
SAFEGUARDING VULNERABLE PEOPLE

1. Context aims & objectives of this policy

Most of our residents are over 70, needing supported or sheltered accommodation, and hence potentially vulnerable. Our Society believes that they have the right to live their lives free from abuse and we recognise our obligation to protect them. Quoting from the DOH document, *No Secrets 2000*, "There can be no secrets and no hiding place when it comes to exposing the abuse of vulnerable adults." We extend this "No Secrets" principle to young people and children who may be visiting, volunteering, on a school placement, or working within the house. To meet these ends, this policy has two intended outcomes:

- Vulnerable adults, young employees or volunteers and visiting children or young people are kept free from abuse within our houses.
- Should any abuse be reported &/or found to occur, action is taken to investigate, end the abuse and protect the individual who has been abused.

We aim to prevent abuse where possible and, if preventive measures fail, to ensure that robust procedures are in place for dealing with any incident of abuse. Vulnerable adults will be supported by our staff and volunteers. They will receive suitable training to ensure that they know and understand their responsibilities and will work proactively to safeguard vulnerable people from abuse and harm. Guidance will be clear on what steps are needed to prevent and minimise abuse, and the action to be taken if abuse is witnessed or suspected. Any concerns involving actual or possible abuse of vulnerable adults, young people working in the house or visiting children will be taken extremely seriously, investigated thoroughly and responded to comprehensively.

2. Definitions and types of abuse

The following are "No Secrets" definitions

- **Abuse** - violation of an individual's human and civil rights by any other person or persons.
- **Vulnerable adult** - a person aged 18 years or over who is or 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 or herself, or unable to protect himself or herself against significant harm or exploitation.
- **Significant harm** –this refers to "ill treatment (including sexual abuse and forms of ill treatment that are not physical); the impairment of or an avoidable deterioration in physical or mental health; and the impairment of physical, emotional, social, or behavioural development."

The following forms of abuse are identified within the "No Secrets" guidance, though there are many different forms of abuse and abusive situations rarely fit neatly into defined categories.

- **Physical abuse**, including hitting, slapping, pushing, kicking, misuse of medication, restraint, or inappropriate sanctions
- **Sexual abuse**, including rape and sexual assault or sexual acts to which the vulnerable person has not consented, could not consent or was pressured into consenting
- **Psychological abuse**, including emotional abuse, threats of harm or abandonment, deprivation, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks

- **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 appropriate access to health, social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating
- **Discriminatory abuse**, including racist, sexist, abuse based on a person's disability, and other forms of harassment, slurs or similar treatment.
- **Institutional abuse**, neglect and poor professional practice in support settings also need to be taken into account. It 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. Repeated instances of poor support may be an indication of more serious problems.

3. Barriers to reporting Abuse and how to overcome them

Our Society recognises that there are substantial barriers to older people reporting abuse, namely:

- A sense on the part of the older individual that their personal circumstances limit their capacity to deal with the situation.
This can include: Low self-esteem and self-confidence: Loneliness, feeling that there is no one they can trust to talk it through with: Physical frailty, worrying about the consequences for themselves of reporting it: Thinking it's not serious enough to report.
- Concern that reporting the situation could make the abusive situation worse.
This can include: The fear that reporting the abuse will leave them isolated: The fear of being seen as "making a fuss:" Concern that they will be blamed for the problem.
- Concern that the individual, the abuser or a third party could be affected by the reporting. This can include: Worry about the consequences for themselves (from the abuser): Concern about the consequences for the abuser (they may be a family member the resident cares about): Worry about the effect on a third party (the husband /wife /son/ daughter/ father/mother) of the abuser: A fear of increasing their isolation.

