



# Exeter Community Initiatives

<b>Policy Name:</b>	<b>SAFEGUARDING ADULTS POLICY</b>
<b>Adopted by Council:</b>	<b>26<sup>TH</sup> November 2013</b>
<b>Last Review:</b>	
<b>Next Review:</b>	

**The Trustees in adopting this policy fully understand their legal obligations and the importance of monitoring and implementing the policy within ECI.**

# SAFEGUARDING ADULTS POLICY

## 1. Background

1.1 ECI is a registered charity and company limited by guarantee. Throughout this policy, ECI refers to the organisation as a whole that comprises the work of the individual projects and any support services that are provided corporately.

## 2. Statement of Intent

2.1 This policy has been written with the aim of ensuring that all vulnerable adults accessing any of the services provided by ECI are safe and free from the threat of harm.

2.2 ECI wishes to take every possible precaution in order to protect all vulnerable adults with whom we work from the threat of abuse. Any suspicion of harm will be responded to promptly and appropriately in line with the procedures set out in this policy.

2.3 For the purposes of this policy a Vulnerable Adult is someone aged 18 or over who is, or may be:

- In need of community care services because of mental or other disability, age or illness and
- Unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation ('No Secrets' 2:3)

## 3. Responsibility for Policy

3.1 The trustees of ECI are ultimately responsible for ensuring that this policy is regularly reviewed and properly implemented.

3.2 In practice, the day to day responsibility for ensuring that any concern about the welfare of an adult involved in an ECI activity is dealt with appropriately lies initially with the relevant Project Manager (where appropriate), and ultimately with the ECI Chief Executive and the Safeguarding Lead. This is the case whether the person suspected of abusing the person is an ECI employee or volunteer or someone else outside the organisation or whether the abuse results from self-neglect, the person's own behaviour or lifestyle.

3.3 However, it is now widely accepted that it is the responsibility of every adult to protect vulnerable adults from harm. ECI recognises that anyone who has contact with a vulnerable adult may be abusive in their actions. ECI also recognises that anyone who has regular contact with vulnerable adults may be a link in identifying where an adult needs protection. The organisation will therefore ensure that staff and volunteers working with vulnerable adults realise it is their responsibility to act on their concerns. The organisation will provide them with the support needed to follow through the process of raising concerns.

## 4. Safeguarding Procedures

4.1 All staff will know and understand ECI's Safeguarding Adults Policy and Procedure and will sign a copy of the Safeguarding Adults Policy to confirm their understanding and compliance with the policy upon induction and review again as required.

4.2 ECI's policy and approach for dealing with suspected harm to an adult needs to be communicated. The policy will be available on the ECI website and staff must refer service users to the policy appropriately.

## **5. Recruitment and selection process**

- 5.1 ECI will ensure that any paid member of staff or volunteer recruited to a role which involves work with children or vulnerable adults has been subject to a rigorous selection process including interviews, taking up references (including at least one regarding previous work with children or vulnerable adults) and appropriate level criminal record checks, following ECI's 'Procedures for Criminal Record Bureau (CRB) checks'.
- 5.2 No-one will be allowed to work in a situation where they might be alone with children or vulnerable adults until their CRB check has been satisfactorily completed.

## **6. Induction and training process**

- 6.1 ECI will ensure that all staff, trustees, and volunteers receive the Safeguarding Adults Policy and 'What to do if you suspect an adult is at risk'. Their reading and understanding of this will be checked as part of the induction process.
- 6.2 Also their project manager will talk through the Adult Safeguarding Concern Form so that staff are familiar with it and confident to record their concerns.
- 6.3 This policy will be read as part of the Induction programme for new employees and volunteers and they will sign the relevant form to confirm their commitment to it and again review again as required by ECI.

## **7. Code of behaviour when working with Vulnerable Adults**

- 7.1 To reduce situations where the abuse of vulnerable adults could take place and to protect staff and volunteers, ECI staff and volunteers will:
- ensure that training for staff and volunteers includes how to develop and maintain appropriate professional boundaries.

## **8. Health and Safety Checks**

ECI will risk assess all activities and venues to ensure that Vulnerable Adults are protected from intentional and unintentional harm.

