



**Rialtas na hÉireann**  
Government of Ireland

## Public Consultation on Policy Proposals on Adult Safeguarding in the Health and Social Care Sector

Fields marked with \* are mandatory.



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### How to make an online response?

**This survey consists of 4 Parts, with 11 questions in total.**

Part 1 asks you to provide information about yourself. Part 2 asks you to provide overall feedback on the policy proposals. Part 3 invites you to provide feedback on specific aspects of the policy proposals and on specific chapters and sub-chapters. Part 4 invites you to comment overall on the policy proposals.

**Only Part 1 of the survey is mandatory.**

This allows you to give as much or as little feedback as you want. Where the survey gives you the opportunity to provide written feedback, please be aware that this is subject to a word / character limit.

**What will we do with your response?**

A report on the findings of the public consultation will be prepared by the Institute of Public Health for the Department of Health. Your views will contribute to the further development of adult safeguarding policy for the health and social care sector and subsequent legislation.

**Privacy Notice:**

By completing this survey, you are agreeing to take part in the public consultation. Personal, confidential or commercially sensitive information should not be included in your submission. If personally identifiable details are included, they will be deleted. All submissions and survey answers are subject to release under the Freedom of Information (FOI) Act 2014 and are also subject to Data Protection legislation. The Department's Privacy Policy can be viewed [here](#).

### Queries

Should you have any queries in relation to this survey, please contact [adultsafeguardingconsultation@health.gov.ie](mailto:adultsafeguardingconsultation@health.gov.ie).

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## Part 1. About you

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### \* Question 1:

Are you providing feedback as:

- an individual
- on behalf of an organisation

If you are providing feedback on behalf of an organisation please give the name of the organisation.

Rehab Group

Is the organisation?

- An advocacy organisation or a representative organisation for service users?
- A professional body?
- A trade union or worker representative body?
- A social care or healthcare provider?
- A public sector body or regulator?
- A healthcare or medical organisation or body?

Other (please give details below):

Note: This submission is being made on behalf of the Advocacy and Public Affairs Division of Rehab to provide an advocacy perspective on safeguarding through a rights-based lens. Rehab has also inputted into the submission from the National Federation of Voluntary Service Providers.

In addition, with the support of our advocacy officers, approximately 20 of the people who use our services made submissions via the Survey Monkey tool.

The views expressed here are a mixture of those expressed by the people who use our services and our Advocacy and Public Affairs staff.

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## Part 2. Overall feedback

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This part seeks high level feedback on the overall Policy Proposals on Adult Safeguarding in the Health and Social Care Sector.

Please respond by ticking one of the following, **Yes** or **No** or **Unsure** for each statement.

**Question 2:**

Overall, do you agree with the following in the policy proposals:

	Yes	No	Unsure
Vision and Key Messages	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Aims and Objectives	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Principles	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please comment (optional) - max 1200 characters (approx. 200 words)

The feedback from our consultations with the people who use our services was largely positive. There was a broad welcome for the expansion of safeguarding to all areas of health and social care from the people who use our services. They felt that the proposal to broaden the scope of the safeguarding policy to all public, voluntary and private social care services is a really positive development. There was also a broad welcome for the rights-based, person-centered approach being adopted by the policy. The emphasis on awareness/education on the importance of safeguarding and taking a proactive approach in as much as possible in order to prevent occurrences of abuse was seen as particularly important.

**Question 3:**

Do you agree that the scope of the policy proposals should:

	Yes	No	Unsure
Cover the full spectrum of public, voluntary and private healthcare services and social care services?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Support every adult service user who may be at risk of being abused or harmed by another person?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please comment (optional) - max 1200 characters (approx. 200 words)

The consensus was that it is very important for the policy to be as inclusive as possible, as anyone could be subject to abuse regardless to whether they are in the private or public sector or what service they are availing of.

**Question 4:**

Will the overall policy proposals achieve:

	Yes	No	Unsure
A strengthened culture of safeguarding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

Meaningful support for the autonomy of at-risk adult service users	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
An effective safeguarding structure for the sector	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
A strong legal basis and effective legal powers	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Effective cooperation and information sharing between services and agencies	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please comment (optional) - max 1200 characters (approx. 200 words)

There was some concern expressed at the proposal to base adult safeguarding structures within the HSE as it was felt that this could give rise to conflict of interest in certain circumstances. There was a view that in an independent body to which all health and social care sectors report to may be better in the long-run.