Expanding upon these

- Isolation - a resident may fear that if they report abuse from a family member, it could lead to an end of visits from not only that person but other family members too.
- A fear of making a fuss - the resident may feel that what is happening does not justify asking for help. There is also a reluctance to ask others to act on their behalf.
- Concern about being blamed - the resident may feel that if they report the abuse they will be fully or partly blamed for what has/is happening.
- Personal embarrassment - knowing that reporting the abuse will involve revealing details about their personal and private life may make the individual feel embarrassed, particularly if the abuse is sexual.

To overcome these barriers, it is vitally important that an abused resident will feel able to report abuse. In this respect, trusting relationships with staff and volunteers together with knowledge and understanding that we do not accept abuse or abusive relationships are vital. Residents also need to be confident that we can help them to access independent support where they do not feel able to talk to someone in the house. Hence: -

- Relationships - A resident who has built a good, trusting relationship with a staff member or a volunteer may feel able to trust them with this difficult situation.
- Unacceptability of abuse – staff and volunteers should emphasise that this is completely unacceptable, that we want to hear about it, and that we will act appropriately to address it.
- Promoting access to independent support – This potentially includes our complaints procedure, but also needs to offer avenues separate from the house and their day to day life.

4. Multi Agency Code of Practice

We recognise that Local Authority social services departments are responsible for the development and co-ordination of local multi-agency codes of practice for safeguarding vulnerable adults and children. Operating in accordance with the local multi-agency safeguarding code of practice and related policies and procedures, all incidents of abuse will be referred to the local safeguarding team and notified to the SP team - working cooperatively with all relevant agencies where safeguarding issues arise. This includes the police, health and/or social care professionals, as well as social services staff with responsibility for safeguarding issues.

Our Society accepts the principles of the approach described above. In view of the infrequent nature of such events, rather than hold a copy of the multi-agency practice, policies and procedures, we will instead obtain details if and when an event arises. This will ensure that we have correct and current information at that time.

5. Preventing Abuse

The principles of good practice in supporting vulnerable adults and visiting children will be observed at all times. Residents have a right to:

- Have their independence promoted and supported
- Have their privacy respected
- Be treated with dignity and respect
- Be valued and recognised as a unique individual
- Have control over their lives and matters which affect them
- Make informed choices about the services they receive

The resident or their representative or advocate will have access to information about internal and external safeguarding from abuse policies and procedures. Our Secretary or a nominated Trustee will ensure residents can have information about, and access to, local advocacy services. Residents will have access to our Complaints Procedure. We will ensure thorough recruitment procedures are in place and operational, including DBS checks to ensure applicants are safe and not prevented/prohibited from working with vulnerable people.

An open and inclusive approach will be encouraged so that people are not afraid to voice any concerns and will know that their concerns, however minor, will be taken seriously and acted upon. Each resident will be fully involved in a comprehensive assessment of their needs, including any known risks. Actions to support the outcomes that will maintain and promote their independence are agreed and monitored. This support planning includes strategies to manage any identified risks.

6. Confidentiality – Good Practice Guidance

Our staff and volunteers must respect confidentiality and not divulge information given to them in confidence, but if they suspect that a vulnerable adult, young employee or volunteer or a visiting child has been harmed, or is at risk of being harmed, they have a duty to pass on the information to the House Manager or a Trustee.

The duty to report abuse or suspected abuse must therefore take precedence over the duty to respect confidence. If a Trustee, staff member or volunteer is asked to have a discussion in confidence which they suspect might be about abuse, it might be sensible to preface the discussion by making this clear.

There can be “No secrets” where there are concerns about abuse. Staff and volunteers must not keep such concerns to themselves. If there are concerns about a visiting child, then the responsible

adult must be notified immediately. **When an incident of actual or suspected abuse is reported, all staff and volunteers involved have a duty to ensure that information is not shared with anyone unless they have a need to know.**

Staff and Volunteers must pay particular attention to protecting the identities of alleged victims, perpetrators and witnesses from colleagues and other residents.

