# OF RESTORATIVE PRACTICES IN LOCAL AUTHORITIES IN ENGLAND

Investigating the extent to which safeguarding teams in England are using restorative justice practices and approaches in response to hate crime and discriminatory abuse

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# Evaluating the Extent of Restorative Practices in Local Authorities in England

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### Aims

The aim of this project was to investigate the extent to which safeguarding teams in England are using restorative justice practices and approaches in response to hate crime and/or discriminatory abuse, to create more positive outcomes for people at risk of harm in our communities.

### Objective

To produce a comprehensive evaluation of current practices in addressing hate crime and/or discriminatory abuse across England.

### Introduction

Safeguarding responses to hate crime and discriminatory abuse are an under-explored topic yet have a substantial impact on people being supported by social care services. Our team of interdisciplinary researchers from BU and Royal Holloway London were interested in evaluating the extent of restorative practices for safeguarding adults in England, with a specific focus on hate crime and/or discriminatory abuse (HCADA).

Hate crime refers to a criminal offence which is motivated by hostility or prejudice based on one of five protected characteristics (race or ethnicity, religion, disability, sexual orientation and transgender identity; Home Office, 2024). Discriminatory abuse is one of eleven categories of abuse in safeguarding adults policy. It refers to "harassment, slurs and similar treatment, because of race, gender and gender identity, age, disability, sexual orientation, religion" (Department of Health and Social Care, 2023). Both terms are at times used inter-changeably in response to safeguarding adults policy and practice. This is because there is a statutory requirement for local authorities to make enquiries under Section 42 of the Care Act (2014), if an adult with care and support needs is experiencing abuse or neglect (including HCADA) and is unable to protect themselves as a result of their needs. However, this abuse is widely believed to be under-reported (Mason et al., 2024) and under-recognised. Additionally, hate crime

reports to police are poorly integrated with safeguarding processes (Leeds SAB, 2022). Safeguarding practice is also informed by 'Making Safeguarding Personal'; a sector-led initiative which centres the perspective of the person affected by abuse or neglect (Local Government Association, 2024). It is useful to note that addressing HCADA effectively involves personcentred attention to the characteristics and diversity of the people affected and therefore illustrates 'Making Safeguarding Personal' in action.

There is a dearth of evidence on the use of restorative practices in response to HCADA. Reported hate crime has significantly increased over recent years across England (Home Office, 2022). When those experiencing HCADA have additional care and support needs, such as those arising from disabilities, mental ill-health or old age, a safeguarding response offers potential for improving wellbeing (Healy and Dray, 2022).

This survey explored what practices adult safeguarding teams provide in response to people experiencing hate crime and abuse, as well as identifying any organisations they may work with, to help build a clearer national picture of current practice.

### Literature Overview

Recorded cases of hate crime and discriminatory abuse have broadly been increasing across England for a substantial period (Home Office, 2022). Police recorded disability hate crimes peaked at a high of 14,282 in 2022/23, though dropped in the latest figures released for 2023/24 (Home Office, 2024). Most recent figures on victim-reported disability hate crimes however put estimates closer to 50,000 disability hate crimes in England and Wales, according to Crime Survey data (Home Office, 2020). The effect on victims is extensive, leading to physical and emotional impact, as well as avoidance and withdrawal strategies (e.g. see Healy, 2018). Reporting rates for discriminatory abuse in safeguarding are sparse, accounting for less than 1.2% of all safeguarding activity each year (NHS Digital, 2022). The extent of discriminatory abuse is widely believed to be under-recognised, and highlighted as a significant factor in safeguarding cases under review, and calls for greater awareness of this issue (Preston-Shoot et al, 2020; 2024). A safeguarding approach to responding to HCADA, particularly in cases where those experiencing it have additional care and support needs, can offer potential for improving wellbeing (Healy and Dray, 2022).

