

Safeguarding (Vulnerable) Adults Policy

Introduction

This policy relates to vulnerable adults, as defined by the Care Act 2014, but Nottingham Women's Centre (NWC) also acknowledges its *Duty of Care* to all our service users.

Purpose:

The aim of this document is to promote the safety and protection of vulnerable adults in line with statutory guidance set out by the Department of Health. It sets out the definitions of abuse (Appendix 1) and vulnerability and outlines and procedures in the prevention and investigation of abuse.

Vulnerable adults are defined as:

- Women aged 18 or over who are receiving or may need community care services due to learning, physical or mental disability, age or illness
- Women aged 18 or over who are or may be unable to care of themselves, or unable to protect themselves against significant harm or exploitation

Responsibilities for safeguarding of vulnerable adults

Nottingham Women's Centre is committed to the keeping safe of vulnerable adults we work alongside and acknowledges our duty to act appropriately to any allegations, reports or suspicions of abuse.

We acknowledge that the 'adult at risk' may not always be a NWC service user, but may be an individual who has been harmed by, or is at risk from, the actions of our service users, or an individual about whom a NWC service user shares information with NWC staff. The policy should be followed for all such 'adults at risk'.

To this end we will:

- Promote the rights of all women to live free from abuse and coercion
- Ensure the safety and well-being of women who do not have the capacity to decide how they want to respond to any abuse that they are experiencing
- Promote the freedom and dignity of the woman who has been or is experiencing abuse
- Manage services in a way which promotes safety and prevents abuse
- Recruit staff and volunteers safely, ensuring all necessary checks are made before appointment
- Provide effective management for staff through supervision, support and safeguarding training

We will also:

- Ensure that all staff are familiar with this policy and aware of the consequent procedures
- Abide by our Confidentiality Policy and gain permission from service users before sharing information about them with another agency, except where a woman is in danger, a child is at risk or a crime has been committed. Then the decision may be taken to pass on the information to another agency without the service user's consent
- Inform Adult Social Care when more than one person is at risk. For example: if the concerns relate to a worker, volunteer or organisation who provides a service to vulnerable adults or children

- Make a referral to Adult Social Care team if appropriate
- Endeavour to keep up to date with the National Developments relating to preventing abuse and the welfare of vulnerable adults
- Ensure that the Designated Named Person understands her responsibility to refer incidents of adult abuse to the relevant statutory agencies and ensure incidents are recorded following NWC procedures.
- This policy must be reviewed regularly and staff and trustees must be trained on its contents
- Ensure everyone understands their safeguarding roles and responsibilities and is provided with appropriate learning opportunities to recognise, identify and respond to concerns and disclosures relating to the protection of Children and Adults at Risk.

The Designated Named Person for Nottingham Women's Centre is Sara Garton, Head of Client Services, 30 Chaucer Street, Nottingham, NG1 5LP, telephone: 0115 9411475 or 07487 239073

The Designated Person should be contacted for support and advice on implementing this policy and its following procedures.

Procedures

Nottingham Women's Centre believes that the protection of vulnerable adults from harm is the responsibility of everyone. With these procedures, we aim to ensure that staff and volunteers act appropriately in response to:

- i. Preventing abuse
- ii. Recognising the signs and symptoms of abuse
- iii. Responding to people who have experienced or are experiencing abuse
- v. Managing an allegation made against a member of staff or volunteer
- vi. Recording and managing confidential information
- vii. Disseminating/reviewing policy and procedures

All staff should be familiar with this policy and aware of the procedures. A breach of the policy would incur disciplinary actions.

i. Preventing Abuse

Nottingham Women's Centre is committed to putting into place safeguards and measures to reduce the likelihood of abuse taking place within the services we offer, treating all those involved with NWC with respect.

