

Editorial

Bridget Penhale and Margaret Flynn

Welcome to this second issue of the current volume. To start with, we provide some information and recent stories that relate to the broad topic that is safeguarding, which have appeared in different types of media in recent months.

What a bleak global backdrop to the New Year! If only we could outsource the task of supranational cooperation [...].

During last year we learned about the use of “isolation booths” to accommodate disruptive schoolchildren[1]. Then during January 2020, we gathered that there is no limit to the imagination of schools and architects, as “removal rooms” and “confined booths” have now become the go-to solution for behaviour management in England[2]. We may be persuaded that they are “safe spaces run by adults” but their resemblance to the unlimited seclusion in Assessment and Treatment units and “hospitals” is unnerving and bears close scrutiny [...].

We recommend that you download the report: “Without my family: The impact of family separation on child refugees in the UK[3].” It reveals that the UK Government’s policy on refugee family reunion:

- prevents child refugees who have sought safety in the UK from being joined by their parents, brothers, or sisters;
- leaves the UK as the only EU country that refuses to grant child refugees the right to be reunited with even their closest family; and
- is directly at odds with national and international law, contravening the principle of the best interests of the child (p3).

As a Sudanese teenager said, “Being without your family, it is like you have a body without a soul”. Following the UK’s departure from membership of the European Union at the end of January, we have subsequently learned of government plans to also remove the UK from the European Court of Human Rights – which if/when effected would likely further diminish citizenship rights, perhaps in particular, those from marginal groups, such as refugees.

The care worker accused of killing 19 residents with learning disabilities in south west Tokyo during 2016 has pleaded not guilty[4]. His night-time rampage also left 24 residents seriously injured. Was his “deep-seated hatred of people with disabilities” the reason or his “absent or weakened capacity”? The absence of any remorse and evident conviction that his actions were prompted “for the sake of society” would suggest the former. Although there is stigma and shame associated with disability in Japan, one mother whose autistic daughter was killed in this dreadful event chose to speak out:

She loved music, she lived as energetically as she could [...] Her name was Miho. I want that public as proof that she existed,” she said. “I want people to know who she was.

It has taken coroner Nadim Bashir to clearly set out the shocking reality of a botched, ideological policy. When David Braddon murdered Connor Marshall in an unprovoked attack during 2015, Braddon’s inexperienced probation officer was struggling to manage an overwhelmingly large caseload with inadequate management support[5]. The coroner was critical of the Wales Probation Trust, Wales CRC Ltd and, specifically, the probation officer’s

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working “environment, which was chaotic and stretched due to the impending implementation of the TR [Transforming Rehabilitation] programme[6].”

Teachers have always known that pupils’ home lives are reflected in classrooms. Here’s a troubling fact: during 2018, 137,000 girls and young women missed school and college due to “period poverty[7]”. During 2018, 2019 and 2020, Scotland, Wales and England, respectively, made tampons, pads and period products freely available in state schools and colleges. Northern Ireland has yet to follow this welcome (but overdue) initiative[8].

During February 2020, it was confirmed that the Home Office has paid just £62,000 as compensation to 36 people affected by the Windrush scandal; that is, where the impact on their lives was significant and where there was evidence of certain, direct financial costs. The treatment of victims does not reflect at all well on the Home Office[9]. The claims deadline has been extended and a series of community information events planned. However, no funding has been allocated to pay for legal advice. There is concern that the change in ministerial position for the Home Office following the general election held in December 2019 will result in further extension of the “hostile environment” relating to immigration, originally instituted when Theresa May was the minister at the Home Office and continuing to be experienced by far too many individuals.

The right not to self-incriminate is enshrined in law. The reality of this is being played out in the recently halted Grenfell Tower public inquiry. The families of the 72 people killed in the Grenfell Tower fire are in disbelief that the lawyers for corporate witnesses are seeking assurance that what they say under cross examination will not be used to imprison them[10]. Scale a long way down to Serious Case Reviews and Safeguarding Adults Reviews and the echoes and potential ramifications cannot (and should not) be ignored.