There is no current systematic review on this topic. In a scoping review of existing literature on restorative practices in response to HCADA, Mason et al., (2024) identified 30 publications that considered some form of restorative practice in response to HCADA. Restorative practices involve a range of formal and informal approaches that are focussed on bringing the person who has experienced harm into dialogue about its impact, which may involve the person who has caused harm, often within a community-based approach (Hobson et al, 2022; Robinson and Hudson, 2016). These practices have not been mainstreamed in criminal justice, despite Chakraborti et al., (2014) reporting public dissatisfaction with police responses to hate crimes and calls for more community-based solutions. Where restorative practices have been adopted, in small-scale studies it appears that individuals report higher levels of emotional wellbeing and lower levels of isolation and anxiety, because the opportunity to engage in dialogue produced a sense that their experiences matter (Walters, 2020).

The role of community within restorative practice is important because hate crimes impact not just individuals who are targeted, but also send a message to wider communities (Walters et al,

2021), often resulting in greater fear and isolation. Likewise, where hate crimes are successfully handled, this sends a message of reassurance and helps build confidence in those at-risk communities. Where criminal justice responses have been insufficient, poorly implemented or unsuccessful (see eg: Leeds SAB 2022), restorative justice may have prevented further conflict and mitigated negative outcomes.

Although many hate crimes are 'stranger' crimes, where neither the victim or perpetrator is known to one another, a significant number can occur between neighbours or acquaintances and in some cases the person who experiences harm may have also caused harm to others (Walters and Hoyle, 2012). This suggests restorative practices may offer potential to reduce interpersonal conflict and improve outcomes for all concerned. These contextual patterns have also been observed in Safeguarding Adult Reviews, providing further support for a restorative approach (Mason, 2023). Proponents suggest that more research is needed to fill the gaps in our knowledge of restorative justice, including the impacts on people experiencing hate crime and rates of reoffending (Holder 2024).

Restorative justice rejects punitive justice options by attempting to repair harm, re-connect people with their communities, and help them to regain confidence after their experiences of HCADA. Additionally, restorative practice fits well with strengths-based initiatives in safeguarding, which are embedded in the Care Act, 2014. The Chief Social Worker specifically named 'restorative practice' as a strengths-based approach, which focuses on abilities, resources and networks, not just harm, in adult safeguarding (DHSC, 2017). Given the increasing levels of HCADA and Safeguarding Adult Reviews on people targeted due to their protected characteristics, there is an urgent need to establish the extent of restorative practices nationally, and to develop an evidence base and enable practice development and improvement.

Restorative safeguarding responses by local authorities and their partners are therefore a potential pathway to recovery and restoration for people experiencing HCADA, which we argue should sit alongside traditional criminal justice response measures, where appropriate. Current gaps in the evidence base include the lack of a national overview of restorative practices, limited evidence of current practice, including good practice, to inform practice development – all of which were addressed in this project.

### Research process

The proposed method for addressing some of the gaps in our knowledge, as well as the immediate and longer-term impacts of HCADA, was to consider the role of restorative justice and practices (Gavrielides, 2012) nationally. The goals of this research project were to develop an evidence base in relation to safeguarding practice with HCADA, with a specific hypothesis that 'restorative practice' and broader strengths-based approaches are likely to offer improved outcomes for people who experience HCADA. The research team addressed this through a series of workstreams; this included workshops with members of the public (funded by the RDS South West Public Involvement Fund, part of NIHR SW) and a national survey on the use of restorative or strengths-based approaches to HCADA (funded internally by the Faculty of Health and Social Sciences 'pump-prime' fund, 2023).

The two PPI workshops took place online in January 2023 and outcomes supported what the current literature suggests. The disabled participants shared feelings of feeling let down by

existing criminal justice responses and were worried about HCADA. They expressed interest in the potential of restorative approaches to provide opportunities for inclusion and improvement of experiences. The workshops subsequently informed the survey design and the research team's desire to continue to work in this field.

Whilst the team are particularly interested in disability as a subset of HCADA, the national survey was designed to focus more broadly on hate crime responses. Disablist violence and abuse is often poorly recorded or mislabelled under other hate characteristics due to the intersectional nature of the lives of those affected (Macdonald et al., 2023; Turner et al., 2023; Healy, 2019). Furthermore, disability might be perceived as a less protected characteristic than race or religious hate crime characteristics (Vergani et al., 2024), leading to a lower level of awareness and reporting of disability hate crime. These factors potentially reduce the number of cases recorded as disability hate crime and may reduce the potential for reporting successful strategies for responding to these. Given these challenges, the research team have used a broader focus on HCADA in order to capture overall approaches to HCADA which might be applicable to intersectional and disability hate crime approaches. A broad focus provides an opportunity to explore safeguarding responses used to tackle diverse characteristics, including disability, which might otherwise have been missed.