The following policies need to be read in conjunction with the Safeguarding Policy:

- Equality and Diversity
- Volunteers
- Complaints
- Whistle Blowing
- Confidentiality
- Disciplinary and Grievance
- General Data Protection Regulation

- Recruitment

Nottingham Women's Centre is committed to safer recruitment policies and practices for staff and volunteers, which may include DBS disclosures; and will ensure that references are taken up and adequate safeguarding training is provided for staff and volunteers. In order to ensure this is adhered to, records will be kept by the Designated Named Person.

Information will be available about the Abuse and Complaints policy and the Safeguarding Adults policy, and we will encourage service users to access these and become involved with the running of the organisation.

Nottingham Women's Centre will work within the current legal framework for reporting staff or volunteers that is outlined in the Whistle Blowing policy.

ii. Recognising the signs and symptoms of abuse

Nottingham Women's Centre is committed to ensuring that all staff and volunteers undertake training to gain a basic awareness of the signs and symptoms of abuse. NWC will ensure that the Designated Named Person and other members of staff have access to training.

Abuse includes:

- Discriminatory abuse: including racist, sexist, that based on a person's disability and other forms of harassment, slurs or similar treatment
- Female genital mutilation: including all procedures involving the removal of the external female genitalia or other injury to the female genital organs for non-medical reasons
- Financial or material abuse: including stealing, selling assets, fraud, misuse or misappropriation of property, possessions or benefits
- Forced marriage: including where one or both people do not or cannot consent to the marriage and pressure or abuse is used to force them into the marriage. It is also when anything is done to make someone marry before they turn 18, even if there is no pressure or abuse.
- Institutional or organisational: including regimented routines and cultures, unsafe practices, lack of person-centred care or treatment
- Neglects and acts of omission: including withholding the necessities of life such as medication, food or warmth, ignoring medical, mental or physical care needs
- Physical abuse: including hitting, slapping, punching, burning, misuse of medication, inappropriate restraint
- Psychological or emotional abuse: including belittling, name calling, threats of harm, intimidation, isolation
- Sexual abuse: including rape, indecent assault, inappropriate touching, exposure to pornographic material
- So called honour based violence and crimes including: female genital mutilation (FGM), forced marriage, honour killings, abandonment, breast flattening and other forms of domestic abuse perpetrated in a perceived defence of 'honour'.

Abuse may be carried out deliberately or unknowingly, and may be a single act or repeated acts.

iii. Responding to people who have experienced or are experiencing abuse

Nottingham Women's Centre recognises that it has a duty to act on reports, or suspicions of abuse or neglect.

An individual member of staff or volunteer will respond to an allegation as follows:

- Reassure the person concerned
- Listen to what they are saying
- Record what they have been told or what they have witnessed as soon as possible
- Remain calm, without showing shock or disbelief
- Will tell the person concerned that the information will be treated seriously
- Will not start to investigate or ask detailed or probing questions
- Will not promise to keep it secret

An individual member of staff or volunteer witnessing abuse or finding abuse has just taken place will:

- Follow the **Adult Safeguarding Flowchart**

All situations of abuse or alleged abuse will be discussed with the Designated Named Person or their deputy. If a member of staff or a volunteer feels unable to raise this concern with the Designated Named Person or their deputy, then concerns can be raised directly with Adult Social Care services. The alleged victim will be told that this will happen.

If it is appropriate and there is consent from the individual, or there is a good reason to override consent – such as risk to others – a referral will be made to the Adult Social Care Team.

If the individual experiencing abuse does not have the capacity to consent, a referral will be made without that person's consent, in their best interests.

If the staff member is unsure if the adult is at risk, this should be discussed with their Line Manager. Staff should always be discussing with a manager, regardless of how 'sure' they are. If there is imminent risk of harm, or a child/adult 'at risk' has been injured, the staff member should phone 999 to request police/ambulance as appropriate and follow the advice given (this should be followed up by alerting the relevant local Safeguarding Team, as outlined below).

