

Safeguarding adults in care homes

Additional consultation

NICE guideline NG189

Supplementary material C

February 2021

Final

*Developed by the National Guideline
Alliance which is part of the Royal College
of Obstetricians and Gynaecologists*

Disclaimer

The recommendations in this guideline represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, professionals are expected to take this guideline fully into account, alongside the individual needs, preferences and values of their patients or service users. The recommendations in this guideline are not mandatory and the guideline does not override the responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or their carer or guardian.

Local commissioners and/or providers have a responsibility to enable the guideline to be applied when individual health professionals and their patients or service users wish to use it. They should do so in the context of local and national priorities for funding and developing services, and in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities. Nothing in this guideline should be interpreted in a way that would be inconsistent with compliance with those duties.

NICE guidelines cover health and care in England. Decisions on how they apply in other UK countries are made by ministers in the [Welsh Government](#), [Scottish Government](#), and [Northern Ireland Executive](#). All NICE guidance is subject to regular review and may be updated or withdrawn.

Copyright

© NICE 2021. All rights reserved. Subject to [Notice of Rights](#).

ISBN:

1 **Additional consultation/fieldwork activity for Safeguarding adults in care homes NICE**
2 **guideline. July - September 2020.**

3 Since this guideline is focused on care home services and in order to ensure care home
4 provider organisations had adequate opportunity to respond to the consultation, contact was
5 made with the Care Provider Alliance in July 2020, which draws together all adult social care
6 associations operating in the voluntary and independent sectors (the majority of providers).
7 Five organisations covering care homes were given the option of responding to five focused
8 questions, rather than, or as well as, the full consultation document, should the pressure of
9 work, prohibit them from allocating sufficient time to a full response (consultation was at the
10 height of the Covid-19 pandemic first wave, which hit care homes significantly, as is well
11 documented).

12 The organisations contacted were: Care England, National Care Forum, Voluntary
13 Organisations Disability Group, Registered Nursing Homes Association and National Care
14 Association.

15 Two of the five organisations (Care England and National Care Forum) chose to respond
16 through the formal NICE consultation process and the responses to their points can be seen
17 in the main stakeholder comments document. One, the National Care Association (NCA),
18 responded to the focused questions; the questions, comments from NCA and responses by
19 NICE can be seen below.

20 **1. To what extent is the guidance in line with your established policies and**
21 **procedures on safeguarding? If you will need to make changes, how**
22 **extensive will they be?**

23 **NCA:** Most Care Providers will have established policies and procedures in place
24 already. The guidance reiterates what is required and a good indicator for Care
25 Providers to review what they currently have and what they need to create. If
26 changes will need to be made, I do not envisage them being so extensive if
27 policies and procedures are already in place.

28 **NICE response:** Thank you for your comments.

29 **2. To what extent does the guidance help staff at different levels understand**
30 **their responsibilities in responding to concerns?**

31 **NCA:** The guidance is helpful in describing the responsibilities of individuals
32 concerned and we welcome the responsibilities that are placed on LA's. In
33 practice there needs to be greater transparency with the relevant LA and a
34 consistent approach in relation to the local guidance. There needs to be a
35 collective partnership between all stakeholders, in practice it is very much a "them
36 and us" approach. A collaborative approach will create clear pathways and
37 manage responses and expectations.

38 **NICE response:** The guideline encourages collaborative working between care
39 home providers and local authorities and specifically suggests the Safeguarding
40 Adults Boards should check that there are good lines of communication between
41 them.

42 **3. To what extent does the section on induction and training reflect your**
43 **current practice? If you will need to make changes, how extensive will they**
44 **be?**

1 **NCA:** This is more descriptive and although welcomed care providers will have
2 concerns about additional costs and time this will take in ensuring that they are
3 compliant with the guidance. We welcome mandatory safeguarding training for
4 staff on a “multi-agency basis, between service providers and other health and
5 social care organisations”, but would query how this would work in practice.

6 **NICE response:** The Care and Support statutory guidance to the Care Act 2014
7 (reference 14.225) states that employers and voluntary organisations should
8 undertake training as specified for all staff and volunteers and SABs have a
9 responsibility to ensure that relevant partners have the necessary training in
10 place. The Committee did not envisage significant additional resource
11 implications of combined training with other relevant organisations, since each
12 organisation would already have expenditure on training which might be
13 combined.

14 **4. Regarding organisational abuse and neglect, do the indicators and**
15 **recommendations promote good practice?**

16 **NCA:** Yes. The definitions to indicate abuse or neglect, “consider” and “suspect”
17 are very clear and easy to determine. The indicators and recommendations
18 promote good practice.

19 **NICE response:** Thank you for your comment.

20 **5. To what extent do you think these guidelines will be helpful in clarifying**
21 **shared understanding and lines of accountability across different agencies**

22 **NCA:** Section 1.3.13 Multi-agency working and shared learning with other
23 organisations. We would recommend that this wording is changed slightly so that
24 it is not only Care Homes who are accountable. The onus is on the “Care Home
25 to work with the LA/CCG and other local agencies to establish a local strategic
26 partnership agreement”. Could this be amended to reflect that all Stakeholders
27 are to work together to establish a local strategic partnership agreement?

28 **NICE response:** Thank you for your comment. The committee have amended
29 recommendation 1.3.13 to better cover the need for organisations to work
30 together to establish local strategic partnership arrangements to reflect this point.

31 **NCA:** The draft guidance in principle is very useful and descriptive in relation to
32 terminology and definitions. If a more collective, coherent approach is defined
33 between relevant stakeholders within the guidance, then there is less room for
34 misinterpretation and misunderstanding.

35
36 - **NICE response:** The committee recognised throughout the importance of agencies
37 working together to safeguard people using care home services and to deal with
38 instances of abuse or neglect. The approach with the recommendations, the
39 definitions and the way the guideline sections have been organised is to improve
40 consistency and reduce misunderstanding.

41
42