### **Research Question**

What is the extent of restorative and/or strengths based practices in social work safeguarding?

### Methodology

The national survey was therefore a call for evidence from statutory and voluntary sector initiatives across England to identify strengths based and restorative approaches in safeguarding responses for addressing HCADA. Evidence suggests there is significant local variation in the use of restorative approaches; for example, Royal Borough of Greenwich has integrated restorative practice as a safeguarding response (DHSC, 2017), and ten local authorities across the UK have integrated family group conferencing in adult social care (Manthorpe and Rapaport, 2020).

The survey had a mixed methods design, using both open and closed questions, and was constructed via JISC online survey software and sent out to Safeguarding Adult Board (SAB) and the National SAB Chairs and Managers network, as well as the team's own professional and local contacts. This included Local Authority and other contacts via the research team's professional networks, as well as through the Principal Social Work network, Research in Practice, Safeguarding Adult Board (SAB) and the National SAB Chairs and Managers network, and the Discriminatory Abuse Network. SABs outside of England were excluded from the call for evidence.

The survey was distributed during the period 1<sup>st</sup> May- 18th July 2024. Eighteen responses were received, from Safeguarding Adults Board chairs and members, social workers, service managers and directors, strategic safeguarding adults leads, and one domestic abuse coordinator, dispersed across a geographically diverse set of local authorities in England.

### Research Ethics

The Bournemouth University Research Ethics Code of Practice promotes the highest standards of integrity and professionalism in the conduct of research. This survey was subject to a formal ethics review prior to dissemination. The purpose of the survey was clearly communicated to participants, with participation and anonymity optional. While contact details were solicited for the dissemination of results and further information to interested parties, these will not be shared beyond the research team members listed above, and all identifying information has been redacted from survey reports.

The project's full participant information, along with Bournemouth University's Privacy Notice and research governance information can be viewed through clicking on the links in Appendix 3.

### **Survey Findings**

Of the 18 responses, most (n=15) indicated that they used 'strengths based or restorative practices' to address hate crime and/or discriminatory abuse in their local authority to some extent. However, of those, only two then went on to specifically mention using restorative justice and other restorative practices. Both of these were situated in the Northeast of the UK: Lincolnshire and Tyneside. Only one local authority, based in Dorset, indicated that they had experience of conducting Safeguarding Adults Reviews that have addressed hate crime and/or discriminatory abuse.

In the qualitative comments provided by respondents, challenges were identified surrounding the identification of hate crimes, including by police, grass roots organisations and the people with lived experience of hate crime themselves. Some examples of good practice were provided. A full analysis will be provided below.

### 1. Which of the following best describes your role in your organisation?

Those who responded to the survey were all professionals with the relevant industry experience, and many provided useful qualitative information (Table 1, Figure 1).

Responses	Count	Percentage
Safeguarding Adults Board chair / member	6	33%
Strategic safeguarding adults lead	4	22%
Service manager / director	3	17%
Principal social worker	2	11%
Social worker / Senior social worker	1	6%
Team manager	1	6%
Other*	1	6%

Table 1: Respondents professional background. \*'Other' represented a Domestic Abuse Coordinator

### 2. Role Diversity of Respondents

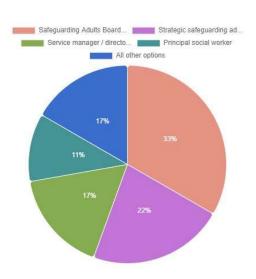


Figure 1: Breakdown of role diversity of respondents

### 3.Location of the local authority

Participants responded from across England (Figure 2). The geographic diversity of responses will provide useful locations for potential case studies and further research. See Appendix 1 for the full list of response locations. The research team is keen to work further with these local authorities to explore practices across the diverse locations.