If not, in general, the service user should be informed of the staff member's concerns and that, for the wellbeing and safety of the child/adult 'at risk', this information should be shared with the local Safeguarding Team. If it is felt that informing the service user of this would increase the risk to the child/adult 'at risk', or that it could put the staff member or anyone else in danger, then the service user should not be informed. In such instances, the staff member should always agree this with their Line Manager.

The staff member's Line Manager should be informed as soon as possible, ideally whilst the service user is still on site and whilst the staff member is still with them. If it is not possible to inform the Line Manager within 24 hours, the Local Safeguarding Lead should be informed. If this is also not possible, the National Safeguarding Lead should be informed. If the staff member is not able to inform the Line Manager (or Safeguarding Lead) immediately, they should not wait to act on the concern.

If possible, the staff member should gather sufficient information from the service user to make the Safeguarding referral. This will include the nature and details of any specific incident (including dates, times and locations), the names dates of birth and contact details of all individuals involved, the name of the schools of any children involved, the specific care needs of any individuals involved. However, even if this is not possible, the Safeguarding referral can still be made with whatever information the staff member has. It should be remembered that this information is being gathered to make a meaningful Safeguarding referral; it is not NWC's responsibility to investigate or verify the issue.

A Safeguarding referral should be made to the relevant local authority Safeguarding Team as soon as possible. Unless explicitly agreed with the Line Manager, this should be done on the same working day, and should always

be done within 24 hours. Referrals will generally be made by the staff member who was informed of, or suspects, the issue, unless they, or their Line Manager, identify a specific reason why they should not, in which case this would be done by their Line Manager. Referrals should be made as per the relevant local Safeguarding Team's guidelines, which is generally either by telephone or email. If by telephone, the date and time of the call and name of the person who took the referral should be documented on the service user's record; if by email, a copy should be uploaded to the service user's Inform record. Any documents should be password protected and sent by email. And CJSM accounts used for police referrals. (e.g. MARAC).

All details should be recorded in the service user's record, including how the issue was disclosed, or why it was suspected, and all action taken. An Incident Report should also be completed, signed by the staff member and Line Manager and kept in the SMT secure folder, along with any emailed referral forms. This is sent to the relevant Local and National Safeguarding Leads within 48 hours. Where a relevant Risk Assessment has already been undertaken, a review should be conducted; otherwise a new Risk Assessment should be undertaken.

All safeguarding incidents must be recorded in the secure SMT folder, with a flag on the Risk Assessment tab on Charity Log database with minimal details including a review date 'action'. This is to protect confidentiality.

The staff member should maintain contact with the local authority's Nottingham City Adults Safeguarding Board and Multi-Agency Safeguarding Hub for county residents and other services to ensure collaborative working and to assist in managing risk. Services such as NWC are not always informed of the outcome of Safeguarding referrals, but where they are, this should be recorded in the service user's case file (This should be kept on the SMT secure drive). NWC will continue to work with the service user as per their support plan if this is safe and appropriate.

Unless it is specifically outlined in their role description and induction, volunteers' responsibility in relation to Safeguarding concerns is to immediately inform a member of staff or manager. They will not be required to undertake any further action.

Consent

It is best practice to make Safeguarding referrals with the service user's knowledge, consent and participation. Individuals may refuse consent or be resistant to the sharing of Safeguarding information for many reasons (i.e. Mental capacity, Fear or mistrust of social services or other agencies; Fear of losing control; Fear of the abuser and/or reprisals; Fear of their ability to parent being questioned).

if consent continues to be withheld their decision should be respected, except in the following circumstances:

- The person lacks capacity to consent (refer to the Mental Capacity Act 2005)
- The person has the mental capacity to make that decision but they may be under duress or being coerced
- There is a high risk to the health and safety of the adult from domestic abuse that warrants a referral to MARAC/police/social care
- There is a risk to life
- Other people including children could be at risk from the person causing harm
- It is necessary to prevent crime or sharing the information could prevent a crime
- The alleged abuser has care and support needs and may also be at risk
- Staff are implicated
- A court order or other legal authority has requested the information

Where consent is not given the decision as to if a Safeguarding referral should still be made should always be made in conjunction with the Line Manager or Safeguarding Lead and the reasons for this decision must be clearly documented in the service user's case notes.

