# 7. Further reading/references:

The SAR final report – <u>SAR Frank and Elsie Final Report</u> The Toolkit – <u>Sexual Safety Resource Kit for Care</u> Homes

#### 6. Response:

Bespoke Mental Capacity and Sexual safety training was commissioned by a leading academic for all SSASPB partners (Nov 23) and attended by over 120 practitioners and supervisors.

The need to use accurate descriptive language to describe behaviour and body parts is being reinforced through its use in all SSASPB procedures and learning events. This will support accurate risk assessment and minimise ambiguity. Supervisors and front line staff should consider use of the Mental Capacity Act to assess capacity where this may be in doubt and conduct assessments which are recorded. Supervision should be used to discuss when to conduct one if unsure, decisions to be recorded.

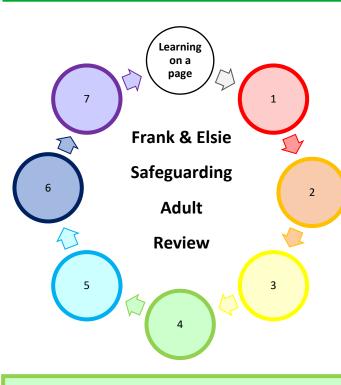
### 5. Response:

Guidance has been produced in the form of a toolkit and has been produced with the engagement of representatives from care and nursing homes.

The toolkit includes a poster to help with immediate action following an incident of rape and other sexual assaults, a Sexual Safety Intervention guide which includes detailed information on risk and gives examples of behaviours, a leaflet for resident adults and their families and a reading list.



Staffordshire and Stoke-on-Trent Adult Safeguarding Partnership Board Abuse must stop



### 4. Findings:

Staff in residential care are not adequately equipped to distinguish consensual sexual activity from sexual assault, based on an assessment of an individual's capacity to consent.

This is reflected in unclear language to describe sexual activities and increases the chances of downplaying both the risks an individual may pose, and the needs of others for protection. 1. Why was there a Safeguarding Adult Review (SAR)?:

A Safeguarding Adult Board must conduct a SAR when

- an adult in its area

- with needs for care and support

- experiences serious abuse (includes sexual assault) and

- there are concerns about how Board partners worked together to protect them

2. Circumstances: Frank and Elsie were residents in a Nursing home, both had dementia. Neither were able to consent to sexual activity.

Frank exhibited sexualised and physically aggressive behaviour towards women, both staff and residents. His behaviour was escalating and he was considered a risk to women.

He was particularly focussed on Elsie and was found raping her in a toilet by a member of staff.

## 3. Findings:

There was no specific sexual safety guidance for care/nursing homes.

It was recommended that this be developed with engagement from care and nursing home staff and managers.

The guidance is to include examples of behaviours together with what risk this may present and suggested actions to take.