



Safeguarding Adults Framework – Train the Trainer Scenarios

There are 10 scenarios - one for each type of abuse. These scenarios are examples of real cases referred to the MASH in Suffolk:

1. Read through a scenario.
2. Look at the Framework and decide:
 - Which type of abuse it relates too; and
 - Which box within that abuse type on the Framework most relates to the scenario?
3. Think about the considerations the person raising the concerns and/or a safeguarding lead/MASH would need to think about.

SCENARIO 1

Fred is 84 years old; he has some physical health conditions and lives in his own home in rural Suffolk.

Fred tells a carer that a friend from the village is giving Fred “special baths” for which he is giving her £100 each time.

The carer raises a safeguarding concern, as she is worried that Fred is being financially and sexually abused.

SCENARIO 2

Arthur has dementia and resides at a residential care home.

Carers and family noted a recent significant deterioration in Arthur's mobility and following developing a cold, he has taken to spending most of the day in bed.

Arthur's GP was called and a home visit to medically assess him was arranged.

The GP requested Arthur be taken to hospital for further assessment of respiratory concerns. On admission, nursing staff observed Arthur had a grade two pressure sore on his ankle and a red patch of skin on his elbow.

The carer who had accompanied Arthur in the ambulance from the Care Home to Hospital advised he was not aware of Arthur having any pressure sores. A skin breakdown care plan has not been sent to the Hospital in Arthur's yellow folder (Care Planning Folder).

The hospital are concerned that Arthur may have been neglected.

SCENARIO 3

Cathy has been admitted to hospital following a fall in the supermarket. Tests show that Cathy was malnourished and dehydrated. Cathy told the consultant she had not been able to afford to buy food the last couple of weeks because she has spent all her savings but was there as she just received her pension.

Cathy told nursing staff she was worried about her young neighbour, Bob. Cathy told them Bob has no money because he has to send all his money on his poorly mum. Cathy had no money left in her savings because she gave Bob £7,000 to pay for his mum's hip operation.

Cathy said Bob has been coming to the house regularly asking for money, he is quite a persistent man. Bob has been in to the hospital to visit Cathy. She has given him her bank card to pay her gas bill and buy some food for himself because he has no money at the moment.

SCENARIO 4

Simon has a learning disability and works at a farm.

Simon lives with his girlfriend Gloria who also has a learning disability.

Simon arrives at work one day with a cut on his face and a bruise on his arm.

After some discussion, Simon tells a support worker at the farm that he and Gloria had a fight the night before.

The support workers have been concerned previously that Gloria may have been physically and verbally abusive to Simon.

SCENARIO 5

Joel is 24 years old and lives with his Mum, Stepfather, younger stepbrother and stepsister.

Joel works as a engineer.

Recently Joel's colleagues have noticed that he has been posting an increasing number of right wing propaganda messages on social media.

Joel has asked his boss for time off work so he can go on a right-wing retreat and "learn skills needed for post Brexit".

SCENARIO 6

Deepak has a mild learning disability and lives on his own.

Deepak has support for an hour each morning to support him with daily living tasks to be more independent e.g. finances.

Deepak like to get a paper each day and some chocolate to have with his cup of tea in the afternoon.

Some local school children have recently starting calling Deepak racist and disablist names. The local shopkeeper is concerned as Deepak told him they have posted dog poo through his door and Deepak will be giving them a good telling off.

SCENARIO 7

Miss C has contacted the continuing healthcare team because she is worried about the carers looking after her. Continuing healthcare are currently funding the healthcare package provided for Miss C by a local domestic agency.

Miss C has said that she does not have any concerns with regards to the care she is receiving. One of the carers frequently arrives for work with bruises on their arms and once arrived with a black eye and a cut on their cheek. They did not explain what had happened and just said everything was ok. Miss C has a number of carers coming to support her at home. She has also noticed that two of them look quite thin and possibly underweight. Although they are required to work long hours for Miss C, none of the carers ever bring sandwiches or food to eat. Miss C has also noticed that none of them speak very good English and thinks that two of them mentioned they were from Romania.

Miss C is also concerned all of the carers may be living at the same address in a house around the corner from where she lives.

SCENARIO 8

A GP visits the surgery's local Nursing Home every week.

Over the past few months, a number of residents have required hospital treatment and care for conditions the GP felt should have been effectively managed by the nursing staff at the home.

The CCGs Care Home Team and Adult Social Care, Provider Support Team have been working with the Home to improve quality of nursing care.

Nursing Staff at the Home have had Diabetes Care Training, Pressure Damage Care Training, Medicines Management Training . The GP Surgery have worked closely with the Home's Clinical Lead to set up systems to ensure residents medications are ordered and delivered to the Home in a timely manner.

Last month the Clinical Lead and two nurses left and as yet have not been replaced.

Last week three female and one male resident were assessed by GP and were admitted to hospital. The GP feels that; poor management of diabetes care for two of these residents resulted in them becoming critically ill, that the gentleman resident developed sepsis possibly due to poor care of pressure sores, and that the other lady's health significantly deteriorated (she later died in hospital) following the Home not ordering her repeat prescription and her not receiving her medicines for a five day period prior to hospital admission.

SCENARIO 9

Geoff and Mark are both residents of Happy Days Nursing Home, both have dementia.

Geoff often wanders into other residents' rooms and needs to be guided back to his own room or communal areas.

Mark does not like people coming into his room and usually keeps his door closed. He has recently assaulted a member of staff for entering his room uninvited.

Staff believed that Geoff tried to walk into Marks room yesterday evening, Mark shut the door as Geoff was walking in causing a head wound requiring treatment at A&E.

There is no CCTV available and neither Geoff or Mark can give an account of the incident.

SCENARIO 10

Maureen is 84 and lived with her daughter Joan since Maureen's husband passed away 15 years ago. Joan was very close to her father, she has had anxiety attacks since he passed. Joan does not work due to her anxiety but has taken on the role of carer. Maureen has mobility problems due to arthritis and some sight problem due to untreated cataracts.

Joan and Maureen like to collect things such as dolls, magazines and craft materials.

Maureen recently had a fall and required hospital treatment, paramedics arrived at the house but had to move many boxes to gain Maureen immediate treatment and assist her out of the house.

Whilst in the house paramedics observed the hallways to be stacked with boxes floor to ceiling leaving only narrow pathways. All the rooms that were available to see were the same with boxes stacked precariously throughout the rooms and on every surface.