There is some concern that HSE structures are not mirrored in other funded agencies who would not have the same staff or resources. The HSE needs to be mindful of this in its dealing with the different organisations that provide services to vulnerable adults in the roll out this strategy.

There was a strong appreciation for the continuation of the existing supports which will strengthen the safeguarding structure. i.e. Sectoral Adult Safeguarding Office, Regional Adult Safeguarding and Protection Teams, Designated Adult Safeguarding Officers.

**Question 5:**

What do you consider will be the benefits of introducing the new policy as set out in these proposals? Please comment (optional) - max 1200 characters (approx. 200 words)

One of the benefits of the policy will be the emphasis on advocacy, consent and supporting autonomy in one's own safeguarding plan.

It is pivotal that service users who have been victim of abuse are consulted and have a say in what will make them safe and protected.

Emphasis on the importance of empowering of Service Users to recognise and report abuse, through provision of appropriate and adequate information and training is vital.

**Question 6:**

Do you have any concerns about the policy proposals?

- Yes
- No
- Unsure

Please comment (optional) - max 1200 characters (approx. 200 words)

### Part 3. Feedback by chapter

In this part we would particularly welcome your views on the following specific policy proposals on Adult Safeguarding in the Health and Social Care Sector.

Please respond by ticking one of the following, **Yes** or **No** or **Unsure** for each statement below.

**Question 7:**

Do you agree with the policy proposals on safeguarding structures that:

	Yes	No	Unsure
Safeguarding is everyone's responsibility?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adult safeguarding should be grounded in a multi-disciplinary approach?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Services will be required to have one or more nominated Designated Adult Safeguarding Officers?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The Health Service Executive (HSE) will continue to have the lead operational safeguarding role for the sector, subject to strengthening and expanding its safeguarding remit, structures and functions, as proposed in the policy?	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
The remit of the HSE's operational safeguarding structures (encompassing the Safeguarding and Protection Teams and the National Safeguarding Office) should be extended to now include all public, voluntary and private healthcare and social care services?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please comment (optional) - max 1200 characters (approx. 200 words)

There is agreement that safeguarding is everyone's responsibility in the care sector and that a multi-disciplinary approach is beneficial. The more designated safeguarding officers in a service, the more safeguarding awareness will be in the service and the more preventative measures will be employed.

As outlined above there is a view that an independent organisation would be better able to oversee and monitor so that safeguarding within the HSE is not be investigated by the HSE and that objectivity and non-bias can be employed. If the proposal to keep in-house is implemented then robust measures should be put in place to ensure the integrity of the reporting system and full public confidence in safeguarding procedures and controls.

**Question 8:**

Do you agree with the policy proposals on the legal framework for adult safeguarding duties that:

	Yes	No	Unsure
The HSE should be given explicit functions and duties in relation to adult safeguarding across the health and social care sector?	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
All providers of health and social care services should have a duty to safeguard the adults at risk who use their services against abuse?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

All providers of health and social care services and relevant agencies should have a duty to cooperate for safeguarding purposes?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
All providers of health and social care services should have to conduct Service Safeguarding Risk Evaluations and publish Adult Safeguarding Statements?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Safeguarding risk assessment should form part of any assessments for the admission of an adult at risk to a residential health or social care service?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Providers should have to prepare and implement an Individual Adult Safeguarding Plan when recommended following an assessment?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please comment (optional) - max 1200 characters (approx. 200 words)

**Question 9:**

Do you agree with the policy proposals that new laws should be introduced to provide legal powers for specified safeguarding bodies or personnel to:

	Yes	No	Unsure
Enter service premises and meet patients/residents (in privacy, where appropriate) to assess a safeguarding allegation?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Access relevant records of service providers to assess a safeguarding allegation?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Protect an at-risk patient or resident against abuse by moving them temporarily to a place of safety?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Protect an at-risk patient or resident against abuse by prohibiting a named person from visiting / contacting them?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please comment (optional) - max 1200 characters (approx. 200 words)

It is imperative that a victim of abuse is protected and the above measures in Q 8 and Q 9 will be important in ensuring that protection is in place.

However, it is also essential that in developing an individual's safeguarding plan that decisions are made jointly with the individual for their own safety.

**Question 10:**

Do you broadly agree with the policy proposals set out in the following Chapters and sub-Chapters?

**Chapter 3 – Supporting the decision making autonomy of adults at risk who use services**

Do you broadly agree with the policy proposals set out in the following sub-Chapters?

