

HOPE Safeguarding of Vulnerable Adults Policy

BURTON HOPE Safeguarding Of Vulnerable Adults Policy Charity Number 1187330

Policy Statement

BURTON HOPE is committed to ensuring the protection of vulnerable adults through the development and implementation of effective policies and best practice. Members of the Board of Trustees, coordinators, staff and volunteers recognise and accept the responsibility to develop and raise awareness of the issues involved in working with vulnerable adults.

Relevant legislation and guidance relating to the protection of vulnerable adults are reflected in this policy.

- Care Act 2014
- Criminal Justice Act 2003 Section 146
- Data Protection Act 1998
- Disability Discrimination Act 2005
- Employment Rights Act 1996
- Enduring Power of Attorney Act 1995
- Equalities Act 2010
- Health Act 2006
- Housing Act 2004
- Human Rights Act 2000
- Local Authority Social Services Act 1970
- Mental Health Act as amended 2009
- National Health Service Act 2006
- Police and Criminal Evidence Act 1984
- Power of Attorney Act 1971
- Public Health Acts 1936 & 1961
- Public Interest Disclosure Act 1998
- Registered Homes Act 1984
- Registered Homes (Amendment) Act 1991
- Sexual Offences Act 1956 & 1967
- Sexual Offences Act (Amendment) Act 2000
- Chronically Sick and Disabled Persons Act 1976

Definition

The broad definition of a vulnerable adult is a person:

'Who is eighteen years of age or over, and who may be in need of community care services by reason of mental or other disability, age or illness, and who is or may be unable to take care of him/herself, or unable to protect him/herself against significant harm or exploitation.'

(*'Who Decides'*:1997, Lord Chancellor's department)

This policy is based on the following principles:

- To provide an environment in which vulnerable adults feel safe and valued

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- To ensure that trustees, staff and volunteers always take responsibility to protect vulnerable adults from harm .
- To identify a designated representative for all vulnerable adult matters, and to identify appropriate training opportunities.
- To develop and adopt a set of guidelines/code of conduct for working with vulnerable adults, which all trustees, staff and volunteers are aware of and adhere to.
- To exercise a *Duty of Care* and, when necessary, share information and/or concerns in a confidential manner with the appropriate outside agency e.g. Social Services.
- To ensure that all staff and volunteers who work with, or have responsibility for, vulnerable adults are checked by the Disclosure and Barring Service.
- To ensure recruitment of volunteers includes a minimum of two character references to support an application.
- To develop a time specific induction period when all new staff and volunteers are introduced to guidelines for working with vulnerable adults and policy and procedures.
- To review and update this policy and practice annually.

1. Definitions of abuse

Abuse may be defined as the wrongful application of power by someone in a dominant position. It involves an imbalance of power and exploitation without a full and informed consent. Abuse can take several different forms and may be a single act or repeated acts.

Physical abuse

- Bodily assaults resulting in injuries e.g. hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions
- Bodily impairment e.g. malnutrition, dehydration, failure to thrive
- Medical/healthcare maltreatment

Sexual abuse

- Rape, incest, acts of indecency, sexual assault
- Sexual harassment or sexual acts to which the vulnerable adult has not consented, or could not consent or was pressured into consenting
- Sexual abuse might also include exposure to pornographic materials, being made to witness sexual acts and encompasses sexual harassment and non-contact abuse

Psychological/emotional abuse includes:

- Including threats of harm, controlling, intimidation, coercion, harassment, verbal abuse, enforced isolation or withdrawal from services or supportive networks
- Humiliation
- Bullying, shouting, swearing

Neglect

- Including ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services
- the withholding of the necessities of life, such as medication, adequate nutrition and heating

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Financial or material

- Including theft and fraud
- Exploitation, pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits

Discriminatory

- Including racist, sexist, or based on a person's disability, and other forms of harassment, slurs or similar treatment.

2. Recognising and Responding to Abuse

The following signs may or may not be indicators that abuse has taken place, but the possibility should be considered.

