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VULNERABLE ADULTS SAFEGUARDING POLICY & PROCEDURES

Introduction

The abuse of vulnerable adults– physically, emotionally, financially and sexually – is a sad fact of life. Adults may be abused regardless of their age, gender, religious belief, racial origin, culture or disability. They are usually (but not always) abused by people they know and trust.

The purpose of this policy and procedures is to help protect the vulnerable adults we come into contact with and to ensure that staff are aware of issues that can cause them harm and how to respond to concerns relating to the possibility of a vulnerable adult suffering harm.

SECTION 1: VULNERABLE ADULTS SAFEGUARDING POLICY STATEMENT

1.0 The scope of this policy

This Vulnerable Adult Safeguarding Policy is intended to cover all functions and services of CLEAR where there is the potential for direct or indirect contact with vulnerable adults.

1.1 What is a vulnerable adult?

A vulnerable adult is any person aged 18 or over who is, or may be, unable to take care of him or herself against significant harm or exploitation.

This may be because he or she has a mental health problem, a disability, a sensory impairment, is old or frail, or has some form of illness.

Because of his or her vulnerability, the individual may be in receipt of a care service in his or her own home, in the community or be resident in a residential care home, nursing home or other institutional setting.

1.2 Staff roles and responsibilities

CLEAR Staff and Volunteers have a duty to adhere to the Vulnerable Adults Safeguarding Policy and Procedures and to notify their Safeguarding Officer on any matters regarding safeguarding vulnerable adults.

Staff and Volunteers are also responsible for ensuring that they undertake the relevant training identified for their post.

1.3 Training

CLEAR will provide suitable training in vulnerable adult safeguarding to staff working or coming into contact with vulnerable adults.

SECTION 2: WHAT IS ABUSE OF VULNERABLE ADULTS?

2.0 What constitutes abuse?

Abuse is a violation of an individual's human and civil rights by any other person or persons. Many incidents of abuse are criminal acts.

The abuse of vulnerable adults is defined as: *'The physical, psychological, emotional, financial or sexual maltreatment or neglect of a vulnerable adult by another person'*. It may be a single act or repeated over a period of time and may take one form or multiple forms. The lack of appropriate action can also be a form of abuse.

It can occur in a relationship where there is an expectation of trust and can be perpetrated by a person or persons, in breach of that trust, who have influence over the life of a dependent, whether they be formal or informal carers, staff, family members or others. It can also occur outside such a relationship.

Abuse can be either deliberate or the result of ignorance, or caused by a lack of training, knowledge or understanding. Often if a person is being abused in one way, they are also being abused in other ways.

Abuse can take many forms including the following:

Physical abuse

Hitting, slapping, pushing, burning, giving a person medicine that may

Possible signs - fractures, bruising, burns, pain, marks, not wanting to be touched.

Psychological abuse

This includes emotional abuse, verbal abuse, humiliation, bullying and the use of threats.

Possible signs - being withdrawn, too eager to do everything they are asked, showing compulsive behaviour, not being able to do things they used to, not being able to concentrate or focus.

Financial or material abuse

Misusing or stealing the person's property, possessions or benefits, cheating them, using them for financial gain, putting pressure on them about wills, property, inheritance or financial transactions.

Possible signs - having unusual difficulty with finances, not having enough money, being too protective of money and things they own, not paying bills, not having normal home comforts.

2.1 Where might abuse occur?

Abuse can happen anywhere:

- In the person's own home.
- At a carer's home.
- Within day care, residential care, nursing care or other institutional settings.
- At work or in educational settings.
- In rented accommodation or commercial premises.
- In public places.

2.2 Who can abuse?

An abuser can be anyone who has contact with the vulnerable person - it could be a partner, spouse, child, relative, friend, informal carer, a healthcare, social care or other worker, a peer or, less commonly, a stranger.

Domestic/familial abuse - The abuse of a vulnerable adult by a family member such as a partner, son, daughter, sibling.

Professional abuse - The misuse of power and abuse of trust by professionals, the failure of professionals to act on suspected abuse/crimes, poor care practice or neglect in services, resource shortfalls or service pressures that lead to service failure and culpability as a result of poor management systems.

Possible signs of professional abuse include:

- Entering into inappropriate relationships with a vulnerable adult.
- Failure to refer disclosure of abuse.
- Poor, ill-informed or outmoded care practice/s.
- Failure to support a vulnerable adult to access health care/ treatment.
- Denying a vulnerable adult access to professional support and services such as advocacy.
- Inappropriate responses to challenging behaviours. 16

Peer abuse - The abuse of one vulnerable adult by another vulnerable adult within a care setting. This can occur in group or communal settings, such as day care centres, clubs, residential care homes, nursing homes or other institutional settings.

Stranger abuse - A vulnerable adult may be abused by someone who they do not know, such as a stranger, a member of the public or a person who deliberately targets vulnerable people.

SECTION 3: CONCERNS AND DISCLOSURES

3.0 How to deal with a concern

When there are concerns or where a disclosure or allegation is made people often feel anxious about passing on the information to anyone else. Concerned individuals may ask themselves, 'What if I'm wrong?' and this may hold them back from taking action.

