



**IASW**

Irish Association of Social Workers  
Cumann na hÉireann um Oibríthe Sóisialta

Paschal Moynihan,  
Office of the Specialist & National Safeguarding Office,  
South East Wing,  
St. Joseph's Hospital,  
Mulgrave St,  
Limerick.

27<sup>th</sup> July 2016

**IASW Feedback on the Implementation of "Safeguarding Vulnerable Persons at Risk of Abuse: National Policy and Procedures"(2014)**

Dear Mr Moynihan,

The Irish Association of Social Workers (IASW), the professional body representing the social work profession in the Republic of Ireland welcomes the publication of the above policy and supports the need to protect vulnerable adults from abuse.

The IASW is aware that a review of the policy is underway and that multiple stakeholders are being consulted. As part of that review, the IASW is seeking a meeting with our Safeguarding Team colleagues and the Safeguarding Office to collaboratively review this document with the aim of contributing to the improvement of service delivery for vulnerable adults at risk of abuse.

In order to obtain representative feedback, the IASW consulted with members via our Special Interest Group structures seeking and receiving feedback on the policy's implementation. In total seven detailed submissions, multiple individual queries, two AGM motions and other feedback was received and reviewed. The IASW collated and analysed the feedback before organising it into themes which form the basis of this document. The document was reviewed and signed off by the IASW Board on Monday 25.07.16 as being representative of the views of the professional association. Please contact the office at [office@iasw.ie](mailto:office@iasw.ie) , contact number 01 6774838 regarding a suitable time and location.

We wish to thank you in advance for considering this request and we look forward to continued collaborative working with your office.

Yours sincerely,

**Frank Browne**  
**Chairperson**  
**IASW**

**Aisling Coffey**  
**Member**  
**IASW**

**Patrice Reilly**  
**Member**  
**IASW**

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## **IASW Feedback on the Implementation of "Safeguarding Vulnerable Persons at Risk of Abuse: National Policy and Procedures"(2014)**

Following the collation and analysis of IASW member feedback received, this has been organised into the following themes below.

### **1) Resourcing the Infrastructure and Support Services Necessary to Safely Implement this Policy.**

The IASW welcomes the publication of the policy to protect vulnerable adults from abuse. We wish to work with the HSE to ensure a consistent approach to safeguarding and protecting adults with a disability and older adults from abuse and neglect.

IASW members have noted that in order to comply with a zero tolerance approach to abuse, there is a need for increased staff resourcing in community and service settings to reflect the increased administration time associated with preliminary screenings and safeguarding plans and to ensure that preliminary screenings are completed within the three working day timeframe.

IASW members also note that some Safeguarding and Protection Teams (SPTs) are operating with staffing levels below those envisaged when SPTs commenced operation and that some teams are operating without essential administrative support.

IASW members also note the need for enhanced HSE-funded community health service provision for older adults and adults with a disability, in the form of home care packages, home help, day services and respite care. These support services play an instrumental role in safeguarding younger and older adults by maintaining their health and connection to their communities, as well as reducing the risk of carer stress and burden.

### **2) Clarity Required on the Operating Procedures within Safeguarding and Protection Teams (SPTs)**

The IASW welcomes the establishment of Safeguarding and Protection Teams (SPTs) lead by a Principal Social Worker, which ensures reporting, governance and professional supervision structures are in place for the profession in delivering this valuable service for vulnerable adults. The operation of the SPTs has been complemented by IASW members who have referred to the support, expertise and collaborative working between SPTs and their social work colleagues across other service settings.

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IASW members have noted some inconsistencies across the country in how SPTs operate and in particular whether they provide direct assessment and intervention in response to community setting referrals or whether there is an expectation that Primary Care Services conduct a preliminary screening in this setting. The reported inconsistency is leading to some confusion. In order to enhance collaborative and effective working relations between the SPTs and other services increased clarity on the role of the SPTs teams, perhaps in the form of Standard Operating Procedures, would be beneficial.

### **3) Change in Service Delivery to Certain Older Persons**

The IASW noted that the new policy refers to the incorporation of services for elder abuse within its title and welcomed the continued safeguarding service provision to all older adults as had been provided for by the HSE Elder Abuse Service.

However, IASW members delivering mental health services to older persons are reporting that older adults engaged with mental health teams are not benefiting from the expertise and support of the SPTs. This is a disappointing and worrying development for such a vulnerable group of older persons who previously had access to the elder abuse service.

Similarly, the new policy places the duty for assessing and screening self-neglect outside of the realm of the SPTs, albeit the SPTs are available to support and advice. This is also a disappointing development for vulnerable adults who previously had access to the specialised skills and experience of the elder abuse service.

### **4) Access to Training**

The IASW has received positive feedback from members who attended the four day specialised training for members of the SPTs and social workers in the voluntary sector, the two-day Designated Officer training, the Train the Trainer programme and the Standardised Awareness Training run by the HSE.

Some members have informed the IASW that they have had difficulties obtaining placements on these programmes. The IASW is aware that further training is being planned and rolled-out and many members working with older adults and adults with a disability, including those working in non-HSE acute hospital settings, would welcome the opportunity to participate in training, particularly as the hospital sector previously represented the second highest referrer to the elder abuse services.

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The IASW is of the view that it would be beneficial for the HSE to deliver training in relation to Trust in Care investigations and also provide guidance on how an agency implements both polices most effectively and in a client-centred manner.

The IASW is aware of the development of a Practice Handbook to promote best practice in undertaking assessment, risk analysis and safeguarding planning whilst considering key messages from research. Our members greatly look forward to this publication.

### **5) Role of the SPT in relation to Preliminary Screenings from Service Settings**

The IASW is aware of the practice whereby members of the SPT review and agree Preliminary Screenings submitted from service settings and often recommend follow up actions.

The IASW is of the view that such processes represent a governance and accountability ambiguity and represents unsafe social work practice. The IASW believes that best practice dictates that a social worker directly conducts their own assessment, planning, intervention and evaluation of a client's needs.

### **6) Social Work Representation in Development of Policy and Services to Safeguard Vulnerable Adults**

As discussed in the March 2015 meeting, IASW members wish to contribute to the future development of policy and services designed to safeguard vulnerable adults in this county. Social Work as a profession has the acknowledged role, experience and expertise in assessing and managing allegations of abuse of children and vulnerable adults.

IASW members would strongly welcome the opportunity to contribute and collaborate with our colleagues on the Community Healthcare Organisation Safeguarding and Protection Committees. The IASW believes that strong social work representation on these committees would promote collaborative interagency and inter-disciplinary approaches to safeguarding and protecting adults with a disability and older adults from abuse and neglect.

### **7) Service-User Consent**

A number of submissions received by the IASW in relation to the policy sought clarity on matters where a vulnerable adult service-user, assessed as having capacity, declines a referral to the Safeguarding and Protection Team. There are serious concerns among social workers about the legalities of referring a service-user to the Safeguarding and Protection Team, or indeed any service, without their consent. The IASW would appreciate discussion with the Safeguarding Office on this matter.

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