



Devon Prison Cluster

# Buddy Support Worker Induction Programme

Prisoners assisting other prisoners



## Safeguarding adults, including self-harm

Adapted from Care Standard 10  
Behaviours from the NHS 6 Cs

# To complete this module...

you will need to show that you understand the outcomes listed below. Please use this booklet as a guide but don't copy directly from this. When writing your answers in your workbook, please try to give your own examples.

**The prison service actively seeks to reduce risk of harm to a person from themselves, from others and to others.**

## Outcomes

- Explain how the Prison policy on safeguarding relates to prison life.
- Explain why an individual in Prison may be vulnerable to harm, from self or others.
- List some signs and symptoms that you might notice if someone is being abused.
- Explain self-harming and how individuals can self-harm?
- Understand how to support someone who is self-harming within the regime of the Prison.
- Explain what you would do, if you thought someone was being abused or harmed (make reference to the local safeguarding policy).

**In addition to those outcomes listed above you will also be observed in the workplace and will need to demonstrate the below outcomes:**

- Show that they are able to identify safeguarding issues, with the individuals they are supporting and appropriately report the issues.
- Demonstrate ways in which you support an individual who is self-harming.

# Safeguarding at the Devon Prison Cluster Group

**Exeter Prison  
Channing's Wood  
Prison Dartmoor Prison**

## Introduction

All adults in need of safeguarding have the right to live their lives free from abuse of any description. All agencies and individuals that have contact with adults in need of safeguarding have a duty to protect them from abuse. Where abuse is reported to or suspected by any person the response will be prompt and in line with prison service policies.

The overriding consideration at all times will be the appropriate protection of adults in need of safeguarding;

Appropriate protection takes place alongside the need to ensure that individuals have self-determination and autonomy of choice;

All staff have a duty to ensure that adults in need of safeguarding receive the protection of the law;

All staff have a duty of care and must take professional/personal responsibility for responding to any concerns about possible abuse;

All staff have a duty to share information appropriately, to act and to cooperate with colleagues across all agencies, consistent with this policy and the Information Sharing Agreements and Protocols;

Action taken must reflect a commitment to anti-discriminatory practice, to ensure that services are culturally appropriate, and to promote human rights.

# Who is an 'Adult in need of safeguarding'?

**Any person aged eighteen or over who:**

- is or may be in need of community care services by reason of mental or other disability, age or illness; and
- is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation.

In the custodial community we recognise that at times any prisoner could become an adult in need of safeguarding.

The term 'abuse' can be subject to wide interpretation. The starting point for a definition is the following statement taken from No Secrets:

"Abuse is a violation of an individual's human and civil rights by any other person or persons.

Abuse may consist of a single act or repeated acts. It may be physical, verbal or psychological, it may be an act of neglect or an omission to act, or it may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which he or she has not consented, or cannot consent. Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it. Abuse may be perpetrated as the result of deliberate intent, negligence or ignorance.

'Significant harm' should be taken to include: 'ill treatment including sexual abuse and forms of ill treatment which are not physical; the impairment of, or an avoidable deterioration in, physical or mental health; and the impairment of physical, intellectual, emotional, social or behavioural development.'

In the prison environment abuse can also take the form of harassment and bullying.

Bullying may be defined as the activity of repeated, aggressive behaviour intended to hurt another person, physically or mentally. Bullying is characterised by an individual behaving in a certain way to gain power over another person.

Harassment covers a wide range of behaviour of an offensive nature. It is commonly understood as behaviour intended to disturb or upset, and it is characteristically repetitive, it is intentional behaviour which is found threatening or disturbing.

# Methodology

**In line with national guidelines and definitions the following aspects of (and provision for) prisoners' lives will be addressed by this safeguarding policy:**

- Accidents
- Health and Safety
- Violent behaviour
- Challenging behaviour
- Personal and intimate care
- Moving and handling PRACTICE EXAMPLE (ANCHOR TRUST)
- Tissue viability
- Physical interventions (formerly control and restraint)
- Sexuality and relationships
- Control and administration of medication
- Handling service users' money
- Risk assessment and management

Specifically we will actively seek to reduce risk of harm to a person from themselves, from others and to others.

**National and local policies are implemented at every stage of the prisoners' custody and include the following principles:**

Ensuring prisoners have a say in their care: ACCT procedures, Personal Emergency Evacuation Plans, Care Plans, Prisoner Forums and discussion groups, interventions with occupational therapists, help from peers such as Equality Reps, Peer Mentors, Insiders and the Listener Scheme, Samaritans' phones and visits are also available. Families, carers and appropriately interested parties (care professionals etc.) will also be able to be actively involved in ensuring an appropriate level of care is provided. Further to this, Safeguarding reports are available in social and legal visits to ensure visitors are also able to raise concerns in a secure and confidential manner.

