



# Making services easier for people to engage in

June 2024

Our safeguarding arrangements will effectively prevent and respond to adult abuse

Template Revision Number	Date Approved by the Board	Change Record	Links to Other Policies	Review Date:

## 1. Introduction

The aim of this guidance is to provide information and strategies for professionals supporting adults with care and support needs who find it difficult to engage with services. This guidance seeks to understand the reasons for which adults may find it difficult to engage with services and to support good practice in engaging with those adults. It should be used in conjunction with the Teeswide Inter-Agency Safeguarding Policy and the Teeswide Inter-agency Safeguarding Adults Procedure.

This guidance relates only to adults. Where there is a concern relating to a child (a person under 18), reference must be made to the Local Safeguarding Children Partnership procedures.

Everyone has a responsibility to take a 'Think Family approach' which requires all agencies to consider the needs of the whole family from working with the individual members of it, making sure that support provided by children's, adults and family services is coordinated and takes into account of how individual problems affect the whole family.

## 2. Why do people find services difficult to engage with?

There are many reasons as to why an adult may not engage with a service. It is important to obtain a fuller picture from the person, carer or other services/ professionals as to why someone is finding it difficult to engage with a service so steps can be taken to overcome these barriers.

A person's individual needs, including but not limited to learning disabilities, physical disabilities, sensory needs, language barriers, low levels of literacy, health issues, mental ill health or other individual needs/ circumstances (for example low income, inability to travel to an appointment or having caring responsibilities) may make it more difficult for someone to engage with a service. Individuals who are also digitally excluded or isolated and don't have access to or find it difficult to use the telephone or internet may also be unable to engage with services when other forms of communication are not utilised.

It should be noted that some adults have faced multiple disadvantages throughout their lives, which for a number of reasons may also impact their engagement with services.

Some adults may also not engage with services due to:

- **Trust:** The person does not trust professionals due to past experiences or their perception of services.
- **Coercive control:** The person is being forcefully influenced by a third party and may be experiencing Domestic Abuse, Financial Abuse or Psychological Abuse for example.
- **Lack of communication methods:** The person may be homeless or of no fixed abode and may not be able to receive correspondence. They may also not have access to a mobile phone or landline.
- **Trauma:** An individual's experience of trauma and subsequent trauma responses (see section on Trauma Informed Approach).
- **Fear:** The person is afraid they may be removed from their home or concerned about the consequences or impact on themselves or others, including referrals to social services.
- **Services not adapting to the individual's needs:** Services may not be flexible enough to support the person in the way that they need to be supported in line with

their individual needs. This could relate to the accessibility, location, environment or policies and procedures of the service. Consider if you are working towards the right goals for the person agreed with the person, and not goals set by professionals. Also consider if there is someone else in the team who may have a different set of skills or experiences that are better suited to the individual to support engagement?

### 3. What might non-engagement look like?

Non-engagement can include missed appointments, not answering phone calls and someone finding it difficult to engage with a service, possibly because of the way systems are set up. It can also include appointments being cancelled or cut short due to 'double-booking' and behaviours which appear to be co-operating with the service to minimise a professional's concerns. This can result in interventions being delayed or cases being closed due to a perceived reduction in risk.

### 4. Professional Curiosity

Professional Curiosity describes a set of skills professionals should adopt to delve beyond what a person is telling us. It is not taking things at face value, but is about using multiple sources to gather information, such as understanding body language, questioning skills, communication skills, case history/ records, other professionals and the person's family and friends rather than making assumptions.

Being 'professionally curious' as to why someone may be finding services difficult to engage with is important to enable strategies to put in place to support a person to engage and to prevent missed opportunities.

### 5. Trauma Informed Approach

Being mindful as to 'why' someone doesn't turn up to an appointment or 'why' someone isn't on time for their appointment is important in trauma informed practice. Brain development in people who have lived through trauma can be attuned to surviving which means that cognitive functions such as planning how to get somewhere, deciding on how to get there, and focusing on the task of getting to an appointment can all prove difficult. If someone turns up late, they should be thanked for turning up, as it would have taken effort to get there. This doesn't mean that we have to bend and change appointments for them if this is not possible, it just means we validate their effort.



Services being delivered in a way that is not patronising, is important to those who access them.