Physical abuse signs

Note: Some ageing processes can cause changes which are hard to distinguish from some aspects of physical assault e.g. skin bruising can occur very easily due to blood vessels becoming fragile.

- A history of unexplained falls or minor injuries
- Bruising in well protected areas, or clustered from repeated striking
- Finger marks
- Burns of unusual location or type
- Injuries found at different states of healing
- Injury shape similar to an object
- Injuries to head/face/scalp
- History of GP or agency hopping, or reluctance to seek help
- Accounts which vary with time or are inconsistent with physical evidence
- Weight loss due to malnutrition, or rapid weight gain
- Ulcers, bed sores and being left in wet clothing
- Drowsiness due to too much medication, or lack of medication causing recurring crises/hospital admissions

Sexual abuse signs

- Disclosure or partial disclosure (use of phrases such as 'It's a secret')
- Medical problems, e.g. Genital infections, pregnancy, difficulty walking or sitting
- Disturbed behaviour e.g. depression, sudden withdrawal from activities, loss of previous skills, sleeplessness or nightmares, self-injury, showing fear or aggression to one particular person, repeated or excessive masturbation, inappropriately seductive behaviour, loss of appetite or difficulty in keeping food down
- Behaviour of others towards the vulnerable adult

Psychological/emotional signs:

- Isolation
- Unkempt, unwashed, smell
- Over meticulous
- Inappropriately dressed
- Withdrawn, agitated, anxious not wanting to be touched
- Change in appetite
- Insomnia, or need for excessive sleep
- Tearfulness

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- Unexplained paranoia, or excessive fears
- Low self esteem
- Confusion

Neglect signs

- Physical condition poor
- Clothing in poor condition
- Inadequate diet
- Untreated injuries or medical problems
- Failure to be given prescribed medication
- Poor personal hygiene

Financial or material signs

- Unexplained or sudden inability to pay bills
- Unexplained or sudden withdrawal of money from accounts
- Disparity between assets and satisfactory living conditions
- Extraordinary interest by family members and other people in the vulnerable person's assets

Discriminatory signs

- Lack of respect shown to an individual
- Signs of substandard service offered to an individual
- Exclusion from rights afforded to others, such as health, education, criminal justice

Other signs of abuse

- Inappropriate use of restraints
- Sensory deprivation e.g. spectacles or hearing aid
- Denial of visitors or phone calls
- Failure to ensure privacy or personal dignity
- Lack of flexibility of choice e.g. bedtimes, choice of food
- Restricted access to toilet or bathing facilities
- Lack of personal clothing or possessions
- Controlling relationships between care staff and service users

3. What to do if you suspect that abuse may have occurred

1. You must report the concerns immediately to the Safeguarding Officer.

The role of the Safeguarding Officer is to:

- Obtain information from staff, volunteers, family members and carers who have vulnerable adult protection concerns and to record this information.
- Assess the information quickly and carefully and ask for further information as appropriate.
- Consult with a statutory vulnerable adult protection agency such as the local Social Services department to clarify any doubts or worries.
- Make a referral to a statutory vulnerable adult protection agency or the police without delay.

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The Safeguarding Officer is to refer allegations or suspicions of neglect or abuse to the statutory authorities. In the absence of the Safeguarding Officer, the matter should be brought to the attention of the Executive Officer.

2. Suspicions will not be discussed with anyone other than those nominated above.

3. It is the right of any individual to make direct referrals to the vulnerable adult protection agencies. If for any reason you believe that the nominated persons have not responded appropriately to your concerns, then it is up to you to contact the vulnerable adult protection agencies directly.

