Implementing Adult Safeguarding Practices in NHS Mental Health Services:
Challenges for Leadership and Service Provision

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Research Background

Problem
- The abuse and neglect of at risk adults is an increasing social problem in the UK, with historical and recent evidence of ineffective practice in NHS mental health services
- The existing national legal framework fails to provide specific guidance to services in the UK about how to implement adult safeguarding within their organisations

Main Aims

- To explore the implementation, development, and use of adult safeguarding practices and procedures in NHS mental health services
- To develop understanding of the structures and processes involved in keeping adults safe in mental health settings and the specific challenges faced

Methods

Approach
- A Constructivist Grounded Theory approach was used to develop substantive theory inductively through data collection and analysis
- A Realist Review of literature was used to identify the evidence-base for the implementation of adult safeguarding in NHS health services
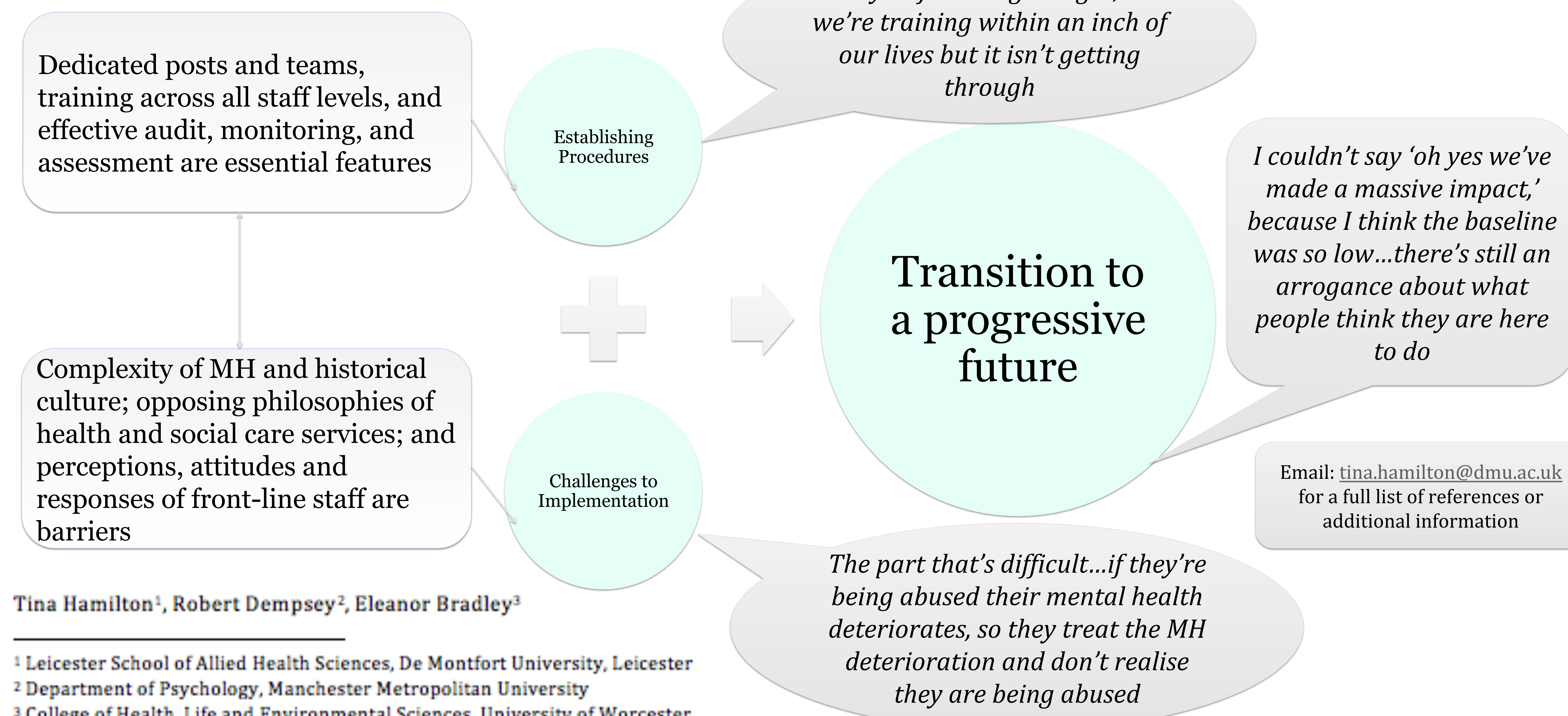
Semi-structured Interviews
- Personnel responsible for operational and strategic leadership of adult safeguarding (n=16) in 3 NHS mental health trusts

Realist Review
- Nineteen studies were included (4=intervention; 7=qualitative, 1=quantitative, 5= literature review, 1=survey, 1=reflective piece)

Results

Conceptual Framework

Dedicated posts and teams, training across all staff levels, and effective audit, monitoring, and assessment are essential features

Establishing Procedures

They're just not getting it, so we're training within an inch of our lives but it isn't getting through

Transition to a progressive future

I couldn't say 'oh yes we've made a massive impact,' because I think the baseline was so low…there's still an arrogance about what people think they are here to do

Complexity of MH and historical culture; opposing philosophies of health and social care services; and perceptions, attitudes and responses of front-line staff are barriers

Challenges to Implementation

The part that's difficult…if they're being abused their mental health deteriorates, so they treat the MH deterioration and don't realise they are being abused

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Realist Review

- Historically AS was not a priority in mainstream NHS services, but integrated provision is improving
- Service user involvement is complex due to dilemmas with human rights and risk taking
- Acceptance of responsibility is difficult to determine due to a lack of outcome measures
- Leadership is inconsistent with overreliance on social care

Implications

- A multi-layered approach is required
- Pre-empt barriers to achieve long-term change
- Steps needed to improve practice in MH include: ethical decision-making, specialist training for middle managers, removal of bureaucratic processes, challenging discriminatory attitudes, and recognition of social inequalities and power differentials

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