### Why might someone with trauma related symptoms avoid accessing services?

- Concern for safety/fear of retribution
  - Fear of being judged by services
  - The shame of being a victim
  - Lack of trust in services
  - Not seeing their events as traumatic, it is just the norm and not important
  - Not recalling trauma due to denial, repression, or dissociation
  - Tired of being assessed
- Be curious if you are working with someone that misses appointments or who turns up late. They might feel anxious about meeting with you or about the environment they are coming to. By finding out if someone feels unsafe engaging with a service means that we

can put a plan in place to make engagement easier for them and ensure they are in a good place to fully engage in our intervention.

- ☑ 'Did not attend' and 'three strikes and you're out', are processes that are not flexible when dealing with people that are living with trauma. To be truly trauma informed, a service needs to show that it can respond to trauma effectively with policies, procedures, and referral pathways.
- ☑ Optimum engagement is needed to help with growth and healing from trauma. If a service builds flexibility into their procedures, which in turn encourages and maintains engagement with service users, then they are opening up the possibility of improved engagement. Providing people with symptoms of trauma a different response to their usual 'closed case' response, can be a huge part of healing. It challenges their altered world view, there's no judgement, just validation and a consideration for how they respond to the world.



**Consider taking an assertive outreach approach and bringing support to where the individual is at as opposed to asking them to fit into your ways of working.**

## 6. Multi-Agency Working

Working together with other agencies to share information and discuss next steps is essential when trying to engage person in support. People may engage with some services/professionals more successfully than others and therefore joint visits for example could be more effective. A 'Think Family' approach should also be adopted, acknowledging the risks that the non-engagement may have on other adults and children.

Multi-disciplinary team (MDT) meetings are often held in order to coordinate health and care services to meet the needs of individuals with complex care needs.



**Read: TSAB's [Multi-Disciplinary Team \(MDT\) Guidance](#)**

## 7. Professional Challenge

Where differing perspectives exist within safeguarding practice, professional challenge may arise. This can be a positive activity and a sign of good professional practice, a healthy organisation and effective multi-agency working.

The safety of the adult is the paramount consideration in any professional disagreement (for example where professionals may disagree about the closure of a case due to disengagement) and any unresolved issues should be escalated with due consideration to the risks that might exist for the adult and in line with [TSAB's Professional Challenge Procedure](#).



**Read: TSAB's [Professional Curiosity and Professional Challenge Briefing](#)**

## 8. Consent

Consent to share safeguarding information with partner agencies is a challenging one for safeguarding professionals. It is rightly recognised that adults may choose not to consent to professionals sharing information about them with other agencies for a variety of reasons, in general, their wishes should be respected.

There are circumstances where professionals can reasonably override the lack of consent:

- The adult lacks mental capacity to consent to their information being shared to safeguard them
- Emergency or life-threatening situations may warrant sharing
- Other people are or may be at risk of harm
- Sharing information could prevent a serious crime or a serious crime has been committed.
- The risk of harm is high and a duty of care needs to be considered



Decisions to override consent should be carefully recorded and appropriate advice sought. You should refer to your own organisations policies and procedures and guidance from your line manager.

## 9. Acknowledgements/ Further Resources

In preparing this guidance, the Teeswide Safeguarding Adults Board would specifically like to acknowledge the material provided by SAB Managers Network, including documents from Newcastle Safeguarding Adults Board and Birmingham Safeguarding Adults Board.

In addition, the following documents were referred to and can be accessed as further sources of information and support:

- Richmond and Wandsworth Safeguarding Adults Board: [Principles of engagement to improve communicating and working with people](#)
- Norfolk Safeguarding Adults Board: [Professional Curiosity Guidance](#)
- Wigan Safeguarding Adults Board: [Understanding Non-Engagement with Services](#)

### Further TSAB Resources:

#### [Local Policies, Procedures and Guidance](#)

- Decision Support Guidance

#### [Trauma Informed Practice Workbook](#)

## Options to consider where an individual/ family find it difficult to engage with a service

### Ask yourself:

- Are you concerned that non-engagement increases the risk to the individual or others? (Consider 'Think Family', risk of fire etc...)
- Have you noticed a change in engagement with the person you are working with and this worries you?
- Have you asked the person or their carer why they find it difficult to engage and what could be changed to make it easier for them to engage? (consider sensory needs, disabilities, autism, location, time, reasonable adjustments)
- Have you consulted your manager/ own agencies policies and procedures (including risk assessments) in relation to non-engagement?