Allegations of physical injury or neglect

If a vulnerable adult has a symptom of physical injury or neglect the designated person will:

1. Contact Social Services for advice in cases of deliberate injury or concerns about the safety of the vulnerable adult. The family member or carer should not be informed by the organisation in these circumstances.
2. Where emergency medical attention is necessary it will be sought immediately. The designated person will inform the doctor of any suspicions of abuse.
3. In other circumstances speak with the family member or carer and suggest that medical help/attention is sought for the vulnerable adult. The doctor will then initiate further action if necessary.
4. If appropriate the family member or carer will be encouraged to seek help from Social Services. If the family member or carer fails to act the designated person should in case of real concern contact Social Services for advice.
5. Where the designated person is unsure whether to refer a case to Social Services then advice should be sought from a relevant vulnerable adult protection agency.

Allegations of sexual abuse

In the event of allegations or suspicions of sexual abuse the designated person will:

1. Report this to the Social Service duty social worker for vulnerable adults directly. The designated person will not speak to the family member or carer.
2. If the designated person is unsure whether or not to follow the above guidance, then advice from Social Services will be sought.
3. Under no circumstances should the designated person attempt to carry out any investigation into the allegation or suspicions of sexual abuse. The role of the designated person is to collect and clarify the precise details of the allegation or suspicion and to provide this information to Social Services whose task it is to investigate the matter.
4. Whilst allegations or suspicions of sexual abuse should normally be reported to the designated person, their absence should not delay referral to Social Services.

4. Responding to a vulnerable adult making an allegation of abuse

- Stay calm, listen carefully to what is being said

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- Find an appropriate early opportunity to explain that it is likely that the information will need to be shared with others-do not promise to keep secrets
- Allow the vulnerable adult to continue at his/her own pace
- Ask questions for clarification only and always avoid asking questions that suggest a particular answer.
- Reassure the vulnerable adult that they have done the right thing in telling you
- Tell them what you will do next and with whom the information will be shared
- Record in writing what was said using the vulnerable adult's own words as soon as possible, note the date, time, any names mentioned, to whom the information was given and ensure that the record is signed and dated.

Helpful statements to make

- I believe you (or showing acceptance of what the vulnerable adult says)
- Thank you for telling me
- It's not your fault
- I will help you.

Do not say

- Why didn't you tell anyone before?
- I can't believe it!
- Are you sure that this is true?
- Why? Who? When? Where?
- Never make false promises.

5. What to do after a vulnerable adult has talked to you about abuse

The procedure

1. Make notes as soon as possible (ideally within 1 hour of being told) you should write down exactly what the vulnerable adult has said and what you said in reply and what was happening immediately before being told (i.e. the activity being delivered) You should record the dates, times and when you made the record. All handwritten notes should be kept securely.

You should use the form "Reporting Suspected Abuse" This form is attached at the back of this policy. (Appendix 2)

2. You should report your discussion with the Safeguarding Officer as soon as possible. If this person is implicated, you need to report to the Chair of the Board of Trustees. If both are implicated report to Social Services, for contact details see Appendix 1.

3. You should under no circumstances discuss your suspicions or allegations with anyone other than those nominated above.

4. After a vulnerable adult has disclosed abuse the designated person should carefully consider whether or not it is safe for a vulnerable adult to return home to potentially

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abusive situation. On these rare occasions it may be necessary to take immediate action to contact Social Services to discuss putting safety measures into effect.

6. Recruitment and appointment of workers and volunteers

In recruiting and appointing coordinators and workers, BURTON HOPE will be responsible for the following:

- We will identify the tasks and responsibilities involved and the type of person most suitable for the job.
- We will draw up the selection criteria and putting together a list of essential and desirable qualifications, skills and experience.
- All applicants should apply in writing and their application will cover their personal details, previous and current work/volunteering experience.
- We will send a copy of our vulnerable adult protection policy with the application pack if relevant to post, otherwise this will form part of the policy induction process.
- We will make sure that we measure the application against the selection criteria.
- If relevant to the post applicants need to sign a declaration stating that there is no reason why they should be considered unsuitable to work with vulnerable adults. The Rehabilitation of Offenders Act (1974) requires that people applying for positions working with vulnerable adults must declare all previous convictions. A Disclosure and Barring Service Check must be obtained. They are also required to declare any pending case against them. It is important that the applicant in this particular category understands that all information will be dealt with confidentially and will not be used against them unfairly. (ex-Offender Policy)
- We will ask for photographic evidence to confirm the identity of the applicant e.g. their passport.
- We will request to see documentation of any qualifications detailed by the applicant.
- We will always interview our candidates and ask for two references.
- We will request two written references from people who are not family members or friends and who have knowledge of the applicant's experience of working with vulnerable adults if relevant to the post. We will ask the referee to also comment on their suitability for working with vulnerable adults.
- The same principles apply to young people who have been involved with the organisation and have become volunteers.
- If relevant to the post, we will ensure that our successful applicant obtains a Disclosure and Barring Service Check if we are legally entitled to do so.

7. Allegations against a member of staff

We will assure all coordinators, staff and volunteers that HOPE will fully support and protect anyone, who in good faith reports his or her concern that a colleague is, or may be, abusing a vulnerable adult. Where there is a complaint against a member of staff there may be three types of investigation:

- A criminal investigation
- A vulnerable adult protection investigation
- A disciplinary or misconduct investigation.

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The results of the police and vulnerable adult protection investigation may well influence the disciplinary investigation, but not necessarily.

Action if there are concerns

1. Concerns about poor practice:

- If, following consideration, the allegation is clearly about poor practice; this will be dealt with as a misconduct issue.
- If the allegation is about poor practice by the Designated Person or if the matter has been handled inadequately and concerns remain, it should be reported to the Director or Chair who will decide how to deal with the allegation and whether or not the organisation should initiate disciplinary proceedings.

2. Concerns about suspected abuse

- Any suspicion that a vulnerable adult has been abused by either a member of staff or a volunteer should be reported to the Designated Person, who will take such steps as considered necessary to ensure the safety of the vulnerable adult in question.
- The Designated person will refer the allegation to the Social Services department who may involve the police or go directly to the police if out-of-hours.
- The parents or carers of the vulnerable adult will be contacted as soon as possible following advice from the Social Services department.
- If the Designated Person is the subject of the suspicion/allegation, the report must be made to the Director or Chair who will refer the allegation to Social Services.

3. Internal Enquiries and Suspension

- The Safeguarding Officer in conjunction with the Chair will make an immediate decision about whether any individual accused of abuse should be suspended pending further police and Social Services enquiries.
- Irrespective of the findings of the Social Services or police enquiries, the organisation will assess all individual cases to decide whether a member of staff or volunteer can be reinstated and how this can be sensitively handled. This may be a difficult decision; particularly where there is insufficient evidence to uphold any action by the police. In such cases, the organisation must reach a decision based upon the available information which could suggest that on a balance of probability, it is more likely than not that the allegation is true. The welfare of the vulnerable adult should remain of paramount importance throughout.

8. Supervisory arrangements for the management of BURTON HOPE's activities and services.

We will aim to protect vulnerable adults from abuse and our team members from false allegations by adopting the following guidelines:

- We will keep a register of the events and activities in which we are involved where vulnerable adults are present and

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- We will keep a record of times we are present in relation to the above and sign in and out using the attendance logs provided by the host organisation.
- We will keep a register of all team members (both paid staff members and volunteers)
- We will keep a record of all sessions including monitoring and evaluation records.
- Our team members will record any unusual events on the accident/incident form.
- Where possible our team members should not be alone with a vulnerable adult for long periods of time, although we recognise that there may be times when this may be necessary or helpful
- We recognise that physical touch between adults and vulnerable adults can be healthy and acceptable in public places. However, our team members will be discouraged from this.
- All team members should treat all vulnerable adults with dignity and respect in attitude, language and actions.

9. Support and Training

BURTON HOPE is committed to the provision of vulnerable adult protection training for all relevant team members.

