

## National Unit Specification: general information

**UNIT** Recognise, Respond and Report Abuse in a Care Setting  
(Intermediate 2)

**NUMBER** D8MH 11

### COURSE

### SUMMARY

This unit is designed to raise awareness of the forms of suspected abuse that can be experienced by clients and how to deal with these in a care setting.

This unit may provide candidates with underpinning knowledge for SVQ unit Z1 (protection from abuse).

### OUTCOMES

- 1 Recognise suspected or potential abuse experienced by clients.
- 2 Respond to and report potential or suspected incidents of abuse experienced by clients.

### RECOMMENDED ENTRY

While entry is at the discretion of the centre candidates would normally be expected to be working in a care setting.

### CREDIT VALUE

0.5 Credit.

### CORE SKILLS

Information on the automatic certification of any core skills in this unit is published in *Automatic Certification of Core Skills in National Qualifications* (SQA, 1999).

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## Administrative Information

**Superclass:** PN

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## **National Unit Specification: statement of standards**

### **UNIT**      Recognise, Respond and Report Abuse in a Care Setting (Intermediate 2)

Acceptable performance in this unit will be the satisfactory achievement of the standards set out in this part of the unit specification. All sections of the statement of standards are mandatory and cannot be altered without reference to the Scottish Qualifications Authority.

#### **OUTCOME 1**

Recognise suspected or potential abuse experienced by clients.

##### **Performance criteria**

- a) Describe forms of abuse.
- b) Describe signs and symptoms which might be an indication of abuse.
- c) Identify possible triggers for abuse.
- d) Describe the possible effects of abuse.

##### **Evidence requirements**

Written and/or oral evidence to show the candidate has met all the performance criteria.

#### **OUTCOME 2**

Respond to and report potential or suspected incidents of abuse experienced by clients.

##### **Performance criteria**

- a) Describe your role and responsibilities as a worker in responding to potential or suspected abuse in line with legislation and organisational policies and procedures.
- b) Describe your role and responsibilities as a worker in reporting suspected or potential abuse in line with legislation and organisational policies and procedures.
- c) Reflect on your own feelings and identify strategies for managing these feelings.

##### **Evidence requirements**

Written and/or oral evidence to show the candidate has met all the performance criteria.

## National Unit Specification: support notes

**UNIT** Recognise, Respond and Report Abuse in a Care Setting (Intermediate 2)

This part of the unit specification is offered as guidance. The support notes are not mandatory.

While the exact time allocated to this unit is at the discretion of the centre, the notional design length is 20 hours.

### **GUIDANCE ON THE CONTENT AND CONTEXT FOR THIS UNIT**

It is expected that candidates undertaking this unit are employed as or seeking work as care workers. Therefore the content should reflect the circumstances which would be realistically encountered within their work role and their organisation's policies and procedures.

The focus should be on raising awareness of the suspected or potential risks of abuse occurring and the care worker's role in disclosing according to their organisation's policies and procedures.

Candidates should also be encouraged to reflect on their own feelings and identify strategies for managing these feelings.

#### **Outcome 1**

It should be highlighted that all forms of abuse are a denial of the client's basic rights as identified in the European Convention of Human Rights (1998). This has been incorporated into the Scottish legal system. From this starting point each form of abuse should not be taken in isolation.

The forms of abuse that should be covered for all client groups are physical, sexual, emotional, neglect, financial, racial and social. The interrelated nature of some of the forms of abuse should be highlighted.

#### ***Physical***

For example: bruising, cuts, damage to skin, pressure sores, burns with no obvious explanation ie. non-accidental injury, weight loss and failure to ensure the client's safety.

#### ***Sexual***

Where there is any form of sexual activity or exploitation where the individual is either unable or has not given consent. Consideration needs to be made towards age of consent.

#### ***Emotional***

More difficult to detect. It includes intimidation, humiliation, victimisation and threats.

#### ***Neglect***

Deprivation of basic emotional or physiological needs for example heat and food. This will result in ill health.

#### ***Financial***

This is usually about stealing, deceiving or tricking people out of their money without consent or with undue pressure.

#### ***Racial***

Where a person is treated worse than others because of their ethnicity, gender, disability or religion.

## National Unit Specification: support notes (cont)

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### *Social*

For example: deliberate isolation, rights not being respected or the environment not being safe.

There are many triggers which can be observed across client groups. These may include: poverty, stress, financial worries, personality clashes and mental illness.

As a consequence of abuse some common effects can be observed. Examples are listed below.

