

Closed Cultures and safeguarding adults



**Durham
Safeguarding Adults
Partnership**

Why this topic?

Organisational abuse is one of the 10 types and patterns of abuse and neglect illustrated by the Care and Support Statutory Guidance:



“neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.”

The combination of structure, policies, processes and practice that can result in organisational abuse has been identified as a closed culture.

- The Care Quality Commission (CQC) has published guidance to enable staff to recognise a closed culture and to flag the warning signs that there is the risk of a closed culture developing.
- It highlights the need for professional curiosity, and being better at understanding, hearing from and 'seeing' adults who are placed in high-risk settings or who are isolated.

Care Quality Commission definition of a closed culture

- 'a poor culture that can lead to harm, including human rights breaches such as abuse'
- In these services, people are more likely to be at risk of deliberate or unintentional harm
- Any service that delivers care can have a closed culture.

How do we know about closed cultures?

- Reviews and inquiries from Mid Staffordshire Hospital NHS Foundation Trust Public Inquiry, led by Robert Francis QC published in 2013, to the Safeguarding Adult Review (SAR) about the deaths of Joanna, "Jon" & Ben at Cawston Park Hospital, published in September 2021.
- Undercover documentaries, from 2010 Winterbourne View to the 2019 Whorlton Hall exposé.

The Francis report of the Mid Staffordshire Inquiry said:

“A closed culture is a poor culture in a health or care service that increases the risk of harm. This includes abuse and human rights breaches. The development of closed cultures can be deliberate or unintentional – either way it can cause unacceptable harm to a person and their loved ones.”

What can happen in a closed culture?

The shift from caring to closed culture may begin in nuanced routine ways, for example

- less focus on making sure people can access their family and have privacy
- the care given takes little account of the individual's needs and personality
- health conditions may not be recognised because the person's behaviour is seen as a result of their dementia or learning disability
- decisions are made without using the Mental Capacity Act appropriately
- people's personal distress is not dealt with nor is any disorientation or trauma from being admitted
- care may be arranged that that leads to disproportionate and unnecessary infringements on the person's liberty
- record keeping is not accurate or detailed enough.

Where might 'closed cultures' develop?

Wherever:



- 'people may be less able to self-advocate, or
- are less likely to have their communication needs supported, or
- are less likely or to be listened to and believed than others.'
- people are detained, segregated, or held in isolation
- people live a long way from family and community

Closed cultures are more likely to develop in services where:

- people are removed from their communities;
- people stay for months or years at a time;
- there is weak leadership;
- staff lack the right skills, training or experience to support people;
- there is a lack of positive and open engagement between staff and with people using services and their families.

Closed cultures implies secret and unknown:

- While this can be true, in reality poor practice can be routine and systemic, seen by families and visiting professionals, 'in plain sight';
- Unacceptable conditions can be normalised as visitors 'have seen worse';
- While it appears much neglect can be unintentional due to poorly trained staff, numerous reports appear to demonstrate an abuse of power in small, mean but witnessed ways.

The types of services where closed cultures might develop:



- Services for people living with dementia, people with acquired brain injury, and Learning disability and autism services
- Mental health wards, rehab wards, Assessment and Treatment Units
- Wards for frail older people and people with dementia that become closed environments at night

In these services, people are often not able to speak up for themselves - this could be through information that is not accessible to the person, being unable to communicate, being non-verbal, a lack of support to speak up, or abuse of their rights to speak up.

Services at higher risk of developing closed cultures

- 'Undercover Care: the Abuse Exposed – the Winterbourne Review in 2011, set out that all Safeguarding Adults Boards, the CQC and others should regard hospitals for adults with learning disabilities and adults with autism as high-risk services, i.e. patients are at risk of receiving abusive and restrictive practices within abusive time frames.
- Poor physical care, gatekeeping access to secondary care, and over-medication featured for many patients in the 2021 SARs of the deaths of Joanna, Jon and Ben.
- Many high-risk services are well known and continue to be commissioned, often in crisis, with little ongoing incentive to arrange discharge as there are few alternative options.
- The Government Transforming Care Programme aimed to transfer over 3,000 inpatients to community settings by 2014. It is now known as Building the Right Support, published in 2015 along with service specifications. There remain over 2,000 people detained, often in Assessment and Treatment Units (ATUs). Some people are discharged every month, but new patients are also admitted each month.
- Under the Mental Health Act people cannot have a conditional discharge nor Community Treatment Order with conditions that amount to a deprivation of liberty, nor can people with capacity over their care, treatment, and residence be deprived of their liberty under the Mental Capacity Act.

