

Making Safeguarding Personal Learning Briefing

This guidance is designed to assist professionals across agencies to understand what is meant by Making Safeguarding Personal, how to apply it in safeguarding situations and links to additional resources to support with this.

(With thanks to the East Sussex SAB whose work this document is based on).

What is meant by Making Safeguarding Personal?

<u>Making Safeguarding Personal (MSP)</u> is about developing a safeguarding culture that is person-centred and outcome focused with practice that supports people to improve or resolve their circumstances.

This work is supported and promoted by the Local Government Association (LGA), the Association of Directors of Adult Social Care (ADASS), SCIE and other national partners. The key aspects of MSP are:

- A personalised approach that enables safeguarding to be undertaken with, and not to, people.
- Safeguarding practice that focuses on achieving meaningful improvement to people's circumstances and situations and not just the completion of an 'enquiry' or 'investigation'.
- An approach that uses social work skills rather than just putting people through a process.
- An approach that enables practitioners, families, teams, and Safeguarding Adults Boards to know what difference has been made.

A series of tools to support Making Safeguarding Personal and to improve safeguarding practice and measure the effectiveness of this has been developed by the LGA (2019) and can be found within the Making Safeguarding Personal toolkit.

The toolkit is divided into three main sections:

- Providing information and support in safeguarding;
- Upholding the rights of people involved in safeguarding;
- Achieving resolution and recovery in safeguarding.

You can use the toolkit to identify best practice and the most personal approach to a safeguarding situation. You can also ddownload and print off strengths-based practice tools as required, or the <u>Case examples and reflective exercises</u> to support application to safeguarding practice.

Myths and realities about MSP

MSP supports and promotes relationship and strengths-based approaches to practice. It acknowledges the complexity of people's lives and the challenges for practitioners to enable people, with their representatives or advocates if they lack mental capacity, to keep themselves safe and safeguarded, and to achieve resolution and recovery in their lives.

Myth 1: It is a myth that Making Safeguarding Personal means that if someone says they don't want anything to happen then you can close the case and walk away. Use your professional curiosity and relationship-based practice skills to ensure that someone is not pushing you away because they are influenced, coerced, or controlled by someone else. Persevere and establish trust to support people to minimise the impact of any unwise decisions on their health and wellbeing.

Myth 2: It is a myth that Making Safeguarding Personal is just a chat over a cuppa' or "that MSP thing". Making Safeguarding Personal is about practice and culture change. Use the core principles of the Human Rights Act, Care Act and Mental Capacity Act to join up all parts of the system that can support the person at the centre of concern and resist seeing safeguarding as simply moving through a process.

Myth 3: It is a myth that Making Safeguarding Personal doesn't bring perpetrators to justice because the person doesn't want action and they will go on to abuse again. Use Making Safeguarding Personal to stop abuse and neglect. Use your legal literacy and professional responsibilities regarding duties of care and public interest to ensure that anyone who could abuse others is properly dealt with.

Myth 4: It is a myth that Making Safeguarding Personal takes too much time. Making Safeguarding Personal is time effective. It may take you longer in the beginning to explain everything and establish what the person wants but, in the long term, better choices will be made, protection plans will be more effective and people will be supported to achieve the outcomes that matter to them.

Myth 5: It is a myth that it is not possible to use a Making Safeguarding Personal approach with people who lack mental capacity. Making Safeguarding Personal is for everyone, including people who lack mental capacity. Use advocates and people who know the person to find out what the person might have wanted. Use the Mental Capacity Act to make best interests' decisions in relation to specific safeguarding risks and involve all relevant parties.

Myth 6: It is a myth that the Making Safeguarding Personal approach cannot be used when a person refuses help. Making Safeguarding Personal is or everyone, including people who refuse support. Use your skills, knowledge, and experience to check that someone else is not pressurising the person. Speak to the person in private and think about why they may be turning down help. Build up trust, work together with someone they know well; someone needs to keep trying and that could be you.

As part of Making Safeguarding Personal it is important that practitioners find an opportunity for direct personal contact with the person at the centre of the concerns, which is separate from family, friends or any others who may be involved. While families, friends or others who are involved will invariably have the best interests of their loved ones at heart there may be situations where the person wants to talk to professionals alone but do not have the confidence to request this themselves. Practitioners need to take the initiative and ensure that they meet with the person on their own.

A full discussion of the myths and realities of MSP, and other myths about safeguarding, is contained in LGA and ADASS 2019 document Myths and realities about Making Safeguarding Personal.

Other sources of guidance and information

There are many sources of guidance and information guidance and information about how to make safeguarding personal. It is a national initiative, and process of culture change, about the way all safeguarding work should be approached at an individual, organisational, and societal level. The documents below can also be used to find out how to embed MSP at the relevant level for your role.

- Working with risk resources are to help people working with risk in the context of MSP. The resources include risk assessments that can be used to inform decisions about the level of risk and how it can be managed. Risk assessment and risk management are especially difficult when an individual does not want to be seen alone and there are concerns that they are subject to undue influence, control, or coercion by someone else. Where there is no clear resolution through using risk assessments and management plans, then these types of situation should be escalated though line management and discussed with all parties involved. It is likely that a multi-agency approach will be required that involves a range of professionals and is line with the working with risk resources to minimise risks of harm.
- Making Safeguarding Personal case studies illustrate outcome focused safeguarding practice in line with an MSP approach. Two of the case studies are provided by East Sussex County Council.
- Making Safeguarding Personal Outcomes Framework is designed to help inform practitioners, teams, councils, Safeguarding Adult Boards and their partners, and service users, of the extent to which they are making a difference to the safety of people who are at risk of, or who have experienced, abuse or neglect in their area.
- <u>Case File Audit resources</u> have been shared by Local Authorities and Safeguarding Adults Boards and will be useful when developing safeguarding audit tools, guidance, and methodologies.
- Making Safeguarding Personal for health and social care commissioners and providers is a
 2019 briefing to support health and social care commissioners and providers to make positive
 differences by engaging with those who use services.
- <u>Safeguarding list of resources</u> is a consolidated list of key safeguarding resources for council, care
 providers and wider partners' staff that has been brought together by the LGA and ADASS.