Any approach from the press or media potentially affects Abbeyfield both locally and nationally. Our Chair or a nominated deputy should first refer to the TAS Marketing and Communications Manager and subsequently deal with any local press contact. Press statements must not give out or imply any personal details.

7. Risk Management

A consideration of Safeguarding will encompass a consideration of risk in a broader context. The health and safety of our individual residents and those who may be affected by their actions is an area of risk that needs to be managed as far as is reasonably practicable. We recognise and promote the right of vulnerable adults to lead independent lives, which often involves a degree of manageable risk-taking. Where an individual chooses to accept known risks, their wishes should be respected within the context of their capacity to anticipate and understand those risks. Risks should be proportionate, with relevant staff and volunteers being alert to the possibility of the risks of harm which fall within the definition of abuse. Where a potential vulnerability to abuse or risk of abuse to others is identified, specific risk assessments will be completed and, if appropriate, measures taken to mitigate these risks.

8. Rights of the alleged “abuser”

An individual who is accused or suspected of abusing an older person also has rights. Rules of law, including the judicial principle of “innocent until proven guilty” must always apply. This does not affect our primary commitment to safeguard an individual who may be (or have been) abused. Immediate protective action can be taken without allocation of blame.

9. Equality and Diversity

This policy and the way it is implemented by Staff and Volunteers is based upon the individuality of residents and practice should reflect our Equality and Diversity Policy. Staff and volunteers should take into account any assessed communication needs and barriers, such as language, hearing or visual impairment, or cognitive dysfunction, and should find communication methods which enable individuals to express their views and give information.

Staff and Volunteers should be sensitive to the fact that individuals may have different approaches and views about relationships and this may affect their understanding of what constitutes abuse. However, the principles and procedures within this policy should always prevail. Where a situation is considered by us to be abusive, but not necessarily considered so by the vulnerable person, staff and volunteers must still operate in accordance with this policy.

10. Record Keeping

As with all record keeping, staff and volunteers must ensure that any records concerning actual or alleged incidents of abuse are sufficiently detailed, accurate, concise, up-to-date, legible, factual, dated and signed. Opinions should be kept to a minimum, recorded as such, and backed up by factual evidence. All records must be stored securely and confidentially in a manner that protects individual rights to privacy and security.

Our records concerning a resident (not including third party information) are available to them on request and may also be used as evidence in civil or criminal proceedings, safeguarding

investigations and proceedings, disciplinary proceedings or Independent Safeguarding Authority (ISA) referrals.

11. Training

Staff will receive safeguarding vulnerable adults and visiting children training as part of induction, and, later, as appropriate to their role and responsibilities.

12. Whistle Blowing (Public Disclosure)

Staff and volunteers are required to take action and report concerns if they suspect a vulnerable person or visiting child is being abused, regardless of the setting or who the perpetrator is. We will support those who stand up for anyone who they suspect or know is being abused.

Staff are assured that they will not be victimised or treated unfairly as a result of reporting suspected or actual abuse. If a member of staff feels unable to resolve their concerns with our management for whatever reason, they should still disclose their concerns.

The law (Public Interest Disclosure Act 1998) protects staff making certain disclosures in the public interest. Staff should refer to the Whistle Blowing Policy for further information.

13. Abusers who are vulnerable adults

In some cases, another resident who themselves is considered a vulnerable person, may be the suspected perpetrator of abuse. Essentially the procedure and the absolute primacy of protecting the victim and for reporting and investigating the incident is the same, but we retain our duty of care for the alleged perpetrator.

14. The procedure for dealing with an incident of abuse

Our Society's primary concern is the safeguarding of vulnerable adults living in our houses and visiting children. The House Manager or nominated Trustee is responsible for ensuring that any suspected or actual incident of abuse is dealt with immediately and is reported to the Southwark safeguarding team when necessary.

Procedures for dealing with an incident are extensive and have been appended to this Policy.