## **9. Other related policies**

- 9.1 This Safeguarding Adults policy is one of several policies adopted by ECI to ensure the safety and well-being of their employees, trustees, volunteers and clients. It should be read and acted upon alongside the following:
- Equality and Diversity Policy
  - Health and Safety Policy
  - Supervision Policy
  - Confidentiality Policy
  - Criminal Records Bureau Procedures
  - Harassment and Bullying Policy
  - Lone Working Policy
  - Child Protection Policy

(Revised as at 27.11.12)

**EXETER COMMUNITY INITIATIVES**  
**ADULT SAFEGUARDING POLICY – APPENDIX ONE**  
**‘WHAT TO DO IF YOU SUSPECT AN ADULT IS AT RISK’**

**1. What is abuse?**

Abuse is a violation of a person's human and civil rights by any other person(s).

Abuse can consist of a single or repeated act(s). It may be physical, verbal or psychological. It may be an act of neglect or an omission to act, or it may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which he or she has not consented or cannot consent.

Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it.

**Types of abuse:**

- **Physical abuse**, including hitting, slapping, pushing, kicking, misuse of medication or inappropriate sanctions or restraint.
- **Sexual abuse**, including rape and sexual assault or sexual acts to which the vulnerable adult has not consented, could not consent or was pressured into consenting.
- **Psychological abuse**, including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation or blaming.
- **Financial or material abuse**, including theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions or the misuse or misappropriation of property, possessions or benefits.
- **Neglect and acts of omission**, 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.
- **Discriminatory abuse**. This abuse is motivated by discriminatory and oppressive attitudes towards race, gender, cultural background, religion, physical and/or sensory impairment, sexual orientation and age. Discriminatory abuse manifests itself as physical abuse/assault, sexual abuse/assault, financial abuse/theft and the like, neglect and psychological abuse/harassment, including verbal abuse.
- **Institutional abuse, neglect and poor professional practice**. This may take the form of isolated incidents of poor or unsatisfactory professional practice at one end of the spectrum, through to pervasive ill treatment or gross misconduct at the other.

Any or all of these types of abuse may be perpetrated as the result of deliberate intent, negligence or ignorance.

**Risks arising from self-neglect or a person's own behavior or lifestyle**

This policy may apply to a person who is unable to provide adequate care for themselves and:

- They are unable to obtain necessary care to meet their needs
- They are unable to make reasonable or informed decisions because of their state of mental health or because they have a learning disability or an acquired brain injury
- They are unable to protect themselves adequately against potential exploitation or abuse
- They have refused essential services without which their health and safety needs cannot be met

## 2. What might you notice?

There are only a few examples of possible signs, none being conclusive on their own.

- Injuries, for example, a slap, being restrained in a chair, given too much medication
- Being involved in a sexual act they don't want or didn't agree to like watching pornography
- Weight loss
- Dehydration
- Lack of personal care
- Bills not being paid
- An overly critical or disrespectful carer who may for example bully, undermine, say that a person is worthless
- Sudden loss of assets, someone may threaten the person to gain access to their money, get them to change their will for example
- Not getting to medical appointments
- Deference or submission to a suspected abuser
- Change in behaviour or mood
- Isolation from usual networks of friends/family/community
- Where a carer looks after the person in a way that is convenient to them, not what is needed and this results in their health being affected

Incidents of abuse may be multiple, either to one person in a continuing relationship or service context, or to more than one person at a time. This makes it important to look beyond the single incident or breach of standards to underlying dynamics and patterns of harm. Some instances of abuse will constitute a criminal offence. In this respect, vulnerable adults are entitled to the protection of the law in the same way as any other member of the public. When complaints about alleged abuse suggest that a criminal offence may have been committed, it is imperative that reference should be made to the Police as a matter of urgency. Criminal investigation by the Police takes priority over all other lines of enquiry.

