**COVID-19, social isolation and safeguarding adults**

**Advice for professionals**

We know that social isolation is an increasing risk factor in relation to abuse and neglect. In particular, we know that incidences of domestic abuse, self-neglect and carer stress will increase with social isolation. With more people being asked to self-isolate as a result Covid-19 this needs to be a key consideration when undertaking Section 42 enquiries. Social isolation can mean:

* Abuse/neglect is hidden from professionals or others;
* People do not get the support they need;
* People feel like they do not want to ask for help for fear of being an added burden;
* Increased household stress and tension;
* People ask for help from people who might want to take advantage of their vulnerable position.

Some advice to consider:

* Use existing tools and guidance to assess risk:
* [RBSAB Professional Decision Making Tool](https://www.rbsab.org/UserFiles/Docs/Decision%20Making%20Tool%20v6%20-%20December%202019.pdf)
* [RBSAB Self-neglect strategy and toolkit](https://www.rbsab.org/UserFiles/Docs/Self%20neglect%20and%20hoarding%20strategy%20and%20toolkit%20February%202020.pdf)
* Ensure you factor in Covid-19 pressures to any risk assessments.
* As always, consider mental capacity, control and coercion on a person’s ability to make decisions and keep themselves safe.
* Seek advice from the Safeguarding Adults Unit/Legal if you need to.
* Plans to manage risk might include:
* Referring/opening the case to safeguarding adults procedures if it isn’t already;
* Undertaking the MARAC checklist and subsequent referral to MARAC. If you are asking another agency to do this, please ensure you get feedback that this has been done. **MARAC will continue to operate at this time.** The Safeguarding Adults Unit continues to be the single point of contact for MARAC referrals from Adult Social Care.
* Referral to domestic abuse or carer support agencies (details available at <https://www.ourrochdale.org.uk/kb5/rochdale/directory/home.page>
* Flagging address/person(s) on Adult Social Care records and asking other agencies to do the same;
* Undertaking an assessment/re-assessment of need for the person and/or carer.
* Identifying family/friend/neighbour support and ways in which this could be done via phone/internet if possible;
* Contingency arrangements for the person’s care should the person’s informal support need to self-isolate or be unable to provide care;
* Mental capacity assessments and best interest decisions;

Take into consideration that smaller organisations might be operating slightly differently during the pandemic.