15 Shared responsibilities

All those persons referred to within the Scope of this policy are required to adhere to its terms and conditions. Employees must understand that this policy is also incorporated into their contract of employment and that they must receive training on safeguarding vulnerable adults, which includes understanding, recognising and dealing with abuse. House Managers are responsible for ensuring that this policy is applied within their house. Any queries about the application or interpretation of this policy should be raised through the Secretary.

16 Safeguarding Children

In our commitment to safeguarding visiting children there are specific points that we are committed to following. We will ensure that risk assessments of residents cover risks to and from visiting children. For young employees or if a child volunteers is on a school placement, good practice in the supervision and support for volunteers should be followed at all times. In this case the supervision/support for the child will be the designated responsibility of a specified staff member or volunteer. HSE risk assessments of the property, individual risk assessment of individual residents and safeguarding issues will be carefully considered when considering the involvement of a child on placement/volunteering.

17. Changes since last version of this Policy

The format will have changed significantly compared to the TAS equivalent, but the underlying content is largely unaltered from the previous version.

Appendix - Procedure for dealing with an incident of abuse

This appendix acts as an extension to section 14 and lays out the detailed steps and responsibilities which may be involved.

14.1 If a staff member or volunteer has concerns about abuse

Any allegation or suspicion of abuse, however minor, must be taken seriously and reported immediately to the House Manager or a “designated Trustee” (a House Manager may in turn report the matter to a Trustee to act as per 14.2). The House Manager or Trustee is responsible for ensuring the immediate safety and welfare of the vulnerable adult or visiting child concerned and summoning medical assistance if required. Inform paramedic staff and/or examining doctor of the suspicion of abuse and explain that a written report may well be required. In cases of serious abuse where there is evidence to suggest criminal activity, the police should also be summoned. Any incident involving alleged sexual abuse or involving alleged physical abuse which has resulted in injury should be reported immediately to the police.

Consider whether there is an immediate risk to other vulnerable adults, young employees and/or visiting children, and take steps to secure their safety. Where a serious incident has taken place, try not to disturb evidence that may be important to a police investigation. Where the incident concerns a vulnerable adult do not immediately question them; rather offer comfort, reassurance and support and allow them to give information or express distress or fears. Remember what is said and write it down as soon as possible. Where it concerns a child offer support to the responsible adult and where they value it support them in supporting the child. If the alleged perpetrator is a resident, visiting child or other vulnerable adult, ensure they too are safe and supported, possibly by allocating a member of staff to be present with the adult, child and responsible adult. At the earliest opportunity record as much, detailed information as possible in the Safeguarding Log.

14.2 Immediate actions by the House Manager or designated Trustee (the Chair)

Any serious incident of abuse which is substantiated or witnessed should be referred to the Southwark Safeguarding team by the House Manager or a designated Trustee (the Chair) at the first available opportunity and within 24 hours. Contact details can be found on the Southwark Council website.

If in doubt about whether an incident concerning a resident should be referred to the Southwark Safeguarding team, the House Manager should consult with the Secretary or Trustee who will advise whether the matter should be referred to the Southwark Safeguarding team. If the police have not already been informed, where the victim is a resident, the House Manager in consultation with the Secretary or Trustee should decide whether to do so. This will depend upon whether a crime appears to have been committed. If in doubt, the police should be informed so they can determine whether a crime has been committed. The House Manager will need to follow any instructions from the police to ensure that any police investigation is not hindered. Where the police are informed, the House Manager/Board Member must refer the matter to the Southwark Safeguarding team. Unless instructed otherwise by the police, where the victim is a resident the House Manager or a Board member should immediately inform the family/next of kin / representative/advocate about the incident. In serious situations, where the vulnerable adult is injured or distressed, the House Manager should communicate the information carefully and sensitively. The House Manager should support family members to visit the resident. If a member of the resident’s family is the suspected or alleged perpetrator, the matter should be discussed with the police and/or the Southwark Safeguarding team before contacting any other relatives. If the alleged abuser is a resident, their family should also be informed and supported. The Southwark Safeguarding team will decide whether there has been an incident of abuse that requires a safeguarding assessment and will advise the House Manager what steps should be taken next. The House Manager should provide as much information as possible to the Southwark Safeguarding team.

