



# Safeguarding adults at risk of abuse: identifying educational gaps amongst hospital staff to guide training

Emily Killeen<sup>1</sup> · Meave Higgins<sup>1</sup> · Ciara Keogh<sup>1</sup> · Steven Russell<sup>1</sup> · Carmel Curran<sup>1</sup>

Received: 19 February 2022 / Accepted: 1 March 2022

© The Author(s), under exclusive licence to Royal Academy of Medicine in Ireland 2022

## Abstract

**Background** Safeguarding refers to the protection of health and wellbeing and enabling “life free from harm, abuse and neglect” (Safeguarding People 2019). In Ireland, the Health Service Executive (HSE) drafted a revised 2019 policy to replace the original policy on safeguarding adults at risk of abuse. A Safeguarding Committee was founded in Beaumont Hospital, Dublin to prepare for policy implementation and staff training.

**Aims** To establish staff awareness and understanding of safeguarding to guide training and policy implementation.

**Method** Cross-sectional study of 223 hospital staff using a 10-question paper survey.

**Results** Suboptimal awareness of the revised HSE policy, reporting structures and confidence levels amongst staff. In-person and online training identified as the most popular methods of learning.

**Conclusions** Knowledge and confidence gaps can be addressed in future training. Identifying education gaps will help guide training and policy implementation.

**Keywords** Adults at risk of abuse · Geriatric medicine · Older adults · Safeguarding

## Background

Awareness of safeguarding is an essential aspect of care for healthcare professionals across all domains. Safeguarding refers to the protection of health and wellbeing and enabling “life free from harm, abuse and neglect” [1]. Abuse is a “violation of a person’s human and civil rights by another person or persons” [2]. Forms of abuse include physical, psychological, financial, sexual, discriminatory, institutional, neglect and self-neglect. Adults at risk of abuse include older adults and persons with intellectual or physical disabilities [3].

In Ireland, over 10,000 safeguarding concerns were reported in 2020, with 3412 (34%) of these representing adults over 65 years [4]. A cultural and societal shift is underway as cases of current and historical abuse are more openly discussed and acknowledged [5–8]. Internationally, the need for formal safeguarding measures is increasingly recognised with implementation of policies and formal structures at an advanced stage in many countries [2, 9–12].

In Ireland, safeguarding in health and social care divisions is also undergoing reform.

The Health Service Executive (HSE) drafted the 2019 ‘Adult Safeguarding Policy’ to replace the original 2014 policy [3]. Implementation of the revised policy has been delayed due to the COVID-19 pandemic and as such the 2014 version is still operational. Beaumont Hospital, Dublin founded a new multidisciplinary Safeguarding Committee to prepare for implementation of the revised HSE policy at local hospital level. Establishing staff awareness and understanding of safeguarding was a key objective of the committee.

## Aims

Our study aimed to establish staff awareness and understanding of safeguarding to guide educational gaps, training needs and policy implementation.

✉ Emily Killeen  
emily.killeen@hotmail.com

<sup>1</sup> Department of Geriatric Medicine, Beaumont Hospital, Dublin, Ireland

## Method

A cross-sectional study was conducted using a 10-question paper survey. Response options included dichotomous answers, multiple choice or Likert scales. Likert rating scales were used to measure staff confidence levels. See appendix for complete, formatted copy of the survey.

A sample of staff with direct patient contact were chosen as the population of interest as they would be the focus of future training and policy implementation.

The survey was conducted between May and August 2021. Staff were recruited to participate voluntarily through department heads or direct contact. Survey responses were anonymous.

Data was collated and analysed on Microsoft Excel.

## Results

### Demographics

Two hundred twenty-three staff were contacted with a 91%-response rate. Respondents were comprised of doctors (34%), nurses (23%), allied health professionals (22%), medical social workers (11%), healthcare assistants (6%), porters (3%) and psychologists (1%).

### Staff awareness

One hundred eighty-four (91%) staff were familiar with the term ‘safeguarding’; however, only 44% were aware of the HSE draft 2019 safeguarding policy.

### Staff experience

One hundred twenty-nine (64%) had experience with a case of suspected abuse. The most common forms were financial, psychological and self-neglect ( $n = 60, 47, 39$ , respectively). Sexual abuse was the least common ( $n = 10$ ).

### Staff confidence

Forty-seven percent felt ‘somewhat’ confident they would recognise possible abuse compared to 42% who felt ‘extremely’ or ‘very’ confident. Sixty-one percent was ‘somewhat’ or ‘not so’ confident that they would know the next steps to take in a case of suspected abuse; only 11% were ‘extremely’ confident. Forty-nine percent felt ‘extremely’ or ‘very’ confident in reporting a case of suspected abuse; 50% felt ‘somewhat’ or ‘not so’ confident.