### Have you tried:

- Phone calls/ text/ email
- Home Visits/ Joint Visits/ Assertive outreach
- Meetings in a mutual location and at different times
- Unscheduled visits
- Letters (consider [accessibility](#) of these and [easy read](#) versions)
- Appointments
- Other agencies
- GP Contact
- Social Prescribing
- Trusted Family Member/ Carer/ Advocate
- Carer's assessment
- [MDT](#) meeting
- Line Manager Discussion

### Have the following concerns/ issues been raised?

- [Lacks capacity](#)
- Is vulnerable
- Mental Health
- [Safeguarding Concern](#)
- Family Pressure
- Family acting as gatekeeper?
- Coercive control
- Risk to others
- Multiple disadvantages
- Consent to share information?

## Continue exploring ways to engage with the individual

### Next steps to consider

- Discuss the case with your Line Manager
- Escalate your concerns internally within your own organisation.
- Complete a Risk Assessment (follow your own organisations Policies and Procedures)
- Consider raising a [Safeguarding Concern](#)
- Consider a Mental Health Assessment/ Referral
- Where there are concerns about safety, consider contacting Police
- Consider a Mental Capacity assessment
- Do not assume that someone else is doing something, communicate with colleagues and partner agencies
- Seek advice from partner agencies
- Convene a multi-agency meeting if you haven't already ([see MDT guidance](#)). Colleagues from different agencies need the opportunity to share information and discuss the best way forward with families/ people who do not engage.
- Where other multi-agency processes have not been successful in reducing risk or harm and where a strategic approach to case oversight is required, consider discussing a referral to the [High Risk Adults Panel \(HRAP\)](#) with the appropriate person in your organisation (follow your own agencies policies/ procedures).
- Seek legal advice

## Principles of Engagement

Trauma Informed Care

### Communication



Ask the person what their preferred method of communication is. Knowing how the person prefers to be communicated with will improve the chances of them being able to engage. Take into account factors such as the person's ability to read and write, what their first language is, would they require an interpreter or information in a different format? Be mindful of your responsibilities under the Equality Act 2010 and implementing reasonable adjustments.

### Vulnerabilities and Individual Circumstances



Recognise the extent to which a person's vulnerability and individual circumstances may impact on their ability to engage. Consider factors such as Learning Disability, substance use, controlling or coercive behaviour and capacity. Always consider what you know about a person's needs and the extent to which these may impact on the person's ability to engage.

### Mental Capacity



Remember to use the Mental Capacity Act to empower people to make decisions and support people who may lack the capacity to make some decisions. Remember to consider the extent to which a person's capacity to engage with services may have been affected by threatening, controlling or coercive behaviour. Consider the person's mental capacity to engage but also the consequences of non-engagement. When considering a person's capacity in relation to engagement it is really important to consider whether the person understands the consequences of non-engagement. The risks might relate to areas such as the person's health, access to benefits, offers of care and support.

### Lead professional



Where possible, identify a lead professional to build up a trusting relationship with the person. The lead worker will be in a vital position for monitoring trends of engagement, sharing information and assisting the person through service navigation. The lead professional may change depending on the circumstances of the case and the management of risk remains a shared responsibility. Make sure all professionals are aware who the lead is. As part of the safeguarding adults process consideration must also be given to whether the adult may benefit from the support of an independent advocate

### Working together



When a person's circumstances change, or concerns arise about their lack of engagement, don't presume that other professionals are aware of what you know. Build up good relationships with professionals from other agencies and ensure that information is shared appropriately, using safeguarding procedures if required. Where a Safeguarding Adults Plan is in place, it should be clear how information will be shared between all of the agencies involved, including how concerns will be escalated if the person's lack of engagement continues to be a risk factor.

### Recording



Be careful what you record around engagement or lack of. The language used in your recording can make a big difference. Terms like "failed to attend" and "difficult to engage with" place the emphasis solely on the person, there may be external factors impacting on a person's ability to engage. Recording of this nature can also affect the way another professional may approach the case.

### Persistence



Just because a person has not engaged with services in the past, it does not mean that this will always be the case, this time it might be different. Be tenacious with clients and always let them know that services are available should they need them.

**Record your decisions at all times, including your rationale**