If the decision is made not to make a Safeguarding referral the service user should be given safety advice and offered support to help develop strategies to help protect themselves, and to build confidence and self-esteem (if appropriate). They should also be given information about where to get help if they change their mind or if abuse or neglect continues or worsens.

iv. Prevent

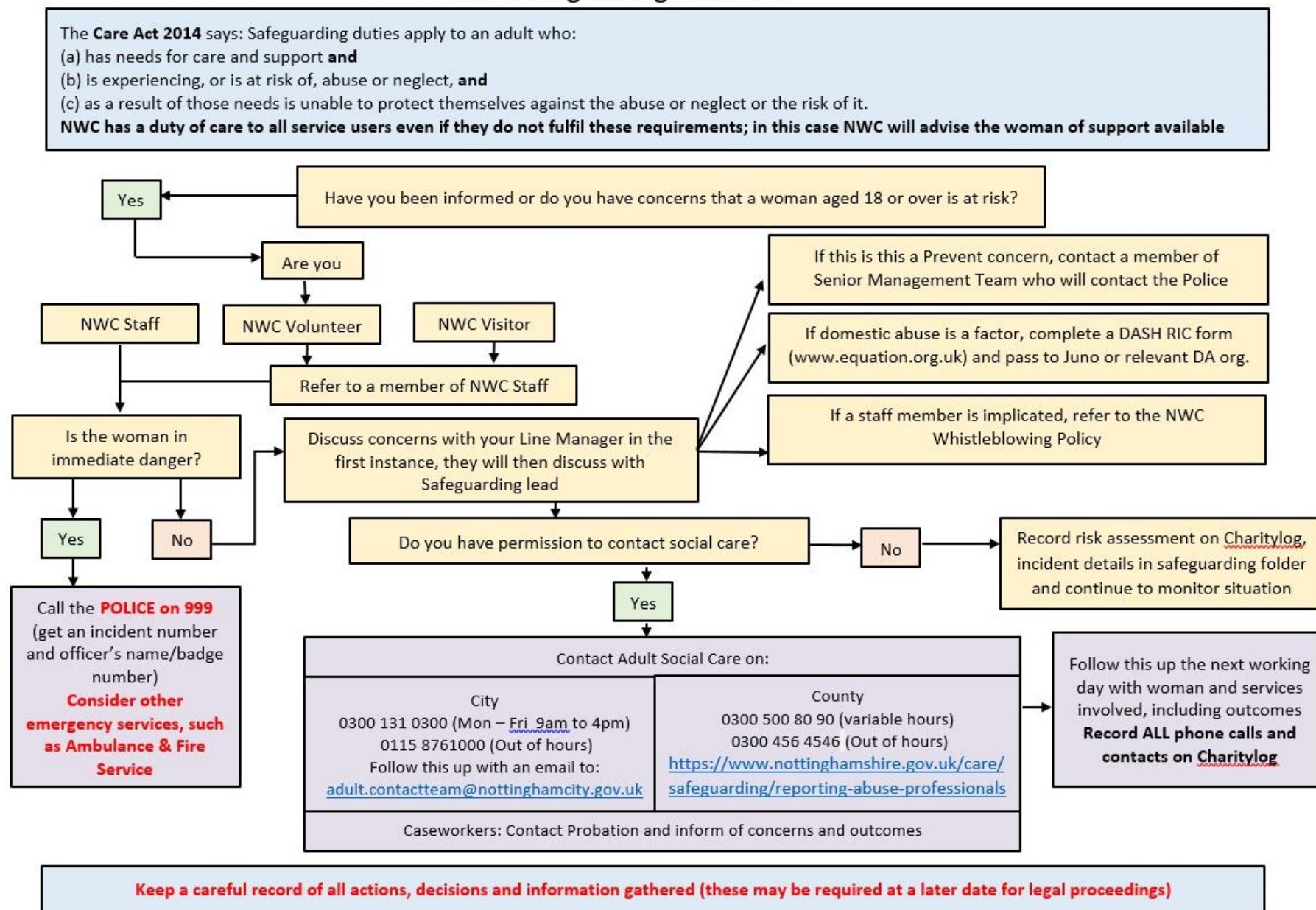
Nottingham Women's Centre sees Prevent as part of mainstream safeguarding. Prevent is a government strategy designed to stop people becoming terrorists or supporting extremist causes. The Prevent strategy covers all types of terrorism and extremism, including the extreme right wing, violent Islamist groups and other causes. The Government has defined extremism in the Prevent strategy as: "vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs.