The National Audit Office’s report “Information held by the Department for Work and Pensions (DWP) on deaths by suicide of benefit claimants”[11] was published on 7 February 2020. It revealed that at least 69 suicides could have been linked to problems with benefit claims. It is quite possible that further details about other deaths (including suicides) will come to light in the coming months—and there is clearly a need for close monitoring of this situation. In early March, we also learned that the DWP has achieved the somewhat dubious accolade of having the worst record as an employer (of any organisation in the UK) between 2016 and 2019 for losing disability discrimination cases brought to tribunal by employees[12].

A London GP who assaulted 24 women patients has received three life sentences[13]. He preyed on patients’ fear of cancer to secure consent to intimate (and often unnecessary) examinations[14]. The Ian Patterson Inquiry into the unnecessary operations on women’s breast has recommended the recall and assessment of his 11,000 patients[15]. One of the recommendations concerned the communication of complaints escalation. Ideas about how this would address what the Chair described as a “dysfunctional healthcare system” in a “culture of avoidance and denial” on postcards please.

For those interested in professional legislation, may we recommend scrutiny of the General Medical Council’s website and, specifically, its update on the fraudulent “psychiatrist” Zholia Alemi[16]. She is currently serving a five year sentence and was suspended from the register during 2017. Here is some indication of where the story gets interesting; she.

“[...] sat and passed the Member of the Royal College of Psychiatrists exam in 2003. At the time, this was a two-part exam with written and clinical parts. The MRCPsych, as it is known, is awarded to those doctors who have completed at least three years training in psychiatry and who pass the two-part test. The royal college subsequently recommended her for entry to our Specialist Register in 2012, in psychiatry with learning disability. This meant that they were satisfied she had demonstrated the knowledge, skills and experience required to be appointed as a substantive consultant in the NHS [...] During the 23 years that she was on the medical register there were no complaints about her practice”. Not bad for someone

armed with only a biology degree—and clearly working with patients who were unlikely to challenge her decision-making and prescribing practice provided a dream niche.

Onto the fabulous news that the buy-to-let boom is over[17], the number of landlords with multiple properties is decreasing, interest deductability has changed, letting fees have been banned and with the 3 per cent additional stamp duty on purchases, a rapid decline is apparent[18].

Three cheers for the Equality and Human Rights Commission. It has launched a legal challenge against the Secretary of State for Health and Social Care over the failure to address the detention of more than 2,000 people with learning disabilities and autism being detained in secure hospitals[19]. Because watershed scandals have not fixed the unlimited detention of young people and adults and the £10.3m Transformation Plan, post Winterbourne View Hospital did not halt placing people many miles from their families and communities, fingers crossed, enduring legal injustices will be tackled. It is perhaps too much to hope that private companies will lose interest in securing many thousands of pounds per week, per patient from the NHS.

Finally, three cheers too for Books Beyond Words. It was during November 2019 the company launched a new book to combat constipation[20]. This was trialled by a group of adults with learning disabilities who are part of a book club run by the Friends of Menai Bridge Library. One of the most memorable refrains from reading this book of pictures was: "Oh my god [. . .] And now for the weather. That she blows. It's going to be windy and foul [. . .] what a naughty book it is! [. . .] You can take the book to the doctor and say what's wrong". No shit

This issue of the journal contains five papers covering a wide range of different aspects of safeguarding. The first of these, by Rachel Clawson and colleagues in Nottingham and Kent is a research paper that reports on a study that was undertaken when access was gained to the UK government's Forced Marriage Unit. Having access to the Unit's database of forced marriages in the UK that were reported over a 6-year period (2009 - 2015) meant that it was possible to conduct an analysis of the cases. This was specifically used to compare the demographics of forced marriage of people with learning disabilities and people without learning disabilities and to use the findings to inform safeguarding practice with individuals with intellectual and learning disabilities who might be at risk of such harm. Findings from the analysis include a much higher risk of forced marriage for people with intellectual and learning disabilities, and roughly equal numbers of men and women with learning disabilities who were subject to this practice. The study consisted of cases reported to the FMU, and in some cases the data obtained was incomplete. Perhaps rather more notably, it is understood that a lot of cases go unreported; therefore the data that the FMU database contains is not likely to reflect all cases of forced marriage in the UK. Some useful recommendations are made, and links are provided to some resources that were developed as part of the wider project that took place.

