| 3.2 Evaluate the impact of key requirements on safeguarding |
| 4 Understand ways to minimise the possibility of abuse | 4.1 Explain how the likelihood of abuse can be reduced in health and social care settings  
| 4.2 Analyse the impact an accessible complaints procedure can have on reducing incidents of abuse |

## Assessment Methodology

A 2000 – 2500 word assignment

## Grading of this unit

The following grade descriptors will be applied to the assessment of this unit:

1 Understanding of the subject  
2 Application of Knowledge  
5 Communication and Presentation  
7 Quality

Please refer to the QAA Grade Descriptors for detail of the components of each descriptor.
Please note that the indicative content supplied below is intended as a suggested guide only. It is not meant to be a prescriptive, exhaustive or fully delivered content list. If you would like more information about the indicative content please contact development@ascentis.co.uk.

Understand how to recognise signs of abuse or harm

Types of abuse:
- Psychological abuse: non-physical controlling behaviours that cause emotional damage and undermine a person's sense of well-being.
- Financial abuse: misuse of a person's funds and assets; obtaining property and funds without their knowledge and full consent
- Sexual abuse: forced undesired sexual behaviour by one person upon another
- Emotional abuse: allows one person to gain power and control over another through words and gestures which gradually undermine the other's self-respect.
- Institutional abuse:
- Physical abuse: involving contact intended to cause feelings of physical pain, injury, or other physical suffering
- Self neglect: when individual neglects to attend to their basic needs, such as personal hygiene, appropriate clothing, feeding
- Neglect by others: may include the failure to provide sufficient warmth, nourishment, or medical care; unkempt appearance
- Bullying: the use of force, threat, or coercion to abuse, intimidate or impose domination over others

Signs and symptoms identified with each type of abuse:
- Psychological abuse e.g.: withdrawn; loss of confidence; low self-esteem; sleep disturbance; decreased ability to communicate; feeling of being watched all the time; submission; self-harming
- Financial abuse e.g.: sudden loss of assets; unusual or inappropriate financial transactions; visitors whose visits always coincide with the day a person's benefits are cashed; insufficient food in the house; no heating; bills not being paid; a person who is managing the finances being overly concerned with money; a sense that the person is being tolerated in the house due to the income they bring in; sometimes with that person not included in the activities the rest of the family enjoys
- Sexual abuse e.g.: sexually transmitted diseases; pregnancy; tears or bruises in genital/anal areas; soreness when sitting; signs that someone is trying to take control of their body image, for example, anorexia, bulimia or self-harm; sexualised behaviour
- Emotional abuse e.g.: name calling; taunting; control; lack of approval; low self-esteem; risk taking; self-harm; neglect; threats
- Institutional abuse e.g.: everyone having to do things at the same time; limited/no choice; no attention to preferences/needs; use of communal clothing/toiletries; no privacy
- Physical abuse e.g.: injuries that are consistent with physical abuse; injuries that are the shape of objects; injuries that have not received medical attention; a person being taken to many different places to receive medical attention; skin infections; dehydration; unexplained weight changes or medication being lost; behaviour that indicates that the person is afraid of the perpetrator; change of behaviour or avoiding the perpetrator
- Self-neglect e.g.: not eating properly/regularly; unkempt appearance; dirty; infections; illness; not taking prescribed medication
- Neglect by others e.g.: malnutrition; rapid/continuous weight loss; inadequate/inappropriate clothing. Untreated medical problems; dirty clothing/bedding; lack of personal care
- Bullying e.g.: change to routines; unwilling to go out; feel ill in the mornings; become withdrawn, start stammering, lack confidence; become distressed and anxious, stop eating; attempt or threaten suicide; cry themselves to sleep; have nightmares; have their possessions go missing; ask for money or start stealing (to pay the bully); refuse to talk about what's wrong; have unexplained bruises, cuts, scratches; begin to bully others; become aggressive and unreasonable; give improbable excuses for any of the above

Understand how to respond to incidents of abuse or harm
The actions to take if there is evidence of suspected or actual abuse: reporting; recording; reassurance to the individual, following policies and procedures, safeguarding depending on issues involved, potential
removal from setting, aspects of disclosure; confidentiality

The roles of practitioners and agencies involved in safeguarding e.g.: police-make decision about whether crime has been committed, take emergency action if child or person is in immediate danger; health professionals e.g. general practitioners, doctors in emergency departments (examine/observe a child or person thought to be at risk of abuse or who has suffered abuse), health visitors; the Local Safeguarding Children Board (LSCB) to oversee the work of other agencies, includes experts from the range of children’s services, reviews all serious cases of abuse); The National Society for the Prevention of Cruelty to Children (NSPCC)-charity with statutory power to take action when children are at risk of abuse, provides help lines for children and for people who are worried about a child or young person, supports families; school-provides support for children or young people who are known to be on the ‘at risk’ register; Age UK; Inspectorate; advocates; Victim Support is a national charity which provides support for victims and witnesses of crime; Safeguarding Adults Boards

Understand the policy context of safeguarding
Legislation, policy and guidelines relating to safeguarding e.g.: The Children Act (1989) and (2004); Working Together to Safeguard Children 2013; Every Child Matters (England); Mental Capacity Act 2005; Children Act 2006; UN Convention on the Rights of the Child 1989; Human Rights Act 1998; Protection of Freedoms Act 2012; Guidelines e.g. Working Together to Safeguard Children 2010, What to do if you’re worried that a child is being abused 2006, Common Assessment Framework (CAF); Deprivation of Liberty Standards; adult/child protection policies and procedures applicable to local setting or organisation including whistle blowing; safeguarding and protecting; reporting and recording; e-safety; bullying and cyber bullying; local authority guidelines

The impact of key requirements on safeguarding e.g.: Disclosure and Barring Service (DBS); recruitment; training; monitoring; supervision; roles/responsibilities; whistleblowing; accountability supervision; ratios; privacy; dignity; confidentiality

Understand ways to minimise the possibility of abuse
How the likelihood of abuse can be reduced in health and social care settings e.g.: working practice; reporting; whistle blowing; support; complaints procedure; inspection; storage of reports

The impact an accessible complaints procedure can have on reducing incidents of abuse e.g.: choice; opportunity to express concerns; review of systems/working practice; accountability; reporting of poor/unsafe practice

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