Signs that may indicate a person is being radicalised include:

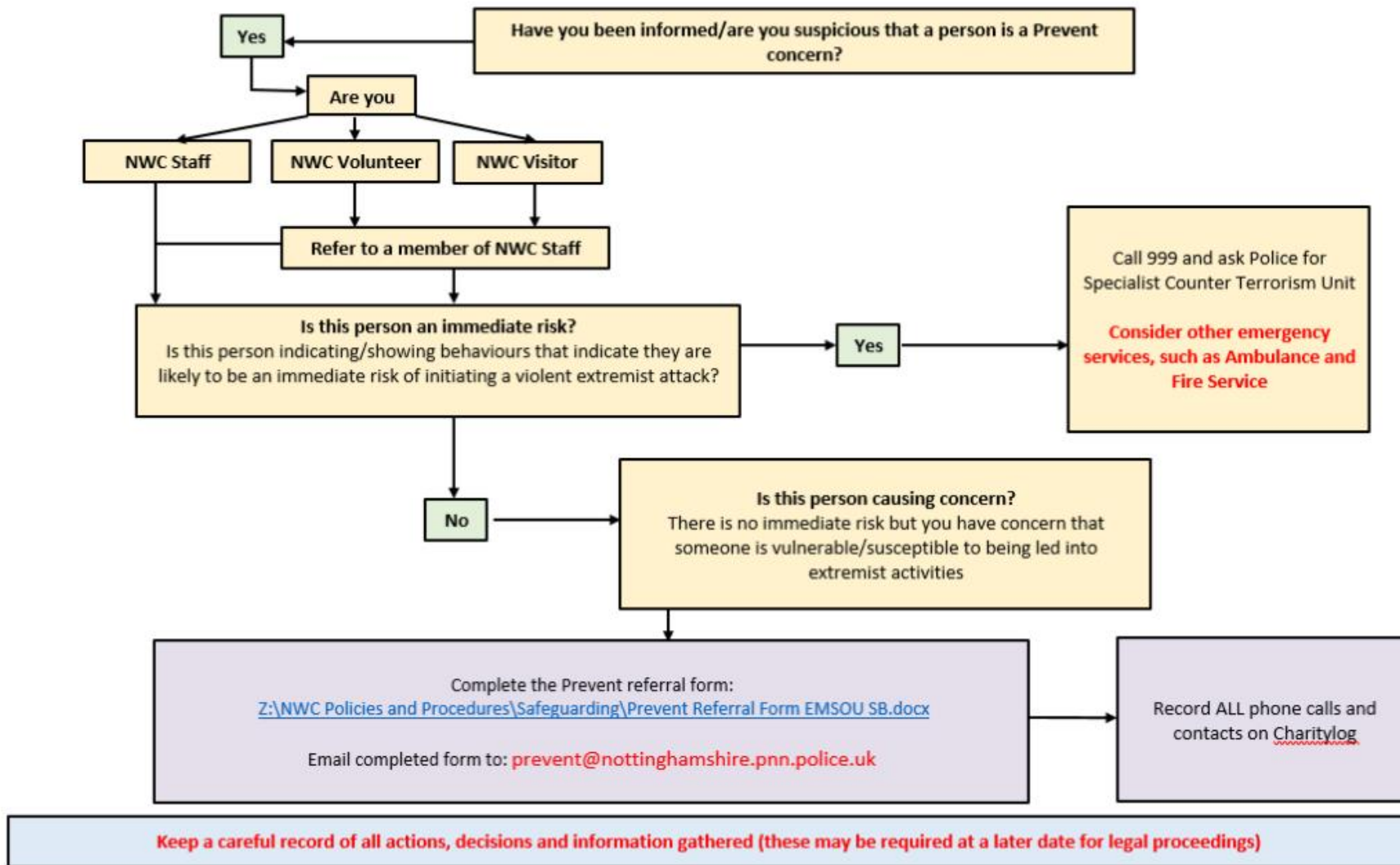
- isolating themselves from family and friends
- talking as if from a scripted speech
- unwillingness or inability to discuss their views
- a sudden disrespectful attitude towards others
- increased levels of anger