10. Review and Monitoring

The effectiveness of this policy will be reviewed regularly by the Board of Trustees (at least annually) and action taken as necessary with reference to matters raised throughout the last period, or changes to legislation. However, any Trustee may call for a review at the next possible Board of Trustee Meeting.

Policy Name	Safeguarding of Vulnerable Adults Policy
Policy Ref Number	SG 1
Review required	2021
This policy is to be reviewed	Annually or after any investigation or change in legislation
Date amendments agreed	Jan 2020
Signed – Chair	J.A. e signature

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Appendix 1 **Reporting allegations or suspicions of abuse**

If you have any concerns about a vulnerable adult being abused, you should inform the designated person detailed below.

Organisation

Burton HOPE

Name

John Anderson ,
Anne Bradshaw

Job/Role

Chairperson
Safeguarding Coordinator

Address

Tel no

07905750494
07831637678

Important contacts outside the organisation

Vulnerable adult protection reference

Social services office

Address

Suite 16, Anglesey House, Anglesey Rd
Burton Upon Trent
DE14 3NT

Tel no

Tel: 0300 111 8010 – Duty Social Worker (Adults)

Out of hours no

Emergency Duty Service 07815 492613

Police station

Address

Burton on Trent Police Station, Horninglow Street, Burton on Trent

Tel no

101 Emergency 999

Other numbers

Staffordshire County Council Advice and Support: 01785 223121

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Adopted by BURTON HOPE

Date.....

Chairperson/Trustees/Committee signatures

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Review Dates.....

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Reporting Suspected Abuse

Confidential Recording Sheet

Organisation

Name of person reporting

Name of vulnerable adult

Age and date of birth

Ethnicity

Religion

First language

Disability

Family Member/Carer's name(s)

Home address/Tel no

Are you reporting your concerns or reporting someone else's. Please give details.

Brief description of what has prompted the concerns: include date, time, specific incidents.

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Any physical signs? Behavioural signs? Indirect signs?

Have you spoken to the vulnerable adult? If so, what was said?

Have you spoken to the family member/carer(s)? if so, what was said?

Has anybody been alleged to be the abuser? If so, please give details?

Have you consulted anybody else? Please give details

Person reported to and date of reporting

Signature of person reporting

Today's date

Action taken

Notes

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Useful Contacts

Action on Elder Abuse

P.O. Box 60001, Streatham, London, SW16 9BY
www.elderabuse.org.uk, enquiries@elderabuse.org.uk
Elder Abuse Helpline (Mon-Fri 9am-5pm) 0808 808 8141

Quality Care Commission (Adults)

CQC National Customer Service Centre,
Citygate, Gallowgate, Newcastle Upon Tyne, NE1 4PA
Helpline 03000 616161

Voice UK

Helpline 0808 802 8686
Email voice@voiceuk.org.uk

Public Concern at Work

Helpline 020 7404 6609, Email helpline@pcaw.co.uk

Disclosure and Barring Service

Helpline 0300 123 1111

Alzheimer's Society

Lichfield Branch: 01543 255955

Ann Craft Trust

This is a national association working with staff in the statutory, independent and voluntary sectors in the interests of people with learning disabilities who may be at risk from abuse.
Enquiries: 0115 951 5400
Website: www.anncrafttrust.org

MIND infoline

Information regarding mental health related issues. Help in finding out options and local services.
Infoline: 0300 123 3393
info@mind.org.uk

Relatives and Residents Association

Help, information or advice about a relative who is in a care home or about to enter one.
Advice line: 020 7359 8136 Monday – Friday 9.30am – 4.30pm
General Enquiries: 020 7359 8148
Email: info@reles.org

Voice

Provide support to people with learning disabilities who have been abused, raises awareness, campaigns and promotes best practice
Helpline: 0808 802 8686 9.00am – 5.00pm
Email: helpline@voiceuk.org.uk

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Adopted By BURTON HOPE CHARITY on 1st January 2020

Review Date 1st January 2022 or if Legislation Changes

Adopted by Burton Hope on

Signed.....

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