



Sexual safety for staff and carers – a briefing paper

Background

A multi-agency learning lessons review completed by Pathways and Partnership sub group, identified that a number of workers involved with the individual did not have access to policies or support to address the inappropriate sexual behaviours presented by the individual. A recommendation was agreed that the sub group would produce a paper that can be adopted, if required, by organisations in Barnsley.

The primary aim of the paper is to support staff and volunteers to maintain appropriate boundaries and to support them to communicate clearly to users of services what behaviours are not acceptable and how the service responds to sexual safety incidents.

Context

This briefing paper has used the recent report by the CQC - Sexual Safety on Mental Health Wards (2018) as a framework. Whilst the focus of the CQC report is inpatient mental health units, the underlying principles are transferrable to all service provision.

The CQC reports that staff told them that they sometimes feel 'paralysed' and unable to act when a sexual incident occurs. They went on to say that some staff do not know how to respond to these, or to disclosures from people who use services and may not always address them promptly and appropriately. This includes the question of determining whether patients have the mental capacity to decide to engage in sexual activity.

From their engagement work, the CQC heard that staff and service users find it difficult to speak up when they observe, or are the person affected by, unwanted sexual behaviour. They were told that staff may become 'desensitised' to the issue because sexual incidents happen regularly. This may discourage staff from reporting incidents.

The CQC recommendations include:

Developing the skills and confidence to have conversations with service users and with colleagues about sexual health and sexual safety, using appropriate language to support people to feel comfortable talking about their experiences.

Making a full assessment of service users that includes historical details about their sexual safety (both in terms of vulnerability and potential to display sexual behaviour that puts others at risk). This will enable services to sensitively identify potential risks and plan the person's care.

Consideration of the difficult issues of mental capacity and consent.

Recognition of the physical and psychological harm caused to people who use services, and to their families and friends, from sexual abuse and harassment experienced during service use.

Development of clear guidance to inform staff and service users of :

- what is acceptable behaviour and what kind of behaviour would be considered sexual harassment or abuse,
- how staff should respond to sexual incidents – including those that are triggered by disinhibition or some other feature of a person's mental state,
- a recognition of the potential physical and psychological harm caused by those affected by unwanted sexual behaviour, and



- what support people who experience unwanted sexual incidents can expect in terms of staff response.

Barnsley Safeguarding Adults Board expects service providers across the Borough to work with service users and other agencies to develop policy and procedures for dealing with sexual incidents and sexually inappropriate behaviour, including, but not limited to those that occur between service users, between people in positions of trust and services users and those instigated by service users towards staff.

What is sexually inappropriate behaviour?

It is important to note that a breach of sexual boundaries is not limited to criminal acts, such as rape or sexual assault. Sexually inappropriate behaviour can include verbal or physical behaviour. The list below is not exhaustive but gives some examples of what it may involve:

- Sexual conversation or content
- Comments and jokes of a personal or sexual nature
- Inappropriate touching or grabbing
- Explicit sexual behaviour
- Sexual propositions
- Disrobing or exposure of genitals
- Masturbation in front of others
- Sexual assault including offences under the Sexual Offences Act 2003

How to respond to sexually inappropriate behaviour, by setting LIMITS

Cultural differences can affect a person's view of their personal boundaries and what is appropriate. Staff and carers need to be sensitive to this, and always treat people receiving care as individuals in a way that respects their views and maintains their dignity. The following may be useful in dealing with episodes of sexually inappropriate behaviour.

Look after personal safety: a member of staff or carer who feels threatened is less likely to be able to help a person, particularly if real danger is posed. Should the person's care be transferred to another service or provider with more experience and expertise in managing this type of behaviour? Do carers need to visit in pairs or groups rather than as single individuals?

Identify aetiology: sexually inappropriate behaviour can arise for a variety of different reasons. The response to such behaviour needs to be tailored, where possible, to its underlying cause. Questions to consider before reacting include:

- What is the origin of the behaviour?
- What form is the behaviour taking?
- In what context does it occur?
- How frequently does it occur?
- What factors contribute to the situation / behaviour?
- What are the risks to all parties?

Maintain a professional role: any such behaviour can undermine the care provider – care receiver relationship. The behaviour could be unintended but have wide reaching consequences. Carers / staff need to, where safe to do so, pause before reacting and consider how to respond.



Implement appropriate boundaries: in all cases it is important to address the sexually inappropriate behaviour. Carers / staff should identify the inappropriate behaviour and communicate boundaries with the person. Statements such as “*I feel uncomfortable with this behaviour and would appreciate it if it could be left out of our interactions from now on*” may be helpful.

Talk with a Supervisor: this type of behaviour can produce high levels of anxiety and emotion. Even seasoned carers / staff can find them challenging. Guidance and support should be sought from colleagues, supervisors or mentors to help clarify and manage the situation.

Adapted from: Aziz,R and Marshall, J. *Subjected to Sexually Inappropriate Behaviour? Set LIMITS.* Current Psychiatry. 2017 May 16 (5):53

In addition to the above, it is of vital importance that this type of behaviour is clearly recorded so that patterns of intensity, nature or frequency can be analysed as part of a risk assessment and risk management process.

Consideration should be given to the need to protect others from sexually inappropriate behaviour and care and support plans should include instruction about how to safely manage sexually inappropriate behaviours. This should include direction as to how and when to share information with other agencies such as the police and / or adult social care.

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