



NEWSLETTER

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Foreword

In the Spring we organised a conference on Adverse Childhood Experiences – ACEs – and their impact on adults. It was a joint event, bringing together the safeguarding boards for children and for adults, and working with our partners in South Tyneside. About 400 people spent the day reflecting on how our experiences in childhood can colour all our life, and what this might mean for services.

Adverse Childhood Experiences (ACEs) are stressful events occurring in childhood which lead to toxic stress in children. They can include domestic violence, parental abandonment or divorce, being a victim of abuse or neglect, or growing up in a household where adults have drug or alcohol problems.

Shockingly, research now shows that adults who experienced four or more ACEs during their own childhood are much more likely to spend time in prison, to have mental health difficulties, to have substance misuse issues, or even to experience diabetes or heart disease. The impact of bad experiences in childhood rolls down the generations.

A large number of children growing up in Sunderland will experience ACEs at some point. Generally, children will not be severely impacted by a single ACE, but the more ACEs a child experiences the more likely it is that their lives will be negatively impacted in a range of ways.

Why does this happen? The root of the issue is trauma. If a child frequently has bad experiences, they may learn to “shut down” their emotional responses. Some learn that any new experience can be threatening, and develop defensive responses that stop them learning from new situations. We need to become better at spotting the signs of trauma, and learning how to help people who are displaying those signs.

A century ago, young soldiers who experienced the trenches were labelled as “cowards” for what we now think of as “shell shock”. In modern language, those soldiers had post-traumatic stress disorder – PTSD. More recently we learnt to recognise those symptoms as short-term adaptations to disasters or accidents. Now, research is showing us that PTSD is more common than we have previously realised. Understanding trauma, and its effect on many of the vulnerable people we see in Sunderland, will be key to stopping disadvantage from continuing to cascade down the generations.

Sir Paul Ennals CBE
Independent Chair, SSAB

[Sunderland Safeguarding Adults Board \(SSAB\)](#) is a multi-agency partnership providing strategic leadership for adult safeguarding across the City of Sunderland to promote the welfare of adults at risk of abuse and neglect, and is responsible for ensuring the effectiveness of what partner agencies do to support this. **Follow us on Twitter:** @SunderlandSAB

Focus on: Loneliness

Loneliness can be described as a subjective, unwelcome feeling of lack or loss of companionship. Loneliness can be a transient feeling that comes and goes, it can be situational; for example only occurring at certain times such as Christmas, or loneliness can be chronic, meaning that a person feels lonely most of the time.

Whilst loneliness is linked to social isolation, they are not the same. One way of describing this distinction is that you can be lonely in a crowded room, but you will not be socially isolated.

Loneliness can be felt by people of all ages, but risk factors can increase with age. Such risk factors include (but are not limited to):

Personal

- Poor health
- Sensory loss
- Loss of mobility
- Lower income
- Bereavement
- Retirement
- Becoming a carer
- Other changes (e.g. giving up driving)

Wider Society

- Lack of public transport
- Physical environment
- Housing
- Fear of crime
- High population turnover
- Demographics
- Technological changes

Research carried out by the Campaign to End Loneliness identified that almost half of respondents said their busy lives prevented them from connecting with others. Social media and mobile phones means that people are often distracted and not present in the moment, especially when in public.

Tackling loneliness matters to everyone - to individuals, employers, communities, educators and health and social care workers. Supporting people to have meaningful social relationships is crucial to people's physical and mental health.

There are a number of things we can do to tackle loneliness, from something as small as saying hello or smiling to someone passing in the street, to picking up the phone to talk to a friend or relative, or even joining a friendship group.

The resources below provide helpful information and suggestions to tackle loneliness, whether in a personal or professional capacity:

[Helping your parents to overcome loneliness](#)

www.gov.uk

[Campaign to End Loneliness](#)

[Age UK](#)

[Social Care institute for Excellence](#)

[Be More Us](#)

Loneliness: The Facts

- Loneliness, living alone and poor social connections are as bad for your health as smoking 15 cigarettes per day
- Lonely people are more likely to experience dementia, heart disease and depression
- Loneliness is likely to increase a person's risk of death by 29%
- Over 9 million people in the UK, across all adult ages, are either always or often lonely
- The number of over 50s experiencing loneliness is set to increase by 49% from 2016/7 - 2025/6
- There are currently 1.2 million chronically lonely older people in the UK
- Half a million older people go at least 5 or 6 days a week without seeing or speaking to anyone at all
- Two fifths of older people (about 3.9 million) say the television is their main company

Source: [Campaign to End Loneliness](#)

Your Voice, Your Decision

The Office of the Public Guardian (OPG) has launched a campaign to promote the importance and benefits of Lasting Power of Attorneys (LPAs) and to clear up some of the myths surrounding LPAs.