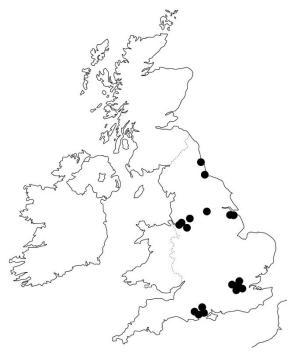
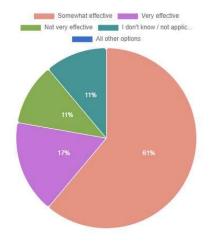


Figure 2: Breakdown of location of respondents

4.The process for managing referrals relating to hate crime and/or discriminatory abuse is set out in the Care Act Statutory Guidance and Multi-agency safeguarding procedures. To what extent do you think this process is effective within your area of oversight?



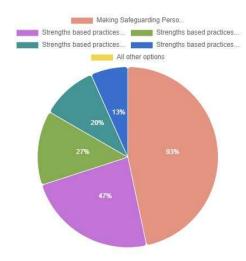
Respondents were asked the Question above. Most (n=14) answered 'Somewhat effective' or 'very effective' in regard to how the guidance sets out processes for managing referrals. Three stated their processes were 'very effective'. Two stated they did not know/not applicable, and a further two indicated they were not very effective. These two were identified as SAB members, but did not provide any qualitative data expanding upon their observations (Figure 3, Table 2).

Figure 3: Effectiveness of managing referrals via guidance and safeguarding procedures

Responses	Count	Percentage
Very effective	3	17%
Somewhat effective	11	61%
Not very effective	2	11%
Not at all effective	0	0%
I don't know / not applicable	2	11%

Table 2: Effectiveness of managing referrals

### 5.Local authority use of strengths based or restorative practices



Participants were asked if their local authority used strengths based or restorative practices to respond to hate crime or discriminatory abuse. Most indicated that they currently use these practices to 'some extent; 15 responded 'yes' and three 'I don't know / not applicable'. However, of those 15 respondents who stated they used strengths-based or restorative practices in response to HCADA, only two reported using restorative justice practices specifically (Figure 4, Table 3).

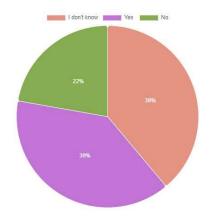
Figure 4: Types of strengths-based or restorative practices used

The majority made reference to Making Safeguarding Personal, though a small number indicated the use of family group conferences (3) and asset-based community work (7). This tentatively suggests that restorative justice is an under-used and/or under-recognised practice, despite the literature highlighting its potential.

Responses	Count	Percentage
Strengths based practices – family group conferences	3	20%
Strengths based practices – restorative justice / restorative practices	2	13%
Strengths based practices – asset-based community development	7	47%
Strengths based practices – signs of safety	4	27%
Making Safeguarding Personal	14	93%
Other	0	0%

Table 3: Types of strengths-based or restorative practices used by respondents

# 6.Do local authorities work with specific services or providers in relation to hate crime and/or discriminatory abuse?



Participants were then asked whether there were specific providers or services they used in relation to HCADA. This specified practices that were more than one-off referrals, such as police reports. Seven said they did not know, 4 said no, and a further seven said they did (Table 4, Figure 3). Of those, only one indicated that they used a Hate Crime team or panel.

Figure 5: Use of specific services or providers for HCADA

Responses	Count	Percentage
Yes	7	39%
No	4	22%
I don't know	7	39%

Table 4: Use of specific services or providers in relation to HCADA

For those who said yes, they provided further details on types of provision and offered a wide variety of providers and services in relation to HCADA that respondents worked with, chiefly their Community Safety network, police partners, and Community Multi Agency Risk Assessment Conference (MARAC), Multi-Agency Risk Management (MARM) or other high-risk panels (Table 5, Figure 6). One respondent stated they worked with a Hate Crime Team or Panel.

