

Top Tips for front line staff visiting adults in their own homes

- ❖ Whatever the purpose of your visit, take a broad view of the adult's wellbeing. **Ask the adult** for their views on the care they are receiving.
- ❖ Look at the adult's home environment. Is it warm, clean and safe? Signs of neglect or acts of omission may include:
 - Poor environment – appears dirty or unhygienic overflowing bins
 - Poor physical condition and/or poor personal hygiene
 - Pressure sores or ulcers
 - Malnutrition or unexplained weight loss
 - Accumulation of untaken medication
 - Inappropriate or inadequate clothing
 - Remaining in the same bed/chair for long periods of time
 - Lack of food or out of date food in the fridge

Other Possible Indicators:

- ❖ Is the adult worried about their finances? This can sometimes be an indicator of wider concerns.
- ❖ Have there been missed, late or early calls? What impact has this had for the adult? Has this led to a missed meal or missed medication?
- ❖ If you identify concerns, **talk to the adult** about your concerns and seek their views on what to do about them. (Consider the possibility that the adult could be refusing care).
- ❖ Consult relatives and friends of the adult you are visiting. Lessons learned from previous Provider Investigations tell us that often relatives and friends harbour concerns but do not speak up, or do not know who to turn to in order to express their concerns
- ❖ Ask the adult about their family and friends. Do they have regular visitors who would notice deterioration in their well-being or the quality of care they are receiving? If they do, consider talking to the adult about sharing information with people in their informal support network, about how to raise concerns.

- ❖ If you are concerned about the care the adult is receiving, find **the care plan** and check to see what care and support the adult should be receiving. The care plan may provide details of why the call was missed which reassures you. Conversely, evidence of poor recording in the care plan might be indicative of wider concerns. Is there a proper record of the care delivered? Nursing staff should also consider looking at the MAR charts.
- ❖ **Be curious** - try to find out more about your concerns before reporting them (for example, if you are concerned about a missed call, did the adult decline? Did the homecare provider try to contact the adult?). Does the care plan meet the Adult's needs? Consider risk management – has the right information been appropriately shared with the provider to enable them to manage risks?
- ❖ If during your visit you observe care being delivered which give rise to concerns, before reporting this as a safeguarding concern, make your observations known to the care worker and use your own skills to model how the care should be delivered.
- ❖ If you still have concerns about care being delivered, **contact the home care manager** and share your observations. Are you satisfied that the manager will address your concerns? Assess the level of risk and take action accordingly.
- ❖ **Take professional responsibility** for acting on your observations. Be prepared to have difficult conversations with care workers and the home care manager. If you are uncomfortable doing this, raise this in supervision.
- ❖ With their permission, make time to familiarise yourself with other aspects of the adult's care & support plan and professional support network. Working collaboratively with the team around the adult (with their consent or if they lack capacity, in their best interests) will enable you to share information to support early intervention and could help prevent a deterioration in their wellbeing.
- ❖ Record your concerns and the action that you took and refer back to this next time you visit. If progress hasn't been made, discuss with the home care manager. Give them the opportunity to make a safeguarding referral themselves if necessary, but follow up to ensure that this has happened. Assess the level of risk and take action accordingly.