## 3. Who Can be the Abuser?

Vulnerable adults can be abused by anybody

## 4. If You Know of an Adult who may be at Risk of Abuse or is Being Abused

**Do -**

- Ensure your safety or the safety of the vulnerable adult
- Write down any disclosure/incident information you have as soon as possible

- Tell someone - Contact the Project Co-ordinator/Manager or the Safeguarding leads

**Don't –**

- Tell the person you think is causing the abuse
- Do not ask questions/do not investigate

**Responding to disclosure - Some incidents of abuse only come to light because the abused person discloses the information himself or herself.**

The abused person may not understand that they are being abused and so not realize the significance of what they are telling you. Some disclosures happen many years after the abuse. There may be good reasons for this for example the person they were afraid of has left the setting. Therefore, any delay in an individual reporting an incident should not cast doubt on its truthfulness.

**When someone discloses to you, remember you are not investigating.**

**Do:**

- Stay calm and try not to show shock.
- Listen very carefully.
- Be sympathetic.
- Be aware of the possibility that medical evidence might be needed.
- Tell the person that:
  - They did a good/right thing in telling you.
  - You are treating the information seriously.
  - It was not their fault.
- Explain that you must tell your Line Manager (and Safeguarding Leads) and, with their consent, the manager will contact Adult Services and/or Police. The manager will, in specific circumstances, contact Adult & Community Services without their consent but their wishes will be made clear throughout.
- If a referral is made but the vulnerable adult is reluctant to continue with an investigation, record this and bring this to the attention of the Safeguarding Adults Co-ordinator. This will enable a discussion of how best to support and protect the vulnerable adult.

However, a professional case discussion will still need to take place and should be recorded appropriately.

**Do not:**

- Press the person for more details.
- Promise to keep secrets (you can never keep this kind of information confidential).
- Pass on the information to anyone other than those with a legitimate "need to know", such as your Line Manager.
- Make promises you cannot keep (such as, "I will never let this happen to you again").
- Contact the alleged abuser.
- Be judgmental (for example, "Why didn't you run away?").
- Gossip about abuse.
- Stop someone when they are telling you what has happened to them, as they may never tell you again.

**You must:**

- Make a note of what the person actually said, using his or her own words and phrases.
- Describe the circumstance in which the disclosure came about.
- Note the setting and anyone else who was there at the time.
- When there are cuts, bruises or other marks on the skin use a body map to indicate their location, noting the colour of any bruising.
- Make sure the information you write is factual. You may wish to indicate your own opinion or a third party's information. If you do, ensure the separation is made very clear.
- Use a pen or biro with black ink so that the report can be photocopied. Try to keep your writing clear.
- Sign and date the report, noting the time and location. Be aware that your report may be needed later as part of a legal action or disciplinary procedure.

**5. Is the information offered confidential?**

No. All information should be recorded on the Safeguarding Adults Concern Form. The information will be passed to Adult and Community Services if a referral is made. A strategy to manage the sharing of information should be formed with the Safeguarding Lead.

**6. How do I know whether it is definitely abuse?**

Naming the concern as 'abuse' is less important than assessing the level of risk posed to the person. You may feel unsure in your judgment, the Safeguarding Lead and / or Care Direct will be able to advise on whether there needs to be a referral made to Adult and Community Services.

You may have this discussion with either of the following:

ECL's Safeguarding Leads are currently Ann Brandrick and Clare Edmonds.

**Care Direct – 0845 1551 007** opening Hours 8am-8pm Monday to Friday, 9am-1pm Saturday. Outside of these times, the **Emergency Duty Team** can be contacted on 0845 6000 388.

**7. Making a referral.**

If the discussion with the Safeguarding Lead / Care Direct concludes that there is a risk to the person; at this point you will be required to share your personal details and those of the person you are referring. Give all the information you have no matter how insignificant it might seem. To refer to the Adult and Community Services contact Care Direct. **The main contact number for Care Direct is 0845 1551 007** opening Hours 8am-8pm Monday to Friday, 9am-1pm Saturday. Outside of these

times, the **Emergency Duty Team** can be contacted on 0845 6000 388 or contact the Police.

If a referral is accepted by Adult & Community Services an investigation into the person's situation takes place at once. In exceptional circumstances, the evidence of an individual may be required in a Court of Law.

