



Down Syndrome Training & Support Service Ltd

The Pamela Sunter Centre
2 Whitley Street, Bingley,
Bradford, BD16 4JH

Registered Charity No.1130994
Company Number 6915555

Safeguarding Vulnerable Adults Policy

Introduction

Down Syndrome Training & Support Service Ltd is committed to safeguarding and promoting the welfare of children, young people and vulnerable adults, engaged in the breadth of its activities.

The purpose of this policy is to outline the duty and responsibility of staff, volunteers and trustees working on behalf of **Down Syndrome Training & Support Service Ltd** in relation to the protection of vulnerable adults from abuse.

This policy should be read AFTER reading our Child Protection Policy.

All adults have the right to be safe from harm and should be able to live free from fear of abuse, neglect and exploitation.

The key objectives of this policy are:

- To explain the responsibilities **Down Syndrome Training & Support Service Ltd** and its staff, volunteers and trustees have in respect of vulnerable adult protection.
- To provide staff with an overview of vulnerable adult protection.
- To provide a clear procedure that will be implemented where vulnerable adult protection issues arise.

Context

For the purpose of this document 'adult' means a person aged 18 years or over.

Some adults are less able to protect themselves than others, and some have difficulty making their wishes and feelings known. This may make them vulnerable to abuse. The broad definition of a 'vulnerable adult' referred to in the 1997 Consultation Paper 'Who decides?' issued by the Lord Chancellor's Department, is a person:

"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 him or herself against significant harm or exploitation".

The first priority should always be to ensure the safety and protection of vulnerable adults. To this end it is the responsibility of all staff to act on any suspicion or evidence of abuse or neglect (see the Public Interest Disclosure Act 1998) and to pass on their concerns to a responsible person/agency.

Last Reviewed: april 2017

For purposes of ensuring consistent and widely understood terminology, these policy and procedures will use the phrase 'Vulnerable Adults' to identify those eligible for interventions within the procedures.

Legal framework

This guidance reflects the principles contained within the Human Rights Act 1998, the Mental Capacity Act 2005 and Public Interest Disclosure Act 1998.

The Mental Capacity Act 2005, covering England and Wales, provides a statutory framework for people who lack capacity to make decisions for themselves, or who have capacity and want to make preparations for a time when they may lack capacity in the future. It sets out who can take decisions, in which situations, and how they should go about this.

The Human Rights Act 1998 gives legal effect in the UK to the fundamental rights and freedoms contained in the European Convention on Human Rights (ECHR).

The Public Interest Disclosure Act 1998 (PIDA) created a framework for whistle blowing across the private, public and voluntary sectors. The Act provides almost every individual in the workplace with protection from victimisation where they raise genuine concerns about malpractice in accordance with the Act's provisions.

The role of staff, volunteers and trustees

All staff, volunteers and trustees working on behalf of ***Down Syndrome Training & Support Service Ltd*** have a duty to promote the welfare and safety of vulnerable adults.

Staff, volunteers and trustees may receive disclosures of abuse and observe vulnerable adults who are at risk. This policy will enable staff/volunteers to make informed and confident responses to specific adult protection issues.

Code of conduct for staff, volunteers and Directors

The DSTSS will ensure that the code of conduct for workers with young people is followed at all times.

The code is designed to minimise situations where abuse may occur by stipulating, in addition to the Child Protection Policy Section 6, that:

- Ensuring any relationship between two vulnerable adults is a safe and healthy relationship and that it is understood that permission for any intimacies has full consent from both adults and that they understand what this means.
- Members of staff ensure that touch is appropriate at ALL times and are able to explain any issues involving touch. See touch policy for more details.
- Members of staff ensure their relationship with a vulnerable adult is appropriate at ALL times. Suspected 'crushes', need to be discouraged.
- Members of staff need to take care not to get over involved in the personal life of a vulnerable adult in a way that leaves the vulnerable adult in need of/seeking their support. If a member of staff is worried about this they must speak to the SO and seek advice.
- Relationships with vulnerable adults must remain professional.

In addition to this the DSTSS has a **Complaints and Compliments Policy** that covers situations of inappropriate conduct by staff and the mechanisms for complaining about this.

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What is abuse?

Abuse is a violation of an individual's human and civil rights by any other person or persons.

Abuse may consist of a single act or repeated acts. 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 it may result in significant harm to, or exploitation of, the person subjected to it.

The Department of Health in its 'No Secrets' report suggests the following as the main types of abuse:-

- **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 adult has not consented, or could not consent or was pressured into consenting.
- **Psychological abuse**- including emotional abuse, threats of harm or abandonment, deprivation of contact, 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 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**- including racist, sexist, that based on a person's disability, age or sexuality and other forms of harassment, slurs or similar treatment.

Procedure in the event of a disclosure

It is important that vulnerable adults are protected from abuse. All complaints, allegations or suspicions must be taken seriously.

This procedure must be followed whenever an allegation of abuse is made or when there is a suspicion that a vulnerable adult has been abused.