The campaign is aimed at older people (60+) from lower socio-economic backgrounds. They may have heard about LPAs but don't know much about them, or understand the benefits of taking out an LPA. The campaign is also aimed at potential attorneys (often the loved ones or children of older people who may need to manage legal issues surrounding their parent's finances, health, or property), and raise their awareness about the benefits of LPAs.

The campaign includes printed materials, such as posters and leaflets, as well as digital resources and a simple video explaining the LPA process.

Campaign materials can be accessed [here](#).

- It's a myth that close family or friends can automatically make decisions on your behalf if you need them to
- A lasting power of attorney means someone you trust can quickly, easily and legally step in
- You keep control by deciding who can speak for you, when they can speak for you, and what they can say
- It's not just about money - your choices about your health and care also need protecting
- If things are straightforward you don't need to seek legal advice
- Registering an LPA is probably easier and cheaper than you think. Depending on your circumstances, it can even be completely free

Liberty Protection Safeguards

The Mental Capacity (Amendment) Bill was approved by Parliament on 24th April 2019, meaning it will become law shortly, when it receives Royal Assent. When the legislation comes into force, which may be as early as Spring 2020, it will repeal the Deprivation of Liberty Safeguards (DoLS) contained in the Mental Capacity Act 2005, and replace them with a new scheme called the Liberty Protection Safeguards (LPS).

The background to the Bill is, in part, the response to the widening of the scope of the meaning of deprivation of liberty following by the [ruling of the Supreme Court in Cheshire West](#) in March 2014, which resulted in substantial increases in the number of cases referred for a DoLS authorisation.

The LPS will apply to people aged 16 and over, and whereas DoLS only apply to hospitals and care homes, the LPS can be used in other settings, such as supported living, shared lives and private and domestic settings. The LPS will also replace the 'supervisory body' under DoLS with 'responsible body', as the agency charged with authorising the arrangements that give rise to a deprivation of liberty.

The government is currently working on the LPS code of practice, which it has committed to publish for public consultation later this year, and a number of regulations will also need to be drafted before the legislation can be implemented. The government have also confirmed that for up to a year the DoLS system will run alongside the LPS to enable those subject to DoLS to be transferred to LPS in a managed way.

Further information regarding the progress and implementation of the LPS will be reported in future newsletters.

Safeguarding Adults Training

SSAB offers a range of Safeguarding Adults Training, which is available to all employees and volunteers working in health and/or social care settings, care homes and home care service providers, and the voluntary and community sector within Sunderland.

Training includes online eLearning courses:

- **Alerter Training**: suitable for all staff and volunteers who work with, support or come into contact with adults at risk of abuse and/or neglect
- **Mental Capacity Act (2005) and Deprivation of Liberty Safeguards (DoLS)**: suitable for all staff and volunteers working with, supporting, or who come into contact with adults who may lack capacity to make their own decision, or who may/are being cared for under a DoLS decision

Classroom-based courses:

- **Raising a safeguarding concern**: suitable for workers who may receive an Alert from a member of staff. Typically for staff who act in a supervisory or managerial capacity and/or designated as having the Safeguarding Adults 'Responsible Person' role in their organisation
- **Multi-agency roles during the safeguarding process**: suitable for workers whose role requires them to be involved in cross-agency or inter-professional safeguarding enquiries. Such staff would normally be responsible for attending and contributing to safeguarding meetings
- **Mental Capacity Act (2005) and DoLS**: suitable for anyone working with or caring for adults who may lack mental capacity to make their own decisions, anyone working in adult registered care homes or hospital in-patient settings, and anyone working with individuals being cared for in the afore-mentioned settings
- **How to assess mental capacity**: suitable for 'frontline' staff working with adults who may lack capacity, and supporting decision making and safeguarding, such as Occupational Therapists, Social Workers, Nursing staff, Housing Officers, etc.

For more information or to book a place please contact [Learning and Skills North East](#):

telephone: 0191 5612620, email: info.twca@sunderland.gov.uk

Annual Safeguarding Conference

In March 2019 SSAB, in partnership with local Adults and Children Safeguarding Boards, and Healthcare Providers, hosted the 2nd Annual children and adults Safeguarding Conference at Rainton Meadows Arena.

The event focussed on 'think family', specifically adverse childhood experiences and the potential affect throughout a person's life. The event was a huge success and very well attended with representation from a wide range of organisations. Planning has already begun to prepare for next year's event.

Report a Concern

Everyone has a responsibility to safeguard children, young people and adults who may be at risk of abuse.

If you are worried about someone:

- In an emergency call 999
- If there is no immediate risk, call the police on 101

If you are a professional wishing to report a safeguarding concern regarding an adult, please read the [guidance](#) and complete the [Safeguarding Adults Concern \(SAC\) form](#). Further information is available [here](#).

If your concern relates to a child, please call 0191 520 5560.

Future Articles

If you have an idea for an article for a future publication, please contact the Strategic Safeguarding Team: strategic.safeguarding@sunderland.gov.uk