If a staff member suspects that a person may be involved, they must contact a member of the Senior Leadership Team immediately who will contact the Police and ask for the Specialist Counter Terrorism Unit.

Adult Safeguarding Flowchart



Prevent: Flowchart for Raising a Concern



v. Designated Named Person for Safeguarding Adults

NWC has an appointed individual who is responsible for dealing with and Safeguarding Adult concerns. In their absence, a deputy will be available for staff and volunteers to consult with.

The Designated Named Person for Safeguarding Adults within NWC is Sara Garton, Head of Client Services, 30 Chaucer Street, Nottingham, NG1 5LP, telephone: 0115 9411475 or 07487 239073.

Her deputies are any member of the Senior Leadership Team.

Should none of these named people be available, staff members should contact Adult Social Care directly.

The roles and responsibilities of the named person(s) are:

- To ensure that all staff and volunteers are aware of this Policy and what they should do and who they should go to if they have concerns that a vulnerable adult may be experiencing, or has experienced abuse or neglect
- To ensure that concerns are acted on, clearly recorded and referred to an Adult Social Care team or to the allocated Social Worker/Care Manager where necessary
- To follow up any referrals and ensure the issues have been addressed
- To consider any recommendations from the Safeguarding Adults process
- To reinforce the utmost need for confidentiality and to ensure that staff and volunteers are adhering to good practice with regard to confidentiality and security. This is because it is around the time that a person starts to challenge abuse that the risks of increasing intensity of abuse are greatest
- To ensure that staff and volunteers with direct contact to service users who have experienced abuse, or who are experiencing abuse, are well supported and receive appropriate supervision

Trustee's and Manager's responsibilities

A Trustee member of the Board will provide oversight to any Safeguarding incidents that may result in reputational damage and/or risk to the organisation.

Managers

All managers who have frontline staff reporting directly to them have significant Safeguarding responsibilities.

Managers must:

- Ensure this policy is accessible to all staff and support them to implement it through supervision and training;
- Ensure Safeguarding is part of all new staff inductions;
- Ensure all staff attend local authority Safeguarding training (where available) as part of their induction and on a 2-yearly basis thereafter;
- Be the first point of call for advice and guidance regarding Safeguarding issues;
- Keep up-to-date with local Safeguarding contact details and referral processes and share this with staff;
- Include Safeguarding as a standing agenda item in staff supervision;
- Include Safeguarding and Incidents as a standing agenda item in team meetings;
- Have an awareness of the potential impact on staff when dealing with Safeguarding issues, including vicarious trauma, and ensure staff have access to Clinical Supervision to assist in dealing with this.