Promises of confidentiality should not be given as this may conflict with the need to ensure the safety and welfare of the individual.

A full record shall be made as soon as possible of the nature of the allegation and any other relevant information.

This should include information in relation to the date, the time, the place where the alleged abuse happened, your name and the names of others present, the name of the complainant and, where different, the name of the adult who has allegedly been abused, the nature of the alleged abuse, a description of any injuries observed, the account which has been given of the allegation.

Responding to an allegation

Any suspicion, allegation or incident of abuse must be reported to a member of staff or volunteer as appropriate.

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The nominated member of staff/ volunteer shall telephone and report the matter to the appropriate local adult social services duty social worker. A written record of the date and time of the report shall be made and the report must include the name and position of the person to whom the matter is reported. The telephone report must be confirmed in writing to the relevant local authority adult social services department within 24 hours.

Safeguarding officers

Lead contact person: Wendy Rhodes
Work telephone number: 01274 561308
Mobile number: 07512346717
Emergency contact no: 01132554436 (home)

Name of contact person: Wendy Uttley
Work telephone number: 01274 561308
Mobile number: 07816465845
Emergency contact no: 01535 210587 (home)

Name of contact person: Peter Murray
Work telephone number: 07920477766
Mobile number: 07929579998
Emergency contact no: 01535 210587 (home)

Name of contact person: Jenny Rowlands
Mobile number: 07850654667
Emergency contact no: 01423 610255 (home)

Responding appropriately to an allegation of abuse – see also flow chart in appendix A

In the event of an incident or disclosure:

DO

- Make sure the individual is safe
- Assess whether emergency services are required and if needed call them
- Listen
- Offer support and reassurance
- Ascertain and establish the basic facts
- Make careful notes and obtain agreement on them
- Ensure notation of dates, time and persons present are correct and agreed
- Take all necessary precautions to preserve forensic evidence
- Follow correct procedure
- Explain areas of confidentiality; immediately speak to your manager for support and guidance
- Explain the procedure to the individual making the allegation
- Remember the need for ongoing support.

DON'T

- Confront the alleged abuser
- Be judgmental or voice your own opinion
- Be dismissive of the concern
- Investigate or interview beyond that which is necessary to establish the basic facts

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- Disturb or destroy possible forensic evidence
- Consult with persons not directly involved with the situation
- Ask leading questions
- Assume Information
- Make promises
- Ignore the allegation
- Elaborate in your notes
- Panic.

It is important to remember that the person who first encounters a case of alleged abuse is not responsible for deciding whether abuse has occurred. This is a task for the professional adult protection agencies, following a referral from the designated Vulnerable Adult Protection Officer.

Confidentiality

Vulnerable adult protection raises issues of confidentiality which should be clearly understood by all.

Staff, volunteers and trustees have a professional responsibility to share relevant information about the protection of vulnerable adults with other professionals, particularly investigative agencies and adult social services.

Clear boundaries of confidentiality will be communicated to all.

All personal information regarding a vulnerable adult will be kept confidential. All written records will be kept in a secure area for a specific time as identified in data protection guidelines. Records will only record details required in the initial contact form.

If an adult confides in a member of staff and requests that the information is kept secret, it is important that the member of staff tells the adult sensitively that he or she has a responsibility to refer cases of alleged abuse to the appropriate agencies.

Within that context, the adult should, however, be assured that the matter will be disclosed only to people who need to know about it.

Where possible, consent should be obtained from the adult before sharing personal information with third parties. In some circumstances obtaining consent may be neither possible nor desirable as the safety and welfare of the vulnerable adult is the priority.

Where a disclosure has been made, staff should let the adult know the position regarding their role and what action they will have to take as a result.

Staff should assure the adult that they will keep them informed of any action to be taken and why. The adults' involvement in the process of sharing information should be fully considered and their wishes and feelings taken into account.

The role of key individual agencies

Adult Social Services

The Department of Health's recent 'No secrets' guidance document requires that authorities develop a local framework within which all responsible agencies work together to ensure a coherent policy for the protection of vulnerable adults at risk of abuse.

All local authorities have a Safeguarding Adults Board, which oversees multi-agency work aimed at protecting and safeguarding vulnerable adults. It is normal practice for the board to comprise of people from partner organisations who have the ability to influence decision making and resource allocation within their organisation.

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The Police

The Police play a vital role in Safeguarding Adults with cases involving alleged criminal acts. It becomes the responsibility of the police to investigate allegations of crime by preserving and gathering evidence. Where a crime is identified, the police will be the lead agency and they will direct investigations in line with legal and other procedural protocols.

APRAC – Adult protection Risk Assessment Community Team

Adult and community services 01274 435400

Adult protection unit 01274 434442

www.bradford.gov.uk/makeanalert referrals can be made online

Adopted 9th December 2009

Quick Guide to Safeguarding Adults Procedures for staff and volunteers

What to do if an adult is at risk

If you are informed or become aware of possible abuse or neglect:

- Take action to ensure the immediate safety and welfare of the adult (and any other person at risk)
- If urgent attention is needed for health or safety dial 999
- If a crime needs to be reported call the police on 101
- Preserve any evidence
- Accurately record the incident, any action or decisions. Make sure you sign it and add the date and time
- Follow the prompts on the rest of this guide.