The second paper in this issue also concerns people with intellectual and learning disabilities and is a case study paper provided by Sara Willott and colleagues from Birmingham. The paper considers issues relating to under-reporting of sexual assault of adults with learning disabilities, together with potential prevention strategies. This was achieved through examination of a series of safeguarding alerts that had been raised in a Community Learning Disability Team within a UK NHS trust. A combination of anonymised case vignettes and descriptive data drawn from the safeguarding team was gathered to explore under-reporting through use of an ecological model. In addition, safeguarding alerts made during the course of a specific year were compared with the number expected if all (estimated) abuse was disclosed and reported. A number of interesting findings are presented in the paper, together with recommendations to improve (reporting and other) practices in this area.

Our third paper is by Pete Morgan, an Independent Safeguarding consultant who has previously contributed to the journal. In this current paper, a viewpoint perspective is provided on the social work topic of strengths-based practice and possibilities in relation to its use within

adult safeguarding. As we have seen in previous contributions from Pete, some interesting ideas are proposed and discussed as useful food for thought and consideration in relation to safeguarding practice. This is followed by a further viewpoint paper by Mark Redmond of the University of Gloucester, who explores issues relating to current understandings of financial abuse. The particular perspective taken follows some work that Mark undertook on gaining access to the minutes of Church of England disciplinary tribunals, which are held to provide accountability for actions by members of the clergy. The specific consideration here is to explore how the church acts in terms of the representation and construction of the victims of financial abuse. The work undertaken found that reference to victims of financial abuse did not appear in the tribunal minutes and determined that disciplinary tribunals appear to be solely concerned with the likely financial loss afforded by the church. Current perspectives on the nature of financial abuse, including when and where it might take place, do not generally contain this type of reframing of the issue so that such abuse is virtually hidden by organisational procedures and processes. The paper offers some interesting insights on such aspects as these and provides a number of recommendations in relation to establishing greater accountability and transparency in this area of safeguarding.

The final paper in this issue is a conceptual paper by Susanna Doyle, from a mental health and addictions service based in Queensland, Australia. It provides detail on the development of a suicide prevention clinical pathway, through use within a healthcare service of a framework for “negotiating meaning”. This framework had originally been developed as part of a previous study that was undertaken to help researchers to understand the experiences of older people better. The approach that had been developed was then applied within a healthcare setting, in which front-line (clinical) staff engaged collaboratively with each other, and with consumers, family members and the service management structure to develop a suicide prevention clinical pathway and guideline that reflected best practice and improved care provision for individuals at risk of suicide. The resulting pathway that was developed was evidence-based and was achieved through processes of effective and meaningful engagement. The negotiation process brought the perspectives of the different parties together so that the underlying meaning from the experience of losing a service user to suicide was shared and shared understanding by all the stakeholders involved was developed. This included the creation of a commitment to taking joint action to reduce the likelihood of further incidents of suicide occurring by users of the healthcare service. This useful paper describes the approach that was used to establish and maximise engagement processes between clinicians and service management, and that also supported relevant agendas for both safety and quality within the organisation.

We hope that this issue of the journal provides some ideas and suggestions for readers to reflect on in relation to adult safeguarding in its widest sense. As previously (and dare we say it repeatedly) stated in other editorials, we are always interested in hearing from possible contributors and willing to discuss ideas for potential papers concerning research, policy and/or practice in this broad area. If you have suggestions or ideas, and wish to discuss these further, do make contact with one of us and we will be pleased to provide advice and offer support. Our contact details appear on the inside cover of the journal and are also available on the journal website. We hope that you enjoy this issue of the journal in these uncertain and challenging times.

Notes

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17. www.economist.com/the-economist-explains/2018/01/18/why-britains-buy-to-let-boom-is-over (accessed 10 February 2020).
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20. <https://booksbeyondwords.co.uk/news/2019/11/27/new-book-to-combat-constipation> (accessed 17 February).