It is important for CLEAR & CRASAC staff and volunteers to know that they are neither responsible for deciding whether abuse has occurred or not; nor are they responsible for conducting any investigations (this is the role of the appropriate authorities).

However, they do need to pass on any concerns they have through the Vulnerable Adults Safeguarding reporting procedures. It is crucial that staff members do not attempt to deal with the situation alone.

3.1 How can you be alerted to signs of abuse or neglect?

There are a variety of ways that you could be alerted that a vulnerable adult is suffering harm:

- A vulnerable adult may tell you.
- Someone else may tell you of their concerns or something that causes you concern.
- A vulnerable adult may show some signs of physical injury for which there does not appear to be a satisfactory or credible explanation.
- A vulnerable adult's demeanour/behaviour may lead you to suspect abuse or neglect.
- The behaviour of a person close to the vulnerable adult makes you feel uncomfortable (this may include another staff member, peer or family member).
- Through general good neighbourliness and social guardianship.

Being alert to potential abuse plays a major role in ensuring that vulnerable adults are safeguarded and it is important that all concerns about possible abuse are reported.

3.2 What if a vulnerable adult discloses abuse?

In cases where a vulnerable adult discloses abuse to a staff member they should react appropriately, according to the following guidelines:

Do

- Stay calm.
 - Listen and hear.
 - Express concern and sympathy about what has happened.
 - Reassure the person – tell the person that s/he did the right thing in telling you.
 - Let the person know that the information will be taken seriously and give information about what will happen next.
 - If urgent medical/police help is required, call the emergency services.
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- Ensure the safety of the person.
 - Record in writing using the Vulnerable Adults Safeguarding Report form, date and sign your report, and give it to your Safeguarding Officer at the earliest possible time.
 - Act without delay.

Do not

- Stop someone disclosing to you.
- Promise to keep secrets.
- Press the person for more details or make them repeat the story.
- Gossip about the disclosure or pass on the information to anyone who does not have a legitimate need to know.
- Contact the alleged abuser.
- Attempt to investigate yourself.
- Leave details of your concerns on a voicemail or by email.
- Delay.

3.3 Checking out

There may need to be some initial 'checking out' with the vulnerable adult who has disclosed information to you in order to ensure his/her safety, for example, if a staff member notices a bruise on a vulnerable adult's arm, it would be appropriate to ask, 'I see you have a bruise on your arm. How did that happen?' However, be careful not to start investigating.

It is important that staff understand the clear distinction between 'checking out' and investigating.

Staff should not begin to investigate alleged or suspected abuse by asking questions that relate to the detail, or circumstances of the alleged abuse, beyond initial listening, expressing concern and checking out.

3.4 How to react and what to do

There is not one simple set of rules to follow in responding to these situations, but in general:

It is important that staff and volunteers are aware that the first person who has concerns or encounters a case of alleged or suspected abuse is not responsible for deciding whether or not abuse has occurred, (this is the role of the appropriate authorities).

However, staff and volunteers do have a duty of care to report any suspicions they may have with regard to the abuse of a vulnerable adult to allow appropriate action to be taken.

SECTION 4: PROCEDURES FOR REPORTING AND RECORDING

4.0 Reporting and recording

Basic response procedure/action

All concerns, disclosures, allegations and suspicions should be recorded on the Vulnerable Adults Safeguarding Report form ([Appendix 2](#)).

Where a staff member reports their concerns or a disclosure to a line manager, the line manager should advise them to report to the Safeguarding Officer immediately.

We recommend that 'if in doubt, report it'.

There may be emergency situations where it is appropriate to contact social services, Crisis Mental Health Team and seek medical attention immediately.

Whatever the circumstances of the concern, disclosure, allegation or suspicion, it is vital that the staff member and volunteer records the details and reports to the Safeguarding without delay.

Not every report results in a full investigation. Individual reports are accumulated to build a picture about a particular situation. It may be that a report by a CLEAR & CRASAC employee/volunteer may provide the necessary or decisive final piece of information.

4.2 Response to a vulnerable adult making an allegation of abuse

The following points are a guide to help you respond appropriately:

- Listen carefully to what the person is telling you.
- Find an appropriate early opportunity to explain that it is very likely that what they are telling you will need to be shared with others.
- Ask questions for clarification only - never ask leading questions that suggest a particular answer.
- Reassure the person that they have done the right thing in telling you.
- Tell them what you will do next and with whom the information they have given you will be shared.

- Complete a Vulnerable Adults Safeguarding Report form and cover sheet ([Appendix 2](#)) as soon as possible, giving all the details that you are aware of and what was said using the vulnerable adult's own words.

Forward the report to the Safeguarding Officer as soon as possible, either by hand in a sealed envelope marked 'Confidential', or by a secure email with a 'read receipt' option. After discussion with the Safeguarding Officer further actions will be agreed upon.

The Safeguarding or Officer will file the report in the appropriate secure location.

APPENDIX 1: DESIGNATED SAFEGUARDING OFFICERS

Safeguarding Officers

Friday

Maria Adams

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07860 941585

Monday to Thursday

Dr. Lexi Painter

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