

LD Residential (Speaking Up: Tracy)

Part A: Trainer Notes (Full Detail)

1 Exploring the Resident's Voice

- Residents (George, Ivy, others) showed fear, distress, and hinted at abuse.
- Ivy implied money stolen; George's distress behaviours mocked/punished.
- Staff dismissed concerns ("take what they say with a pinch of salt").
- Residents' voices must be heard regardless of disability

Trainer prompts / discussion

- How were residents' voices expressed?
- What risks arise when staff dismiss concerns due to disability?

Activity

Role-play: one participant plays a resident, another responds appropriately.

4 Professional Reflections

- Lack of induction/training made Tracy uncertain.
- Organisational culture normalised unsafe practice.
- Mike manipulated dynamics: "helpful" to staff, abusive to residents.
- Reflection: instinctive discomfort is important – don't dismiss it.

Trainer prompts / discussion

- What risks arise with poor induction?
- How can reflection and supervision build confidence to act?

Activity

Pairs exercise: share a time you felt uncomfortable at work – did you act?

2 Impact on the Vulnerable Person

- Emotional harm: humiliation, fear, loss of trust.
- Physical harm: unsafe restraint used on George.
- Financial harm: suspected theft from Ivy.
- Institutional harm: unsafe culture, collusion among staff.

Trainer prompts / discussion

- What types of abuse are evident (physical, emotional, financial, institutional)?
- How does collusion magnify harm?

Activity

Abuse mapping: list evidence under different abuse categories.

5 Ethical & Emotional Dilemmas

- Tracy feared isolation, lost shifts, retaliation.
- Ethical tension: loyalty to colleagues vs duty to residents.
- Emotional toll: anxiety, self-doubt, fear of being "wrong."

Trainer prompts / discussion

- What fears do staff have about whistleblowing?
- How can organisations reduce this fear?

Activity

Debate: is it harder to speak up as a new staff member than as experienced?

3 Safeguarding and Duty of Care

- Duty to safeguard applies to all staff, even new/junior.
- Tracy recognised poor practice but hesitated due to peer pressure.
- Area manager responded correctly: validated concern, escalated safeguarding.
- Staff report, not investigate – whistleblowing routes protect them.

Trainer prompts / discussion

- What stopped Tracy speaking sooner?
- What should managers do when concerns are raised.

Activity

Mock handover: Tracy reports concern → supportive manager explains next steps.

6 Practical Learning Points

- Induction and training must precede independent work.
- Residents' voices always count, regardless of disability.
- Whistleblowing = professional duty, not betrayal.
- Managers must respond supportively and transparently.
- Organisational culture must encourage speaking up.

Trainer prompts / discussion

- What would have happened if Tracy stayed silent?
- What processes prevent recurrence?

Activity / role-play

"What would you do?": groups decide actions at three points – after restraint, after Ivy's money concern, after colleague dismissal.

Wales: Key Law & Policy

- Social Services and Well-being (Wales) Act 2014 – adult safeguarding; organisational abuse.
- Wales Safeguarding Procedures (2019) – provider concerns, escalating allegations.
- Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017 – training, reporting duties.
- Social Care Wales – Code of Professional Practice – professional duty to safeguard.
- Public Interest Disclosure Act 1998 – whistleblowing protections.

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Part B: Handout

Aim

Encourage staff to speak up; recognise institutional abuse; protect residents' rights.

Exploring the Victim's Voice

- Fear, distress, missing money, distress behaviours.
- Voices must be taken seriously despite disability.

Impact on the Vulnerable Person

- Abuse caused emotional, physical, financial, institutional harm.
- Unsafe culture magnified risks.

Safeguarding & Duty of Care

- All staff share duty to safeguard.
- Report concerns immediately – do not investigate.
- Managers must respond supportively and escalate.

Professional Reflection

- Lack of induction/training weakens confidence.
- Instinctive discomfort must trigger action.

Ethical & Emotional Dilemmas

- Staff fears: isolation, retaliation, job security.
- Balance loyalty to colleagues with duty to residents.

Practical Learning Flow

1. Recognise all forms of abuse.
2. Speak up immediately – use whistleblowing policy.
3. Managers validate and escalate concerns.
4. Induction/training protects residents.
5. Build a culture of openness and challenge.

Wales: Key Law

- SSWBA 2014; Wales Safeguarding Procedures 2019; Regulated Services Regs 2017; Social Care Wales Code; PIDA 1998.