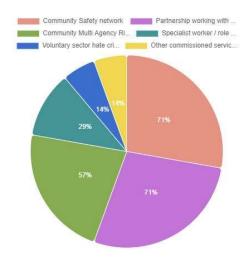
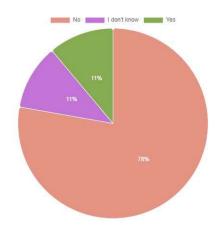


Figure 6: Types of providers who worked with local authorities on HCADA

Responses	Count	Percentage
Community Safety network	5	71%
Voluntary sector hate crime service	1	14%
Specialist worker / role in your local authority	2	29%
Partnership working with police beyond one-off reporting	5	71%
Community Multi Agency Risk Assessment Conference (MARAC), Multi-Agency Risk Management (MARM) or other high risk panel	4	57%
Other commissioned service (Hate Crime Team/Hate Crime Panel)	1	14%

Table 5: Types of providers who work with local authorities

### 7. Safeguarding Adults Reviews in your area



Participants were asked if they were aware of any Safeguarding Adults Reviews in relation to HCADA in their area. Surprisingly, of the 18 respondents, the majority were said they not aware of any safeguarding adult reviews in relation to HCADA in their area, apart from those responding in Dorset, where two of the three respondents said 'yes' (Figure 7, Table 6).

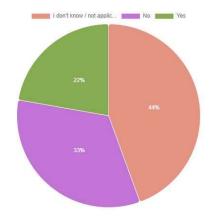
Figure 7: Knowledge of Safeguarding Adult Reviews on HCADA in your area

Responses	Count	Percentage
Yes	2	11%
No	14	78%
I don't know	2	11%

Table 6: Knowledge of Safeguarding Adult Reviews on HCADA in your area

Of the two who responded 'yes', their details were brief: one respondent commented 'SAR', which we assume means a completed review, and the other commented 'SAR ER still in progress'. The lack of awareness regarding SARs potentially suggests a need to promote awareness of such reviews.

# 8. Has your organisation experienced any challenges locally in relation to addressing hate crime and/or discriminatory abuse?



When asked if their local authority or organisation has experienced challenges locally in relation to HCADA, four respondents said yes, they experienced challenges in relation to addressing HCADA, and these expanded on their answers more fully in open text below (Figure 8, Table 7).

Figure 8: Challenges experienced in relation to HCADA

Responses	Count	Percentage
Yes	4	22%
No	6	33%
I don't know / not applicable	8	44%

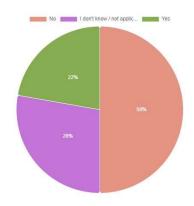
Table 7: Knowledge of Safeguarding Adult Reviews on HCADA in your area

From the qualitative comments, challenges were relayed regarding the identification of hate crimes by police, in identifying grass roots organisations to work with, and in engaging people with lived experience of hate crime themselves:

'Practitioners were not always accurately recording discriminatory abuse and the term was not as well understood as Hate Crime by people with lived experience' - SAB Member 'Individuals who are socially isolated and/or dependent on others to maintain their safety and well being are more at risk of abuse...' - Strategic safeguarding adults lead

Fundamentally, a lack of understanding of what hate crime is leads to inaccurate recognition and recording, and if the definitions are not well understood by service providers, they may also be the case for people with lived experience, leading to gaps in reporting (see Appendix 2 for full qualitative comments). The team is keen to explore these concerns further in future research.

# 9. Examples of best practice, innovative responses and/or measures to improve reporting or training on hate crime or discriminatory abuse



When asked, half of the respondents said they had no examples of best practice, innovative responses and/or measures to improve reporting or training to share, and most of the remainder did not know (Figure 9, Table 8). Most respondents therefore had no examples to provide.

Figure 9: Examples of good practice in relation to HCADA

Responses	Count	Percentage
Yes	4	22%
No	9	50%
I don't know / not applicable	5	28%

Table 8: Examples of good practice in relation to HCADA

However, of the four who answered 'Yes' they provided insightful and rich detail about those experiences. Family Group Conferencing was said to be very effective. One respondent pointed to a "Staying Safe" Project which included 'Train the Trainer', awareness raising and safeguarding enquiry outcomes measuring strands. This was more focused or race/ethnicity-related hate but could potentially be transferable to disability hate crime. Other respondents also pointed to awareness raising campaigns:

'We have practice examples where Family Group Conferencing has been very effective.'-Service manager / director

"...we have added the protected characteristics to our adult social care recording system to improve awareness and accuracy of recording... The group are working on producing a booklet for members of the public which outlines the different categories of abuse." - SAB Member