- Report safeguarding incidents to funders in line with their policies if necessary in consultation with the Trustees.

All staff/volunteers

All NWC staff and volunteers have responsibility for identifying and responding to Safeguarding issues. Specific actions that staff and volunteers should undertake when identifying a Safeguarding issue are outlined above. In addition, all staff and volunteers should:

- Access training, supervision and Clinical Supervision as advised by their Line Manager;
- Take responsibility for their own learning, development and wellbeing regarding Safeguarding;
- Keep all service users' records up-to-date and ensure they are sufficiently detailed in all instances. It is never known when a Safeguarding issue may arise, and accurate existing record keeping will assist staff in responding quickly, safely and appropriately.
- Ensure that sensitive information involving a vulnerable adult using NWC services is kept secure, not shared on social media or with unauthorised persons.

vi. Managing an allegation made against a member of staff or volunteer

NWC will ensure that any allegations made against members of staff or volunteers will be dealt with swiftly.

Where a member of staff or a volunteer is thought to have committed a criminal offence, the police will be informed. If a crime has been witnessed, the police should be contacted immediately.

The safety of the individual(s) concerned is paramount. A risk assessment must be undertaken immediately to assess the level of risk to all service users posed by the alleged perpetrator. This will include whether it is safe for them to continue in their role, or any other role within the service whilst the investigation is undertaken.

The Designated Named person will liaise with Adult Social Care to discuss the best course of action and to ensure that the NWC's disciplinary procedures are coordinated with any other enquiries taking place as part of the ongoing management of the allegation.

NWC has a Whistle Blowing policy and staff are aware of this policy. Staff will be supported to use this policy.

vii. Recording and managing confidential information

NWC is committed to maintaining confidentiality wherever possible and information around Safeguarding Adults issues should be shared only with those who need to know. For further information, please see the NWC Confidentiality Policy.

All allegations/concerns should be recorded on Charitylog. The information should be factual and not based on opinions. Record what a person tells you, what has been seen and details of witnesses if appropriate.

The information that is recorded will be kept secure and will comply with GDPR. Access to this information may be restricted.

viii. Disseminating/Reviewing policy and procedures

The Safeguarding Adults Policy and Procedures will be clearly communicated to staff and volunteers. The Designated Named Person will be responsible for ensuring that this is done.

The Safeguarding Adults Policy and Procedures will be reviewed annually by the Board of Trustees. The Designated Named Person for Safeguarding Adults will be involved in this process and can recommend changes. The Designated

Named Person will also ensure that any changes are clearly communicated to staff and volunteers. It may be appropriate to involve service users in the review.

- The Policy will be made available to the general public and stakeholders on the company website.
- Employees are encouraged to put forward suggestions for and demonstrating good best practices.
- Any changes to legislation to be discussed and acted upon during meetings with partners and stakeholders.
- Any legislation that is pending within the 6 months following the meeting to be looked at and any requirements to demonstrate compliance to be mapped out to ensure full understanding by all involved in the administration of the policy.
- Regular reviews to ensure that all new projects and activities are captured in a timely manner and the potential impact on the organisation is recognised and recorded.

APPENDIX 1

DEFINITIONS AND TYPE OF ABUSE

1.1. Vulnerable adult

A vulnerable adult is defined as a person aged 18 years and 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 him or herself against significant harm or exploitation”.²

1.2. Abuse

Abuse is defined as “a violation of an individual's human and civil rights by any other person or persons”³

Abuse can be:

- a single act or repeated acts
- physical, verbal or psychological
- an act of neglect or an omission to act
- when a vulnerable person is persuaded to enter into a financial or sexual transaction to which he/she had 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.

1.3. Significant harm

Significant harm is defined as:

- “Ill treatment (including sexual abuse and forms of ill treatment that are not physical) or the impairment of, or an avoidable deterioration in, physical or mental health and the impairment of physical, intellectual, emotional, social or behavioural development”.⁴