

Deafblind Scotland (DbS) vision – “A society in which deafblind people have the permanent support and recognition necessary to be equal citizens”.



Deafblind Scotland Policy on Responding to Disclosure

Some incidents of abuse only come to light because the abused person discloses the information himself or herself. The abused person may not understand that they are being abused and so not realise the significance of what they are telling you. Some disclosures happen many years after the abuse. There may be good reasons for this for example the person they were afraid of has left the setting. Therefore, any delay in an individual reporting an incident should not cast doubt on its truthfulness.

When someone discloses to you, remember you are not investigating.

Do:

- Stay calm and try not to show shock.
- Listen very carefully.
- Be sympathetic.
- Be aware of the possibility that medical evidence might be needed.

Tell the person that:

- They did a good/right thing in telling you.
- You are treating the information seriously.
- It was not their fault.

Explain that you must tell your Line Manager and, with their consent, the manager will contact Adult Services, Health and/or Police. The manager will, in specific circumstances, contact Adult or Child Services without their consent but their wishes will be made clear throughout.

If a referral is made but the vulnerable adult is reluctant to continue with an investigation, record this and bring this to the attention of the Safeguarding Adults Co-ordinator. This will enable a discussion of how best to support and protect the vulnerable adult. However, a professional case discussion will still need to take place and should be recorded appropriately.

Do not:

- Press the person for more details.
- Promise to keep secrets (you can never keep this kind of information confidential).
- Pass on the information to anyone other than those with a legitimate “need to know”, such as your Line Manager.
- Make promises you cannot keep (such as, "I will never let this happen to you again").

- Contact the alleged abuser.
- Be judgmental (for example, "Why didn't you run away?").
- Gossip about abuse.
- Stop someone when they are telling you what has happened to them, as they may never tell you again.

You must

- Make a note of what the person actually said, using his or her own words and phrases.
- Describe the circumstance in which the disclosure came about.
- Note the setting and anyone else who was there at the time.
- When there are cuts, bruises or other marks on the skin use a body map (see following pages) to indicate their location, noting the colour of any bruising.
- Make sure the information you write is factual. You may wish to indicate your own opinion or a third party's information. If you do, ensure the separation is made very clear.
- Use a pen or biro with black ink so that the report can be photocopied. Try to keep your writing clear.
- Sign and date the report, noting the time and location.

Be aware that your report may be needed later as part of a legal action or disciplinary procedure.

SCIE GUIDELINES

What you say in response to a disclosure can have a profound impact on a patient that has experienced abuse.

They may not have told anyone else about their experiences. Key features of your conversation could include reassurance about confidentiality, willingness to offer another appointment with a reason that she/she can explain to the family and the offer of information. Whilst the patient's safety in their own home is a priority and a health issue, they are the expert on what they need and what should happen next. The patient is the only person with all the information about their situation. However, you can empower them by ensuring that they are aware that help is available.

Your response can help the patient to recognise their experience as abusive and lift the self-blame and isolation. It is important to let them know that they are not to blame for what has happened to them and that no one deserves to be treated that way. Reassure the patient that they do not need to deal with the problem alone and that help is forthcoming.

Some examples of responses you could use

- “I’m sorry to hear this, but I’m glad that you told me because of course it affects your health”.
- “Thank you for having the courage to tell me”.
- “It’s not your fault; the problem is the abuse not you”.
- “You do not deserve to be treated this way”.
- “Their behaviour towards you is not acceptable”.
- “It is never right for someone to hurt or harm another person”.
- “You don’t have to deal with this alone - help is available”.
- “You can talk to me again”.

Responses to avoid

- Don’t discuss the abuse with the patient in the presence of anyone else.
- Don’t approach the patient’s family without their express consent - it may endanger them.
- Don’t ask them why they put up with it or why they haven’t left already.
- Don’t ask them what they did to cause the abuse.