Whether the conclusion is that the person is or is not at risk, every effort should be made to handle information discreetly for the benefit of the person by working openly and in partnership with other professionals. This helps identify lower level needs and appropriate action can still be taken. It encourages the spirit of cooperation that makes it easier to share information, which is important when abuse is suspected. The Safeguarding Lead will be able to offer you practice supervision to manage information sharing appropriately.

#### **8. Everyone working for ECI should:**

- Be familiar with and follow ECI's procedures and protocols for promoting and safeguarding adults and know who to contact in ECI if you have concern about a person's welfare (see flowchart and Safeguarding Adults Concern Form).
- Remember that an allegation of abuse or neglect may lead to a criminal investigation so don't do anything that may jeopardise a police investigation, such as asking the person leading questions or attempting to investigate the allegations of abuse.
- When you make a referral, agree with the recipient of the referral what the person will be told, by whom and when.
- Record all concerns, discussions about the person, decisions made and the reasons for those decisions. If you make a referral by telephone, confirm it in writing within 48 hours. Children's Services should acknowledge your written referral within one working day of receiving it so if you have not heard back within 3 working days, contact Children's Services again.
- Ensure that the Safeguarding Lead is kept informed and up-to-date. (If the concern relates to the Safeguarding Lead, inform the Chief Executive of ECI about your concerns and contact Care Direct).
- Ensure that the Chief Executive is informed if the issue involves allegations against an ECI member of staff or volunteer, or you or the Safeguarding Lead believe the issue has the potential to be the subject of significant media interest, or is likely to bring ECI into disrepute

#### **9. Guidance on information sharing for safeguarding and promoting the welfare of adults**

It is rare for the law or professional codes of conduct to provide an absolute barrier to disclosure. The simplest way of viewing information sharing is:

If you suspect a vulnerable adult is at risk of abuse, all information needs to be shared with Devon Adult & Community Services and / or the police.

Anyone who receives information, knowing it is confidential, is also subject to a duty of confidence. Whenever you give or receive information in confidence you should ensure there is clear understanding as to how it may be used or shared.



A young person aged 16 or over, who has the capacity to understand and make their own decisions, may give (or refuse) consent to a disclosure. If consent to sharing the information is refused, you will need to decide if the circumstances justify the disclosure, taking into account what is being disclosed, for what purposes and to whom. Where the person lacks the capacity this is covered by the:

### **Mental Capacity Act 2005:**

- Provides a legal framework for making significant life decisions for adults who lack the capacity to make such decisions themselves.
- Examples of the decision the act covers are managing finances, some medical treatments and where to live.
- The act also makes the ill treatment or neglect of an adult who lacks capacity a criminal offence.
- In some circumstances, an Independent Mental Capacity Advocate (IMCA) can be instructed by the Local Authority or NHS to facilitate a decision making process.
- The act also covers situations for people who want to make arrangements for their care and finances in the event they lose their capacity in the future – 'advance decisions' & 'lasting powers of attorney'.

The key factor in deciding whether or not to disclose confidential information is proportionality. The amount of confidential information disclosed and the number of people to whom it is disclosed should be no more than is strictly necessary to meet the public interest in protecting the health and well-being of a vulnerable adult (the 'need to know' basis). The approach should be the same whether the information is being shared internally within an organisation or between agencies.

### **10. If your concern relates to a member of staff or a volunteer.**

- Inform and discuss your concerns with your project manager, and inform the ECI Chief Executive
- If the person to whom the concern relates is your project manager, inform and discuss your concerns with the person above him/her.
- Whether a referral is to be made or not always inform the Safeguarding Lead of your concerns, and, always complete a Safeguarding Adult Concern Form to record the issues raised.
- A member of staff or volunteer may be suspended while appropriate investigations take place. These could include criminal, child protection and disciplinary investigations.
- The usual ECI disciplinary procedures will be followed as outlined in the Disciplinary Policy. These may be influenced by the outcome of investigations by the Police and/or ACS.
- Contact **Care Direct** to discuss your concern.

### **11. Where can you find more information?**

This policy has been developed in accordance with the information developed by Devon County Council about safeguarding vulnerable adults.

For more information visit <https://www.devon.gov.uk/adult-protection.htm>

and the Department of Health Publication:

**'No secrets: guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse'**

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_4008486](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4008486)