	Yes	No	Unsure
3.1 Supporting autonomy	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
3.2 Advocacy	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
3.3 Consent	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please comment (optional) - max 1200 characters (approx. 200 words)

Having a culture of empowerment and advocacy is extremely important for service users in services. It means that they have the confidence to speak up for themselves about what is happening. They also have to power to speak up for someone else if they witness abuse. Education and advocacy are vital to prevent abuse.

Further clarification around dealing with the issue of consent is needed, particularly where an individual does not wish that a report is made to external agencies but where there is a legislative requirement to report actions, sometimes against a person's wishes.

The policy also needs to provide greater clarification in relation to the individual's right to give consent, refuse consent, withdraw consent.

#### Chapter 4 – Preventing abuse

Do you broadly agree with the policy proposals set out in the following sub-Chapters?

	Yes	No	Unsure
4.1 Duty to prevent abuse	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.2 Preventative culture	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.3 Public awareness and communication	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.4 Training	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.5 Vetting	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.6 Good governance	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please comment (optional) - max 1200 characters (approx. 200 words)

Constant awareness and discussion regarding safeguarding is vital for prevention. This achieved through training, good governance and communication.

The rollout of the policy will require a range of accessible information to be made available to services. This must be ready and available from the outset.

#### Chapter 5 – Reporting and assessing suspected abuse

Do you broadly agree with the policy proposals set out in the following sub-Chapters?

	Yes	No	Unsure
5.1 “No Wrong Door”	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.2 Reporting Abuse	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.3 Reported peer abuse	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.4 Standardised recording of data on safeguarding concerns and incidents	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.5 Assessing and reviewing reported concerns of abuse	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.6 Powers / Orders	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please comment (optional) - max 1200 characters (approx. 200 words)

There is a need for greater clarification in the areas of the individual right to give consent, refuse consent, withdraw consent.

Current safeguarding practice does not allow for individuals within services who do not wish to engage in safeguarding processes. There is still a requirement on a Service Provider to submit a preliminary screening and safeguarding plan to the HSE / HIQA.

Moreover, individuals do not have a choice in terms of reporting to HIQA and the HSE as in accordance with legislation and policy guidelines all incidents are reported due to a zero tolerance approach to abuse.

The policy should specify what consideration is given to the right of the person using a service to choose who assists them with their safeguarding.

## Chapter 6 – Interventions and sanctions

Do you broadly agree with the policy proposals set out in the following sub-Chapters?

	Yes	No	Unsure
6.1 Principle of Proportionality	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
6.2 Individual Adult Safeguarding Plan	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
6.3 Powers / Orders	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
6.4 Sanctions – corporate	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
6.5 Sanctions – professional	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
6.6 Referral to An Garda Síochána	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please comment (optional) - max 1200 characters (approx. 200 words)



## Chapter 7 – Interagency and inter-sectoral cooperation

Do you broadly agree with the policy proposals set out in the following sub-Chapters?

	Yes	No	Unsure
7.1 Duty of services and agencies to cooperate for adult safeguarding purposes	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.2 Cooperation across the health and social care sector	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.3 Cooperation with other sectors	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please comment (optional) - max 1200 characters (approx. 200 words)

A clear channel of communication and sharing of appropriate information must exist between organisations to work together in ensuring people in services are protected.

Information sharing through the notifications requires clarification and guidance on interagency cooperation and agreement in accordance with GDPR.

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## Part 4. Overall comment (Final question)

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### Question 11:

Please use the box below to provide any additional comments you have about the Policy Proposals on Adult Safeguarding in the Health and Social Care Sector (optional) - max 1200 characters (approx. 200 words)

The proposal to broaden the scope of the safeguarding policy to all public, voluntary and private social care services is particularly welcome.

Everyone within any social care/healthcare setting can be vulnerable and in need of safeguarding. However it is important that all vulnerable people are safeguarded from abuse, and not just those in receipt of services. The change of term from “vulnerable adult” to “adult at risk” is also appropriate. But a clearer definition of this term would be helpful.

It will be important to monitor the effectiveness of the Safeguarding policy.

The approach to education/awareness raising and being proactive in order to prevent occurrences of abuse is particularly important. However, while the policy seeks to adopt a “rights-based”, “person-centered” approach, there is need for greater clarity/definition of these terms.

In the context of the Assisted Decision Making supports, choice was extremely important to the people in our services. This an issue that will need further clarification/development in the strategy.

Awareness of the safeguarding mechanisms and how to engage with them are vital for all staff and people using services.

## Contact

[Contact Form](#)