**As part of the induction process your Prison Supervisor will take you through their local policy, explaining how it breaks down.**

# Adult Safeguarding

“Adult safeguarding’ is the process of protecting adults with care and support needs from abuse and neglect.” It is “mainly aimed at people with care and support needs who may be in vulnerable circumstances and at risk of abuse or neglect by others. In these cases, local services must work together to spot those at risk and take steps to protect them.” (Taken from The Care Act – Protecting adults from abuse or neglect)

## The Care Certificate Framework terms the following:

**Abuse:** Abuse may be physical, sexual, emotional or psychological. It may be related to a person’s age, race, gender, sexuality, culture or religion and may be financial, institutional in nature. It includes both self-neglect and neglect by others.”

**Harm:** “Harm includes ill-treatment (including sexual abuse, exploitation and forms of ill treatment which are not physical); the impairment of health (physical or mental) or development (physical, intellectual, emotional, social or behavioural); self-harm and neglect; unlawful conduct which adversely affects a person’s property, rights or interests (for example financial abuse).

## Types of Abuse

The categories numbered 1–6 in the list below are directly quoted from the Department of Health’s ‘No Secret’s:

### 1. Physical abuse

Including hitting, slapping, pushing, kicking, misuse of medication, restraint, or inappropriate sanctions:”

### 2. Sexual abuse

Including rape and sexual assault or sexual acts to which the vulnerable adult has not consented, or could not consent or was pressured into consenting”

### 3. Psychological abuse

Including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks;” Note: this is sometimes referred to as emotional abuse.

## 4. Financial or material abuse

Including theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

Since this definition was given the Care Act 2014 has clarified financial abuse in Section 42(3) (a,b,c,d) thus:

- a) Having money or other property stolen,
- b) Being defrauded,
- c) Being put under pressure in relation to money or other property, and
- d) Having money or other property misused.

## 5. Neglect and acts of omission

Including ignoring medical or care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities life, such as medication, adequate nutrition and heating;

## 6. Discriminatory abuse

Including; racist, sexist, that based on a person's disability and other forms of harassment, slurs or similar treatment.

Since the Department of Health (2000) published 'No Secrets...' significant developments have taken place and these need to be included within the safeguarding remit.

**The Equality Act (2010) has extended the protection against discrimination to more groups and it is important to include all of the following nine protected characteristics:**

- Age
- Disability, (including physical, mental and sensory impairment and chronic ill health)
- Gender reassignment
- Marriage and civil partnership status
- Race (including ethnic and national origins, colour and nationality)
- Religion or belief
- Sex
- Sexual orientation
- Hate crime is also a form of discriminatory abuse. It involves harming a person or their property because of a characteristic they hold.

# Indicators of Abuse

Indicators of abuse can be sudden or gradual changes in a person's:

- Behaviour
- Physical appearance
- Emotional state
- Social networks/friendships and social behaviour patterns
- Finances and resources
- Condition of their home or living area
- Attitudes
- Sleep patterns
- Appetite
- A series of unexplained injuries or events

Indicators of abuse in themselves might not always mean a person has been abused they may be a sign of something else such as a physical illness. But you should always flag up a concern.

## Physical abuse

- Physical signs such as bruises, cuts, bleeding, burns, abrasions, broken limbs, which may be in visible areas of the body or concealed by clothing.
- Showing fear or flinching when the abuser is near.
- Providing an implausible reason for the injury or absence
- Self-harm.
- Acting out the behaviour on objects or other people.
- A series of injuries.
- Disengagement with health professionals or changing the GP frequently.

## Sexual abuse

- There may be bruising and discharge around the sexual organs if sexual abuse has taken place but not necessarily.
- Self-harm.
- A change in behaviour.
- Sexualised behaviour and inappropriate body contact with others.
- Avoidance of close or intimate relationships and appropriate body contact with others.
- Torn or soiled underwear.
- Interrupted sleep patterns.
- Sexually transmitted disease.
- Evidence of non-contact abuse – pornography, voyeurism.

## Financial/material abuse

- Suddenly or gradually not having enough money to continue to pay for the things they previously afforded or their income suggests they can afford.
- Selling or pawning items in order to generate extra cash.
- Items or money going missing from the person's home.
- Letters from debt collection agencies.
- Being deprived of bank books, bank cards etc.
- Pattern of not having money when contact with another person or group has taken place.

## Neglect and Acts of Omission

### The individual:

- May look unkempt or poorly clothed.
- May lose weight.
- May start to smell.
- The person experiences ongoing and/or repeated infestations of parasites such as lice, worms, etc.
- The person is not enabled to attend appointments.
- The person is not referred to a doctor when ill and in need of treatment or is not enabled to have their medication when they need it.
- The person develops pressure areas.
- The person may be living without enough essentials such as heating, food and lighting.
- The person has no privacy.
- The person may appear to be ravenously hungry if they have been deprived of food or drink or scavenge for food.

