

# **Incidents Between Residents**

## Version 4

Our safeguarding arrangements will effectively prevent and respond to adult abuse

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Template Revision Number	Date Approved by the Board	Links to Other Policies	Review Date:
Version 1	January 2019		
Version 4	Not required, minor addition of 2.2		March 2025

### **Incidents Between Residents**

When a Safeguarding Concern is submitted linked to an 'Incident between Residents' in a Care Home, the following advice can be used to help Local Authority staff respond to the Concern in a consistent manner.

### 1. Initial fact finding

#### 1.1 Did harm occur?

- What are the extent of any injuries?
- Was there any psychological harm?
- Was there any sexual abuse (including inappropriate touching)?
- Was there any verbal/discriminatory abuse?
- Where there any objects involved that caused injury?
- Is there any CCTV footage?

#### 1.2 Do the residents involved have the mental capacity to understand what has happened?

• Is a Mental Capacity Act Assessment required?

#### 1.3 Was this an isolated incident with any of the residents involved?

- If no, have any of the adults been involved in any previous and or similar incidents?
- Have case notes been examined to check this? (Do Local Authority records have any background history?)

The Teeswide Safeguarding Adults Board Inter-Agency Policy and Procedures, and Decision Support Guidance should be used to help inform the approach taken by staff in determining if the incident will lead to a Section 42 Enquiry. See here: <u>https://www.tsab.org.uk/key-information/policies-strategies/</u>

#### 2. What action has already been taken?

#### 2.1 Where did the incident occur?

- What is it in a communal area?
- Was this in a resident's room?
- 2.2 Is the service utilising high levels of agency staff?
  - What was the ratio of agency staff on duty?

#### 2.3 Were there any contributing factors? (See below):

- Urinary or other infection
- Incontinence
- Frustration or boredom, including lack of meaningful activities
- Medication error or other medical issue
- Fatigue, hunger or thirst
- Lack of privacy
- Noise and crowdedness
- Seating arrangements or disagreements about this in the communal areas
- Poor signage resulting in wayfinding problems, including residents going into other people's rooms
- Inadequate lighting (too bright or too dark)
- Too hot or too cold inside the Care Home
- Indoor confinement, especially in the darker winter months
- Isolation or loneliness
- Disagreement over TV programmes

- Pain or constipation
- Memory loss

#### 2.4 Where were the staff when this happened?

- Was there a low staff to resident ratio?
- Did any of the individuals have a behaviour support plan, or 1:1 supervision in place, and if so was this adhered to? (Are there written records linked to this?)
- Do staff have appropriate training in recognising warning triggers and de-escalating incidents?

#### 2.5 Has a Root Cause Analysis been conducted?

- What triggered the incident?
- What was happening at the time in the Care Home?
- Who was around and involved?
- What time of the day was it and is there a pattern or trend?
- Why did this happen, and what is being done to prevent further occurrences?

2.6 Have risk assessments and care plans been updated, reviewed or amended as necessary?

- Have any changes been communicated to staff effectively and promptly?
- Are changes to in-house routines or procedures required?
- Do any residents need any additional supervision or observation?
- Is there a need for any new assessments?
  - Mental Capacity Act
  - o ICLS
  - o Inter-disciplinary, including for medication or other health related issues.