The most common reasons identified for lack of confidence were lack of experience with cases of suspected abuse and uncertainty about the next steps to take to report a case ( $n = 87$  and  $80$  respectively). The next most common reason was lack of training ( $n = 72$ ). The least common reasons were fear of upsetting relationships with patient, family or staff and fear of confrontation ( $n = 19$  and  $18$ , respectively).

Overall medical social workers were the most confident in relation to awareness and experience of safeguarding. Doctors were the least confident.

### Future training

Most (84%) staff would like more training on safeguarding. The most popular educational resource selected was in-person training ( $n = 107$ ) followed by online ( $n = 90$ ). The least popular were posters and information leaflets.

## Conclusion

Our study identified education gaps that will guide future training and policy implementation by the Safeguarding Committee.

## Discussion

Safeguarding measures are imperative to protect all persons in society. “A well trained workforce operating in a culture of zero tolerance of abuse” is paramount to support this [2].

In a large tertiary hospital, it is important that policy implementation is effective and addresses current and potential education gaps. Our study identified that although many staff were familiar with safeguarding, few were aware of the revised HSE 2019 policy.

Nearly two-thirds of staff surveyed had experience with cases of suspected abuse. Types of abuse experienced were similar to national data; the National Safeguarding Office (NSO) 2020 report showed that the most common forms of alleged abuse were psychological (40%), physical (33%) and financial (10%) [4].

Confidence levels amongst staff were variable and likely correlate with speciality and experience. Social workers are considered the “lead professionals for safeguarding” [4] and their safeguarding knowledge, experience and confidence is reflected in the study.

The study highlighted overall suboptimal confidence in recognising and reporting cases of suspected abuse. The NSO advocates that staff should be trained on “how to

recognise and respond to concerns of abuse for adults at risk of abuse” [13]. Training and education is imperative to support safeguarding across all divisions of healthcare. In-person and online learning were popular options amongst staff surveyed. Aligning educational resources with the users’ preferences of interactive in-person or remote access learning should optimise uptake, training and patient care. A new online elearning module is available on HSEland since 2020 for healthcare professionals [14]. This module could be used in conjunction with or as a template for local hospital training.

Effective implementation of the revised HSE 2019 policy at local level can be guided by evaluating staff understanding and awareness of safeguarding.

**Supplementary information** The online version contains supplementary material available at <https://doi.org/10.1007/s11845-022-02965-4>.

**Acknowledgements** Safeguarding Committee, Beaumont Hospital, Dublin

**Author contribution** Dr Carmel Curran and Dr Emily Killeen contributed to the study conception and design and approved the final manuscript. All the authors were involved in the material preparation and data collection. Data analysis and the first draft of the manuscript were completed by Dr Emily Killeen.

## Declarations

**Ethical approval** Ethics approval was not required, and the study was approved by the audit office.

**Conflict of interest** The authors declare no competing interests.

## References

1. Safeguarding People (2019) Care Quality Commission. <https://www.cqc.org.uk/what-we-do/how-we-do-our-job/safeguarding-people>. Accessed 18 May 2021
2. Faulkner A, Sweeney A (2011) Prevention in adult safeguarding. Social Care Institute for Excellence. <https://www.scie.org.uk/publications/reports/report41/introduction.asp>. Accessed 1 Aug 2021
3. Safeguarding vulnerable persons at risk of abuse, National Policy & Procedures (2014) National Safeguarding Office, Social Care Division, HSE
4. Annual report 2020 (2021) National Safeguarding Office, HSE
5. Conneely A (2021) Awareness day to prevent adult abuse. <https://www.rte.ie/news/2021/1119/1261830-first-national-safeguarding-day-under-way-today/>. Accessed 27 Nov 2021
6. Awareness and understanding of safeguarding in Ireland (2021) Safeguarding Ireland
7. Buckley S (2018) How Ireland should deal with the issue of historic abuse cases. <https://www.rte.ie/brainstorm/2018/0903/991253-how-ireland-should-deal-with-the-issue-of-historic-abuse-cases/>. Accessed 27 Nov 2021
8. Donnelly S, O’Brien M (2019) Falling through the cracks: the case for change. Key developments and next steps for Adult Safeguarding in Ireland. University College Dublin, Dublin
9. Adult safeguarding laws (2017) 08/06/17 edn. Australian Government, Australian Law Reform Commission
10. Care Act (2014) UK Public General Acts vol Part 1, Section 42
11. Safeguarding vulnerable adults from abuse: protecting for Persons in Care Act (2018) Alberta Government, Canada
12. Salm C (2016) Protection of vulnerable adults. European Parliamentary Research Service, European Parliament
13. Annual report 2019 (2020) National Safeguarding Office, HSE
14. New elearning module launched to promote use of National Standards for Adult Safeguarding (2020) <https://www.hiqa.ie/hiqa-news-updates/new-elearning-module-launched-promote-use-national-standards-adult-safeguarding>. Accessed 27 Nov 2021

**Publisher's Note** Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.