Consultation on Proposals for an Offence of Wilful Neglect or III-treatment in Health and Social Care Settings



RESPONDENT INFORMATION FORM

Please Note this form **must** be returned with your response to ensure that we handle your response appropriately

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proposal, that the	situation. However, if the suggestion is as set out in the e offence of wilful neglect and ill-treatment will only apply is in place, then it keeps the focus of the legislation and clear.
remain reasonab treatment and will proposals should	rrangement, other legislation may be invoked. It would le to expect a similar level of care ie freedom from ill-ful neglect in informal arrangements. The coverage of the land to be interpreted to imply acceptance of a lesser in a person's home where other statutory provisions
Should the new o	ffence cover social care services for children, and if so it cover? Please list any children's services that you ed from the scope the offence and explain your view.
Should the new of services should should be excluded for a large of the control o	it cover? Please list any children's services that you ed from the scope the offence and explain your view. uld cover social care services for children as it seems e certain groups of victims of the acts of wilfully neglecting, to their age. The focus of the legislation should be on the

The voluntary sector has a long established role to play in health and care delivery services and in a wide range of settings. The introduction of this offence would ensure that volunteers or staff under the management of voluntary organisations would have same obligations as those working for the private or public sectors. If, however, the work is carried out without a legal contact, then to ensure consistency in the proposals the offence should not apply. Do you agree with our proposal that the new offence should concentrate on the act of wilfully neglecting, or ill-treating an individual rather than any harm suffered as a result of that behaviour? Yes ⊠ No □ The focus is rightly on the intent not the outcome. The harm, resulting from the behaviour, could be very difficult to assess. For example, the offences perpetrated upon the residents of Winterbourne View included physical and mental abuse. It would be difficult to compare and measure the harm suffered by the victims. However, what can be identified and to some degree compared, is the ill-treatment perpetrated by staff members upon those in their care. Do you agree with our proposal that the offence should apply to organisations as well as individuals? Yes ⊠ No □

Whilst individuals perpetrate the acts of wilful neglect and ill-treatment, the ethos and support offered to employees by an organisation/employer is of significant importance. When incidents of ill-treatment and wilful neglect occur, the possibility of the organisation being held to be in part responsible for the actions should be available as a course of action under the proposed legislation/offence.

Caring for others can be a stressful and difficult job. If individual staff members are working in an environment where supervision and management are distant or inadequate, training falls far short of what is required to support them and staffing level and pay are set at the bare minimum, occasionally even the most motivated people can become disillusioned.

What is very dangerous is when disillusion becomes 'dispathy', the state where the carer loses sympathy for the person they are caring for - over time the client/patient can become an object for the staff member/volunteer's discontent and frustration. This does not excuse their behaviour and they must be held fully accountable for their acts of ill-treatment and wilful neglect, but the organisation/employer must also be held to account for allowing the ethos to develop where their staff could commit such acts.

There is a related issue that the development of a negative environment should have been picked up and acted upon at an early date by the statutory inspection services. This is a separate issue and should not fall under this proposed legislation. The statutory inspection agency may be negligent and open to criticism but they are not directly responsible for the acts perpetrated upon the victims of the wilful neglect and ill-treatment.

Yes ☐ No ☐- not applicable
As described above; and where the organisation has attempted to cover up ill-treatment or wilful neglect and where it has failed to take reasonable action to prevent or stop ill-treatment or wilful neglect of patients or residents.
Do you agree that the penalties for this offence should be the same as thos for the offences in section 315 of the Mental Health (Care and Treatment (Scotland) Act 2003 and section 83 of the Adults with Incapacity (Scotland) Act 2000?
Yes No 🗌
No specific comment.

Should the courts have any additional penalty options in respect of organisations? If so, please provide details of any other penalty options that you think would be appropriate.

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The ability to disbar organisations, companies and individuals from being involved in the provision of care for a defined time period, in the same way that company directors or trustees of charities can be disbarred.

Consideration may also be given to put the organisation under some kind of special measures, similar to those used in NHS England.ⁱ

What issues or opportunities do the proposed changes raise for people with protected characteristics (age; disability; gender reassignment; race; religion or belief; sex; pregnancy and maternity; and sexual orientation) and what action could be taken to mitigate the impact of any negative issues?

The new offence should have a favourable impact under the Equality Legislation, so all affected should benefit irrespective of age gender and so on against the protected characteristics. However, women may be overrepresented in caring roles and the proposed new offence may leave them by virtue of gender more exposed to legal intervention and a greater likelihood of facing legal proceedings. This said, the proposed new offence should apply irrespective of gender and the same tests applied to all carers, with no higher or lower test by gender or age or race.

ⁱ http://www.nhs.uk/NHSEngland/bruce-keogh-review/Documents/Special-measures-FAQs.pdf