14.3 Dealing with the alleged perpetrator (abuser)

If a serious allegation against a member of staff is made to a Trustee, they or the Chair must take appropriate action as quickly as possible in line with the Disciplinary Policy and Procedure. If such an allegation is reported to the House Manager, s/he must contact the Chair or a Trustee immediately for the same purpose. This may include suspending the member of staff from duty. This is without prejudice to the outcome of any investigation and is based on the need to protect residents and to ensure an unhindered investigation into the allegation. In this situation it is the responsibility of the designated Trustee (the Chair) to suspend the member of staff. If such a situation arises outside of normal office hours the House Manager must decide whether to suspend the member of staff based on an informed assessment of the circumstances and the need to protect residents. Where the allegation is against a member of staff, any safeguarding investigation will dovetail with the disciplinary process and the Secretary will advise throughout the process.

If an allegation concerns a Volunteer, the House Manager or designated trustee must advise the Volunteer that they will not be required to do any voluntary work until the matter has been investigated and resolved.

If the allegations are made against another resident, the House Manager or designated Trustee (the Chair) should take immediate steps to separate the perpetrator from the resident who is the victim of the abuse, which may involve identifying an immediate alternative place of safety for one of them, taking account of the wishes of the residents, and their families if appropriate.

All information should be accurately and clearly recorded and should include as much detail as possible. It is good practice to ask witnesses to write statements immediately whilst it is fresh in their minds, unless directed not to by the police or by the local authority safeguarding team. Staff and volunteers should not confer with each other when doing so. There may be a requirement to take further statements from staff at a later date, to support any safeguarding, police or disciplinary investigations into the allegation. There is a need to ensure that any safeguarding investigation is conducted in parallel with the requirements of our Disciplinary Policy and Procedure and prevailing employment legislation.

14.4 Investigations

Where the Southwark safeguarding team are involved, they will decide whether to deal with the matter in the context of the multi-agency safeguarding procedures. If it is decided that the matter should be dealt with in the context of the multi-agency safeguarding procedures, a safeguarding strategy meeting/discussion will be arranged by Southwark usually within five working days of the referral being made although the timescales may vary. The safeguarding strategy meeting/discussion will determine who carries out the required investigations. If the police are involved, they will be part of any strategy meeting/discussion. The society may or may not be invited to the initial meeting. The House Manager must not embark on any investigations until advised by the safeguarding team to do so.

We will need to carry out our own investigation and, in some cases, Southwark will give permission for this to proceed straight away. If so, the responsible trustee will co-ordinate the investigation process and advise on all disciplinary matters. If the safeguarding team wishes to conduct the safeguarding investigation, our investigation will wait until the safeguarding team agree it is appropriate for us to proceed.

14.5 Providing support

All affected residents should be reassured and sensitively supported throughout the investigation process as they are likely to experience a wide range of emotions. Residents should not be interviewed without express instructions from the local authority safeguarding team and the Secretary or Chair. Staff or volunteers who witness and/or report an incident of abuse may themselves need considerable support. Others may be affected when residents they know are victims of abuse and they may become distressed during and following a safeguarding investigation.

The Chair will assist the House Manager/designated Trustee to identify sources of support if required.

14.6 Dealing with outcomes

Once investigations have been completed the Southwark safeguarding team will usually prepare a safeguarding action plan, ensuring that any risks are identified, managed and minimised. We will co-operate with any safeguarding action plan and will complete any actions required. The Board will ensure that the process is reviewed to see whether lessons can be learned and to ensure improvements are made wherever possible to prevent further incidents of abuse or to deal more effectively with incidents of abuse.