Where neglect is concerned the signs might emerge over a long period.

## Discrimination and Hate Crime

- The person may show fear of a particular person or group of people or
- Go to lengths to avoid them.
- The person is treated less favourably than others who do not share their characteristics.

The person may have a negative rather than a positive attitude to their characteristic.

- The person may make statements which reflect the prejudices of others in order to be liked and accepted by them. They may appear to accept humiliating or degrading treatment from others when in fact they are finding it unacceptable.

## Institutionalised abuse

- Staff in the organisation is feared.
- Service users seek to please the staff or are over compliant.

## Psychological abuse

- Poor sleep patterns.
- Uncharacteristic behaviour e.g. being more or less assertive or aggressive than previously.
- Being anxious, confused showing fear of a particular individual.
- Trying to please the perpetrator or other people in authority.
- Loss of self-esteem.

# Self-Harming

(Information taken from [Self Harm UK](#))

The phrase 'self-harm' is used to describe a wide range of behaviours. Self-harm is often understood to be a physical response to an emotional pain of some kind, and can be very addictive. Some of the things people do are quite well known, such as cutting, burning or pinching, but there are many, many ways to hurt yourself, including abusing drugs and alcohol or having an eating disorder.

Sometimes, it's more important to focus on how someone is feeling rather than what they do to themselves. This is where your listening skills are important in your role as buddy Support Worker.

Everyone has accidents from time to time resulting in cuts and bruises – but it's the injuries that are caused on purpose that are considered to be acts of self-harm. Self-harm often happens during times of anger, distress, fear, worry, depression or low self-esteem in order to manage or control negative feelings. Self-harm can also be used as a form of self-punishment for something someone has done, thinks they have done, are told by someone else that they have done, or that they have allowed to be done to themselves.

People who self-harm normally do not wish to kill themselves. Suicide is a way of ending one's life, but for many people, self-harm is a way of coping with life and being able to continue with living despite the emotional difficulties they may be experiencing. For some, the physical pain of self-harm reassures them they are still alive – this might be because they are experiencing emotional numbness or feeling disconnected from the world around them, or at the other end of the spectrum, feeling more connected and alive than they did previously.

Self-harm can also cause changes in the brain chemistry, which, although 'satisfying', can easily, become addictive and therefore dangerous.

Sometimes people do die as a result of self-harm. This may be because they have taken an act of harming too far, and they lose their lives before help is found.

It is important that you alert the prison staff immediately if you have any concerns regarding an individual and that you follow the Prisons policy and procedure around Safeguarding and monitoring individuals who self-harm.

# What can you do to support individuals in your role as Buddy Support Worker?

## Person-centred values and empowerment

### The right to choose

Making a choice is the same as making a decision. Making their own choices is the most direct way in which an individual is able to exercise control over his or her life.

There are strict procedures in a Prison environment and you need to work within the regulations set out by the Prison for everyone's safety – but there are choices that an individual can make and even how small this may seem it is important to ensure that this choice is not taken away for the individual.

Being able to make decisions which directly affect our lives and the services we have is empowering. When people are involved in making decisions which directly affect their lives they may wish to do something with which others disagree. If they have the mental capacity to make such a decision they have a right to do so and to have the support to carry it out if it is not going to compromise the safety of other people. It does not mean that they have the right to neglect their own duty of care towards other people or to put anyone (including themselves) at significant risk of being harmed.

**You can educate them about abuse.** This includes explaining in ways they understand best what is harm and the types of abuse and that abuse and harm are not related to the intent but to the outcome. Explain the duty of care. Explain that sometimes even people they love and trust may harm them either intentionally or unintentionally. Reinforce the fact that the victim is not to blame.

**You can explain that perpetrators of abuse may repeat the abuse** if it is left unaddressed. Some perpetrators may need protecting in order to prevent them from harming others.

**You can explain how to report suspected/alleged abuse.** Enable people to know what to do if they experience abuse or suspect it might have occurred, is occurring or may occur for someone else.

**You can remove the stigma and guilt attached to being a victim of abuse.** Reinforce the fact that it is the perpetrator not the victim who is responsible for the abuse.

**You can reinforce that they will be believed and supported** if they make a disclosure or raise a concern and that they should not keep it to themselves.

**You can explain that when a concern is raised it is treated with strictest confidentiality** and when information is shared on a need to know basis it is shared only with others who are also bound by the same rules of confidentiality.

**You can explain that as a Buddy Support Worker you cannot keep a secret about abuse** but need to share it with those who need to know in order to investigate and address it.

**You can enable the person to identify the risks they may face** and to know how to address the risks to minimise the dangers.

**Make sure that at all times you follow the Prisons procedures and policies and alert the Prison Staff to any concerns you have, ensure you seek Professional advice and support.**