**Behavioural changes** – eg: unexplained fear of carers and care worker, hostility, aggression, over friendly or overt sexual behaviour, immature behaviour for age, self neglect, self mutilation, withdrawn, frightened, passive.

**Psychological effects** – eg: loss/reduced sense of self-esteem and self worth, reduced expectations of self, depression.

### **Outcome 2**

The care worker should be encouraged to consider their ‘duty of care’ as a starting point for their role and responsibility to disclose suspected abuse. This should be linked to confidentiality and social care values. The social care values as a basis of good practice to enable protection from abuse should be emphasised throughout the learning for this outcome. The organisation’s policy and procedure on disclosure should be used as the basis for understanding the care worker’s role. This includes written referral/reporting of the situation in a factual and confidential manner.

The organisation has a legal obligation to promote the welfare of their clients and prevent them from being abused. The care worker is required to contribute to the protection of individuals from abuse. This is through minimising the level of abuse within the environment, minimising the effects of abusive behaviour and monitoring individuals who are at risk from abuse. Individuals may be abusing themselves, or be at risk from abuse by another.

A care plan would be developed to monitor those who are suspected of suffering from abuse. This care plan will work out what each member of the team ought to look for as signs of abuse and how it is to be reported to the care team.

There are various reasons why clients don’t report abuse. An abused client may be frightened or blame themselves. The client may still feel love and care for the abuser and not wish to harm them. Care workers may not report abuse because they are unsure whether it is happening, they fear they may not be believed or that it may get a colleague into trouble.

Information about abuse is often unclear, but it is still important to report it. If a client talks about abuse the information must be passed on to the appropriate manager even though it may turn out to be inaccurate. It is important that the client is aware that this information will be reported. Reporting incidents, both verbally and in writing, must follow the guidelines laid down by the organisation’s policies and procedures. The care worker should keep matters as confidential as possible, only telling those who have a need to know and a right to know.

## **National Unit Specification: support notes (cont)**

### **UNIT**            Recognise, Respond and Report Abuse in a Care Setting (Intermediate 2)

It needs to be made clear to the client that the care worker has to report incidents of abuse which are disclosed or observed. The client should also be told what response from the organisation they have a right to expect in disclosing an incident of abuse.

The care worker may be upset dealing with a suspected abused client. The feelings the care worker could experience may include anger, relief, grief and disbelief. They should be encouraged to discuss feelings with a supervisor or other suitable person. Personal distress may prevent the care worker from delivering a quality service. Strategies for managing these feelings might include: sitting down following the incident to discuss it, having time out from the situation or recording what has occurred.

### **GUIDANCE ON LEARNING AND TEACHING APPROACHES FOR THIS UNIT**

Staff/trainers should ensure that this emotive subject is discussed in a sensitive manner.

#### **Outcomes 1 and 2**

Brainstorming of the care worker's role and responsibilities in protecting the individual from abuse could be the starting point with an emphasis on social care values and anti discriminatory practices. Case studies for group discussion/analysis to aid identifying forms, triggers, signs, symptoms, and effects of abuse. Organisation's policy and procedure on disclosure should be utilised for comparison and understanding of the worker's role. A guest speaker involved in client protection from abuse may be beneficial.

The following could also be used:

- Simulations/role play
- Questioning, oral or written
- Case studies and reflective accounts of your work

Care workers should familiarise themselves with their organisation's policies and procedures for reporting abuse. The Health and Safety at Work Regulations (1992) and R.I.D.D.O.R. (1995) should be highlighted as the legal framework for risk assessment and reporting of incidents.

Legislation such as the European Convention of Human Rights Act (1998) and Adults with Incapacity Scotland Act (2000) may provide useful frameworks for discussion.

### **GUIDANCE ON APPROACHES TO ASSESSMENT FOR THIS UNIT**

#### **Outcome 1**

Candidates could be presented with a case study to analyse and answer or they could produce a reflective account.

#### **Outcome 2**

Candidate's written reflective account or role-play scenarios dealing with a potentially abusive situation.

## **National Unit Specification: support notes (cot)**

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### **SPECIAL NEEDS**

This unit specification is intended to ensure that there are no artificial barriers to learning or assessment. Special needs of individual candidates should be taken into account when planning learning experiences, selecting assessment instruments or considering special alternative outcomes for units. For information on these, please refer to the SQA document *Guidance on Special Assessment and Certification Arrangements for Candidates with Special Needs/Candidates whose First Language is not English* (SQA, 1998).