This suggests a great degree of disparity between a small number of respondents who are aware of and working successfully with restorative practices, and the majority, who are unfamiliar with the terms and potential techniques available to them. Of those responding, there was also a clear desire for further work in this area:

"The SAB would like to enable more opportunities for reflective practice with board partners around discriminatory abuse and culturally informed practice. To achieve this, we would like to explore the use of multi-agency audits. We propose to look at a small number of cases where there has been multi-agency involvement" – SAB Member

### Conclusion

As evidenced within this report, safeguarding responses to hate crime and discriminatory abuse are an under-explored topic and this research hoped to gather more evidence of a national picture of responses and engagement work in this field. Unfortunately, only 18 participants completed the survey, despite widespread calls to the various networks and agencies listed above, but the team are well aware of how busy safeguarding teams and co-workers are, and appreciate the time taken from those who responded.

The picture we are provided with however does have merit. Responses to the survey came from a geographically diverse set of professionals with in-depth knowledge of the issues. Their responses have helped to build a picture of national strengths and needs in tackling HCADA. In general, processes for managing referrals were felt to be effective, but most local authorities appear to be using broad, strengths-based practices to some extent in dealing with HCADA, with the majority referencing Making Safeguarding Personal. Only two respondents pointed to the use of restorative justice practices specifically, despite the potential for success in theory. This suggests the work of the project team in promoting and engaging with local authorities about the potentialities of restorative practices is justified.

Challenges were identified regarding the identification and definitions of hate crimes, which concerns the team, as without a clear understanding of the concepts and terms involved, this can lead to a lack of awareness, understanding and recording of HCADA. This finding supports the literature in suggesting this is a national problem so although responses were low in number, they are indicative of the extent of knowledge already in place.

Further challenges highlighted by the responses suggest there are barriers in terms of identifying suitable organisations to work with locally, and in engaging people with lived experience of hate crime. Again, the team are keen to pursue both these avenues in future research.

It was disappointing to see that most respondents had no examples to share of best practice, innovative responses and/or measures to improve reporting or training to share, although of the small number that did, there were positive signs of successful working. Again, this suggests that future research in terms of a national scoping of potential restorative practice working is warranted.

Moving forward, the research team are submitting a funding bid to continue with a national review of safeguarding practice in HCADA and are looking for partner locations across England

to work with us. Ideally, the research will include conducting an evaluation of good practice, engagement with partners and people with lived experience, and potentially considering trialling (or evaluating) restorative approaches. We welcome approaches from all local authorities, their partners, in any location and area. It is noteworthy that although our evidence base on hate crimes has solidified since the turn of the century, the potential opportunities to engage with safeguarding teams remains under-explored.

As one respondent put it:

"Discriminatory abuse was not always well understood by people with lived experience, but Hate Crime was" - SAB Chair/Member

This suggests we still have a way to go in raising awareness of discriminatory abuse, improving people's lived experiences, and ensuring that access to fair and suitable justice is available to all within our communities.

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The research team want to thank the respondents for taking the time to complete the survey and hope they can engage with them again in the future. Indeed, ten of the respondents were keen to view the survey results and 7 said they would be happy to work with the team in the future, which we will pursue.

We would also like to thank Nan Sheppard, our research assistant, for compiling the survey and helping to construct this report.

Finally, we are very grateful to BU's Faculty of Health and Social Sciences 'pump-prime' funding which provided funding for our research assistant and administration.

More details about the project, some suggested resources and organisations are available here: Exploring restorative practice approaches to safeguarding adults | Bournemouth University

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### Appendix 1: Location of LA respondents:

Hartlepool

Kingston

Camden Council

**NE Lincs** 

Westminster and Kensington and Chelsea

North East Lincolnshire Council

Wakefield

Newham

Cheshire East

South Tyneside

Halton

Halton

Trafford

**BCP Council** 

**Dorset Council** 

**Dorset Council** 

LB Tower Hamlets

Dorset and Bournemouth, Christchurch & Poole LAs

### Appendix 2: Qualitative answers: All text comments in full

15. If you answered 'Yes' for Question 14, 'Has your organisation experienced any challenges locally in relation to addressing hate crime and/or discriminatory abuse?' Can you tell us the reason for your answer:

Police identification of a hate crime

Challenges to ensuring local BME right grass route communities are able to engage in this piece of work.

