

COVID-19 AND SAFEGUARDING

COVID-19 is an extremely challenging situation for everyone, including primary care. We are significantly changing the way we work and facing staff shortages. Our colleagues in partner agencies will be facing the same challenges. During this time, we need to ensure that we continue to work together to safeguard our most vulnerable patients.

The role of primary care in safeguarding at this time is to continue to recognise when children/adults/families are struggling or potentially suffering abuse or neglect, signpost to resources which can help, refer to other agencies as available and appropriate and support vulnerable patients were possible. This may include making safeguarding referrals as you would normally do through your local pathways – be aware these may be different from normal.

Some of the implications of Covid-19

Children and adults will continue to be abused and neglected throughout this time. Some may be at higher risk, for example:

Children on Child Protection Plans, Looked After Children or children who are classed as a Child in Need: they and their families/carers may not have their usual support systems to rely on and therefore be at heightened risk of worsening abuse or neglect.

Adults who are vulnerable and isolated may be at increased risk of financial exploitation by some pretending to help under the guise of 'COVID kindness'. Families will be under increased amounts of stress due to new financial pressures, household isolation, school closures and lack of normal outlets for stress and frustrations.

Children, young people and vulnerable adults who are already at risk of abuse or neglect, may be more at risk as their normal support mechanisms are not in place and frontline professionals have less capacity to support and safeguard.

- For many vulnerable patients and families, contact with primary care may be one of the few professional contacts they have in the coming months. During consultations, consider if they could be experiencing significant harm and safeguard appropriately. Be professionally curious.
- For patients who are victims of domestic abuse, self or household isolation could mean they are at additional risk of abuse, trapped in their homes with their abusers and isolated from the people and the resources that could help them.
- Subtle signs of abuse and/or neglect may not be as obvious during phone/video consultations. Victims of abuse may be unable to speak freely if consulting from home.

Practical tips for safeguarding children, families and vulnerable adults during this period

For phone or video consultations:

Check who else is in the house/room when you are consulting.

Ask about what support they have, how they are managing with isolation/schools closing/social distancing.

Ask if they feel safe.

Consider use of 'closed' questions when asking about safety – questions with 'yes/no' answers may help a victim of abuse share that they are being harmed.

Encourage and promote ongoing social support and contact with their friends and family through virtual means e.g. by phone, video chat.

For families with young babies, share the ICON message (see resources)

- An infant crying is normal and it will stop! Babies start to cry more frequently from around 2 weeks of age.
- Comfort methods can sometimes soothe the baby and the crying will stop. Is the baby hungry, tired or in need of a nappy change?
- It's okay to walk away if you have checked the baby is safe and the crying is getting to you. After a few minutes when you are feeling calm, go back and check on the baby.
- Never, ever shake or hurt a baby. It can cause lasting brain damage and death.
- Knowing who your local domestic abuse agencies are and how you can refer patients to them at this time.
- Follow local safeguarding procedures if you become aware there are children or vulnerable adults experiencing domestic abuse. Consider a MARAC referral if there is a significant risk of harm.

SafeLives have developed specific resources for domestic abuse and COVID (see resources).

If you are an IRIS Domestic Abuse Aware Practice, please continue to refer patients to your IRIS Advocate Educator (see resources).

- Keep communication channels open with other key health/social care professionals who are involved in the care of vulnerable children and adults. Continue to share information as you would normally for the purposes of safeguarding, including for strategy meetings, child protection and adult safeguarding enquiries, safeguarding case conferences.
- The roles of practice staff may be different at this time due to redeployment, self/household isolation, or staff needing to work from home: it may therefore be possible for staff other than GPs to support safeguarding work within the practice during this difficult time. GPs who are self-isolating at home but are otherwise well may also be able to help with this.
- Whilst safeguarding training is not a priority at this time, safeguarding patients will remain an important and essential role for primary care. Seek advice from your colleagues or your local safeguarding professionals if you are not sure what to do.

List of resources to consider putting on your practice homepage for patients:

- National Domestic Violence Helpline: 0808 2000 247 https://www.nationaldahelpline.org.uk/
- NSPCC helpline: 0808 800 5000 If you're worried about a child, even if you're unsure, contact NSPCC professional counsellors for help, advice and support.
- Childline 0800 1111: Offers free, confidential advice and support for any child 18 years or under, whatever the worry.
- MIND: Mental Health Support with specific advice on 'Coronavirus and your wellbeing'. www.mind.org.uk
- YoungMinds: Supporting children and young people and their parents/carers with their mental health and wellbeing. Specific advice on managing self-isolation and anxiety about coronavirus. https://youngminds.org.uk
- ICON: Babies cry: You can cope. http://iconcope.org/
- SafeLives: Specific resources for domestic abuse and COVID. http://safelives.org.uk/news-views/domesticabuse-and-covid-19
- IRISi interventions: irisi.org/iris/find-your-local-iris-site/

Author: Dr Joy Shacklock, RCGP Safeguarding Clinical Champion and Rep Published in collaboration with NNNGPs (National Network of Named GPs) With thanks to CIRC, Dr Sharon Dixon and Dr Rowena Christmas