Protection Principle: "Support and representation for those in greatest need"

- Closed cultures can develop incrementally. We all have a responsibility to be proactive: notice, name, and stop even small acts that we witness that are uncomfortable
- Safeguarding Adult Reviews tell us that if more than one member of staff is involved in abuse and neglect, they will collude to cover it up
- Be vigilant

How to identify a closed culture

Warning signs identified by CQC include

- Staff do not see people as equals
- People who are visited less often
- Patients are a long way from their communities
- People stay for months or years at a time
- People are unable to speak up for themselves
- Weak relationships between families and staff; often families portrayed as hostile or overprotective
- Families' concerns are not taken seriously, and their expertise is not valued
- Weak management and supervision
- Staff lack the right skills, training or experience to support people

Risk factors highlighted in ADASS checklist

- Past abuse, in the care setting or of an individual indicates future risk
- High levels of staff and resident turnover
- Fragmented care provision and governance
- Extended stays away from home area
- Little contact with outside world
- Lack of candour
- Weak systems of communication
- Restrictions

Joanna, Jon & Ben Safeguarding Adult Reviews: key learning areas for practitioners

- "the critical role for professional curiosity and challenge
- the trauma of transition
- meaningful support for individuals with behaviours that challenge others
- critical responsibility for staff to advocate reporting and openness
- where the victim of abuse doesn't want to 'complain'
- the importance of meaningful occupations
- making sure attention is given to physical health needs
- mental capacity understand the meaning behind a patient's behaviour."

What to do?

- Encourage and support a transparent culture
- Read the CQC guidance and ADASS checklist in full
- Familiarise yourself with your organisation's whistle blowing procedure
- Identify services at high risk
- Adopt a human rights focus
- Discuss with staff; use team meetings, supervision and mentoring, etc.
- Senior leaders have a role in setting the tone and acting as a role model
- Protectively identify individual adults at risk of their human rights being breached and develop plans
- Use trauma informed approaches; past abuse and sexual assault more likely
- Work with families (in line with the adult's wishes) as equal partners
- Ensure staff take professional curiosity to all visits and meetings
- Understand, hear from and 'see' adults who are placed in care settings or who are isolated
- It is essential to see the distress being communicated that is behind behaviour that staff find challenging



What are the days like? What would it be like to live your life?

The Durham Risk Threshold Tool and Risk Record Sheet help judge the level of risk and seriousness once organisational abuse and/or a closed culture is seen or suspected.

Good Support – What good looks like

“Many people...find some parts of communicating hard. Some people may have little or no language. They might find it hard to:

- Understand what other people say
- Tell other people what they want or how they feel”

If a person cannot tell other people what they want (or don't want!), distress or frustration can be expressed in the way a person behaves. Making communication better can reduce this.

[Challenging communication - Challenging Behaviour Foundation](#)

This summary written for families, identifies ‘Good Support! What should I be looking for?’

- Your loved one has had a proper assessment, which includes a detailed assessment of their behaviour – to identify triggers and work out the best way to support them.
- They have got a behaviour support plan, and this is part of a wider person-centred plan which looks at their whole life, what is important to them, what they enjoy doing. It helps people support them in the right way and help makes sure the person is living the life they want.
- Your loved one is cared for as an individual with services based around their individual needs.
- The service/ staff are willing to work in partnership with families and recognise and value the contribution they bring and listen to what they have to say!
- Staff have had the right training – they understand how your family member communicates and they value and respect them.
- Staff have had training in positive behaviour support and are identifying the reasons for your relative's behaviour and helping them to develop new skills.
- Your loved one is cared for in the least restrictive way possible – you and your family member should be involved in planning how they should be supported. Medication or restraint should only be used if absolutely necessary and as little as possible.

References and resources

- [CQC How CQC identifies and responds to closed cultures](#)
- [CQC Closed Cultures Easy Read](#)
- ADASS checklist for practitioners and senior managers
- [Safeguarding people in closed environments \(derbyshiresab.org.uk\)](#)
- [Joanna, Jon and Ben - published September 2021 | Norfolk Safeguarding Adults Board](#)
- DSAP Risk Threshold Tool and Risk Factors Recording Sheet
 - [Risk Threshold Tool](#)
 - [Risk Factor Recording Sheet](#)
- Coming soon: DSAP Practitioner Newsflashes on Professional Curiosity and on Speaking Out
- [Good practice guidance for professionals - Durham Safeguarding Adults \(safeguardingdurhamadults.info\)](#)
- Parliamentary review 2019
<https://publications.parliament.uk/pa/jt201919/jtselect/jtrights/121/121.pdf>
- <https://publications.parliament.uk/pa/jt201919/jtselect/jtrights/121/Analysis-of-data-from-CQC-and-NHS-Digital-JCHR.pdf>
- Blog by Rachel Griffiths
<https://www.qcs.co.uk/the-risks-of-a-closed-culture/>
- Bethany's dad
[Organisational Abuse - A Chat With Bethany's Dad - Safeguarding Matters - Ann Craft Trust](#)
- Challenging Behaviour Foundation – Person centred support
The Challenging Behaviour Foundation provides information and support.
 - [Person-centred support - Challenging Behaviour Foundation](#) And
 - <https://www.challengingbehaviour.org.uk/information/information-sheets-and-dvds/what-good-looks-like.html>