Practitioners were not always accurately recording discriminatory abuse and the term was not as well understood as Hate Crime by people with lived experience

There are always challenges in identifying and responding to hate crime and discriminatory abuse due to a persons protected characteristics and the challenges/ barriers this can bring for example the intersectional nature of race, disability, sex, age, religion and their ability to seek the right support at the right time from the right person or agency. Individuals who are socially isolated and/or dependent on others to maintain their safety and well being are more at risk of abuse and this in turn results in the person being more likely to be a victim.

The demographic of (redacted) is 96% white British and therefore hate crime and discrimination can be hidden and difficult to identify (no formal evidence to support this but a reasonable assumption) (redacted) Council has a diversity lead in place who supports engagement activity in local communities and with difficult to reach communities. We also have engagement officers who lead on increasing participation and engagement with communities across (redacted). The Adult Safeguarding Team in (redacted) Council have also attended a number of community events to raise awareness of adult safeguarding, what abuse is and how to seek support. We continue to identify opportunities to engage further and are already planning/ participating in future events. All individuals who are involved in an adult safeguarding enquiry also have access to advocacy support if needed to ensure their wishes and views are heard. This is part of ensuring Making Safeguarding Personal Principles are embedded.

17. If you answered 'Yes' to Question 16, 'Do you have any examples of best practice, innovative responses and/or measures to improve reporting or training on hate crime or discriminatory abuse?' Please give us details:

We have practice examples where Family Group Conferencing has been very effective.

"Staying Safe" Project- Commissioned piece of work over a 2 year period to reach into hidden grass route communities to understand what their experience of safeguarding within a cultural focus was. We commissioned the delivery of a 'Safeguarding Train the Trainer' Programme to Global Majority grass route groups. It was translated and delivered by bi-lingual leaders of 14 'hard to reach' language and religious faith groups across (redacted) to include: Arabic, Sudanese, Moroccan, Kurdish, Bangladeshi, Eritrean, and Somali. Its main objective was to: to raise awareness of abuse and neglect and referrals into the council; to understand the barriers to making a referral into the council. Two years later we now have the first BME Safeguarding Network to support a better collaborative understanding of hate crime and discriminatory abuse. (redacted). We collect and monitor the outcomes of safeguarding enquiries

of all ethnic groups and have a benchmark over the past 3-4 years. We know that we deliver the same high-quality outcomes of safeguarding enquiry for all ethnic groups. We also know that more work is needed in collecting ethnicity data at the beginning of an enquiry especially if it gets stood down early. In (redacted), we have added the protected characteristics to our adult social care recording system to improve awareness and accuracy of recording. The SAB service user reference group met at the end of 2023 to look at categories of abuse under the Care Act 2014. The group are working on producing a booklet for members of the public which outlines the different categories of abuse. This will also be available in electronic form and published on the SAB website with the facility for the booklet to be downloaded. Discriminatory abuse was not always well understood by people with lived experience, but Hate Crime was.

The SAB would like to enable more opportunities for reflective practice with board partners around discriminatory abuse and culturally informed practice. To achieve this, we would like to explore the use of multi-agency audits. We propose to look at a small number of cases where there has been multi-agency involvement. This piece of work would be undertaken initially by the SAB Quality Assurance and Performance sub-group.

Not innovative but a marked effort to include in all multi-agency training and a campaign around awareness raising, as well as working creatively with other agencies / departments.

### Appendix 3: Ethics and Privacy Information

Research Participant Privacy Notice.pdf (bournemouth.ac.uk)

https://www.bournemouth.ac.uk/sites/default/files/asset/document/Research%20Participant%20Privacy%20Notice.pdf

<u>Participant Information Sheet Safeguarding Adults and Restorative Practices WEB FINAL\_0.pdf</u> (bournemouth.ac.uk)

 $https://www.bournemouth.ac.uk/sites/default/files/asset/document/Participant%20Information%20Sheet%20Safeguarding%20Adults%20and%20Restorative%20Practices%20WEB%20FINAL_0.pdf$ 

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