How to respond

- If possible, **speak** to the adult at risk without putting them or yourself at further risk
- Reassure them that what they say will be taken seriously
- Use open ended questions e.g. 'Tell me / Explain/ Describe what has happened' (remember 'TED')
- Do not probe: this is a preliminary conversation only about the safeguarding issues and the adult's views and wishes
- If possible, **support** the person to make immediate decisions, including whether they want a Safeguarding Concern to be raised
- Look out for any signs that the person may lack mental capacity to make decisions about their own safety
- Explain to the adult what you will do next
- Consult with your line manager for advice and support.

Views and wishes of the Adult at Risk

Always **consider** the adult's views and wishes and **act** upon them, if possible. However, the adult's wishes may be overridden in some circumstances for example:

- In the public interest e.g. if there is a risk to others, a member of staff or volunteer is involved or it relates to a care setting
- In the person's vital interests – to prevent serious harm or distress or in life threatening situations
- If the person is subject to coercion or undue influence to the extent that they are unable to give consent
- If the person lacks mental capacity and it is in their best interests.

How to raise a Safeguarding Concern

Talk to your line manager, Safeguarding Concerns Manager, Safeguarding Adults Lead or contact the Adult Protection Unit.

Report adult abuse online at:

www.bradford.gov.uk/makeanalert

If you have difficulty completing the online form call the Adult Protection Unit on **01274 431077**.

The full version of the West Yorkshire Safeguarding Adults Policy and Procedures is available on www.bradford.gov.uk/apunit

The wording in this publication can be made available in other formats such as large print and Braille. Please call 01274 431077

Responsibilities of Individuals

Raising a Concern

Note: any actions needed to ensure the immediate safety of the adult at risk should be taken at this point.

Anyone can raise a Safeguarding Concern with the local authority. The agreement of the adult at risk should be sought if possible. The adult's wishes may be overridden in some circumstances (see the box 'Views and wishes of the Adult at Risk').

Staff Members receiving a disclosure or noticing abuse themselves should follow their organisation's policy and

contact the manager who acts as **Safeguarding Concerns Manager** for advice and support on raising a Concern. A Safeguarding Concern is raised via an online form and is then viewed by the Adult Protection Unit.

Target Timescales for raising a Concern:
Immediately where urgent and serious or within same working day.

Initial Enquiry

Adult Protection Unit ensures that initial enquiries are made to identify what further action may be needed.

Target Timescales:
At the earliest opportunity.

Response A

Issues resolved by initial enquiries or adult has declined further action.

Response B

No further enquiries needed into abuse but actions needed to safeguard the adult/others. This can be a Risk Management Response e.g. care planning, best interests.

Response C

A formal enquiry is needed to establish the facts and how to safeguard the adult (or others). Concern will be taken through safeguarding procedures.

Strategy Discussion/Meeting

Safeguarding Coordinator will hold a discussion or meeting to plan the Formal Enquiry and ensure that the adult is safeguarded in the intervening period.

Target Timescales: Within five working days of the Initial Enquiry being completed.

Formal Enquiry

Safeguarding Enquiry Officer undertakes Formal Enquiry and produces a report.

Target Timescales: Formal Enquiry report submitted to Safeguarding Coordinator within 7 weeks of Strategy Discussion/Meeting.

Case Conference

Safeguarding Coordinator decides if a Case Conference is needed to discuss the findings of the Formal Enquiry, agree a safeguarding plan and review arrangements.

Target Timescales:
The Case Conference should be held within 8 weeks of the Strategy Discussion/Meeting.

Review

Safeguarding Coordinator holds a review to check the safeguarding plan is working effectively.

Target Timescales: Within 3 months of Case Conference or as agreed.

Throughout this process:

- The views and desired outcomes of the adult at risk or their representative/advocate must be listened to and recorded
- Key people including the adult at risk and relevant parties should be involved or informed of progress
- Accessible information formats and communication support should always be offered where required.

KEY WORDS

Adult at Risk – an adult who has care and support needs, and who because of these needs is unable to protect themselves from abuse or neglect.

Safeguarding Concerns Manager – most organisations identify a Safeguarding Concerns Manager to whom any member of staff (or volunteer) should report safeguarding issues and obtain support/guidance.

Safeguarding Coordinator – professionals within Adult Social Care or NHS organisations that have overall responsibility for managing the safeguarding process.

Safeguarding Enquiry Officer – is a member of staff identified to carry out Formal Enquiries. It can be a worker from Adult Social Care, a service provider in regulated settings, including hospitals and other NHS providers.



**SAFEGUARDING
ADULTS
BRADFORD**

Remember!

If you tell someone and they do nothing, tell someone else!
Anyone can raise a concern at: www.bradford.gov.uk/makeanalert