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## Policy Statement

Action is fully committed to safeguarding the welfare of all adults, including vulnerable adults and recognises that all staff, trustees and volunteers have a responsibility to work with partners to keep our customers safe from harm and abuse

## Introduction

Action's Safeguarding Vulnerable Adults Policy has been developed in line with the 2014 Care Act which provides the following definition of safeguarding:

*"Safeguarding means protecting an adults' right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances"*

**The Care Act identifies six key principles that should underpin all Actions work in keeping our vulnerable customers safe from harm or abuse:**

- **Empowerment** – customers should be supported and encouraged to make their own decisions and informed consent.
- **Prevention** – It is better to take action before harm occurs, this includes ensuring a robust support plan, needs assessment and risk assessment are in place for our

customers on support projects from the day we start supporting them. This also includes working with partner agencies to provide wrap around services.

- **Proportionality** – we will provide the least intrusive response appropriate to the risk presented.
- **Protection** – we will work with our vulnerable customers to support and represent them
- **Partnership** – we will work with partners to develop local solutions to protecting vulnerable adults
- **Accountability** – all staff, trustees and volunteers are accountable for safeguarding the vulnerable adults we support

This policy is designed to ensure procedures are in place to allow for the prevention, investigation and action in respect of allegations of abuse against adults who are at risk of harm or abuse.

**Vulnerable Adult** - for the purposes of clarity, a vulnerable adult is defined as someone aged 18 or over, who for any reason, may be unable to take care of themselves or protect themselves against significant harm or exploitation. This is NOT exclusive to adults who are deemed to not have capacity under the 2005 Mental Health Act.

Individuals deemed to not have capacity are adults who are unable to make a decision for themselves because of impairment". Owing to the nature of Actions customer group we work with many different vulnerable groups.

If a member of staff, trustee or volunteer are unsure as to an adult's vulnerability they should discuss with their manager or their Local Safeguarding Board rather than ignore. The adult at risk could be someone other than an Action customer, ie a relative, friend or neighbour, or even an employee.

### **Capacity, Consent and Decision Making**

Considering "capacity" is crucial at all stages of safeguarding vulnerable adults. For example determining the ability of an adult at risk to make lifestyle choices, such as choosing to remain in a situation where they risk abuse; determining whether a particular act or transaction is abusive or consensual; or determining how much an adult at risk can be involved in making decisions in a given situation.

The Mental Capacity Act 2005 provides a statutory framework to empower and protect adults at risk who may not be able to make their own decisions. It makes clear who can take decisions in which situations and how they should go about this. It also enables people to plan ahead for a time when they may lose capacity.

The Act is underpinned by a set of five key principles:

1. A presumption of capacity - every adult has the right to make his or her own decisions and must be assumed to have capacity to do so unless it is proved otherwise;

2. The right for individuals to be supported to make their own decisions - people must be given all appropriate help before anyone concludes that they cannot make their own decisions;
3. That individuals must retain the right to make what might be seen as eccentric or unwise decisions;
4. Best interests - anything done for or on behalf of people without capacity must be in their best interests; and
5. Least restrictive intervention - anything done for or on behalf of people without capacity should be the least restrictive of their basic rights and freedoms.

**In implementing this policy Action will:**

- Ensure that all employees, trustees and volunteers understand their legal responsibility to protect adults in our care from harm, abuse and exploitation.
- Ensure that all employees, trustees and volunteers understand their responsibility to work to the standards that are detailed in the organisation's Safeguarding Vulnerable Adults Policy.
- Ensure that all employees, trustees and volunteers understand their duty to report concerns that arise about a vulnerable adult or a worker's conduct towards a vulnerable adult
- Ensure that the CHAPOs understand their responsibility to refer any vulnerable adult safeguarding concerns to the local statutory safeguarding team (i.e. Police and/or Social Care).
- Ensure that any procedures relating to the conduct of employees, trustees and volunteers are implemented in a consistent and equitable manner.
- Provide opportunities for all employees, trustees and volunteers to develop their skills and knowledge particularly in relation to the safeguarding of vulnerable adults.
- Abide by the relevant Local Authority's Safeguarding Vulnerable Adults Procedures, and all other protocols issued by local Safeguarding Boards in each of the localities we operate in, including encouraging full participation by customers in processes.
- Ensure that customers are encouraged to be involved in the work of the organisation and, when requested, have access to all guidelines and procedures.
- Keep up to date with local and national developments relating to the safeguarding of vulnerable adults by circulating local and national updates and good practice guidance.
- Ensure that Safeguarding is treated as a key organisational priority by ensuring that appropriate resource is made available and senior managers (through Action's Senior Management Team (SMT) are responsible and accountable for the implementation of policy and procedure across the organisation.

Ensure that Action's Safer Recruitment Policy and Procedures are implemented and reviewed to ensure that recruitment and human resources management take account of the need to safeguard and promote the welfare of vulnerable adults, including arrangements for appropriate checks on new staff and volunteers, including DBS and enhanced DBSs. Action's commitment to safeguarding and the safer recruitment policy is to be clearly stated in all adverts and application processes. All employees and volunteers who have lone working contact, or potential for lone working contact, with any customer will be subject to an enhanced DBS check (see Lone Working and Undertaking Visits procedure).

We must assure ourselves that any external agencies or contractors working with our customers or on a site or property where they may come into contact with our customers must also have an enhanced DBS. This will be obtained from the organisation or individual working with that customer by the relevant Manager. Any external agencies or contractors will be made aware of our Safeguarding policies and procedures.

### **Procedures for reporting a safeguarding adults concern**

Action recognises that it has a duty to act on reports or suspicions of abuse, or where there are suspicions that a vulnerable adult is suffering or likely to suffer significant harm. When worrying changes are observed in a vulnerable adult's behaviour, physical condition or appearance, or there are suspicions or even a 'gut feeling' that something is not right, employees and volunteers will:

See flow chart below

#### **Stage 1**

- Initially talk to a vulnerable adult about what you are observing. It is okay to ask questions, for example: "I've noticed that you don't appear yourself today, is everything okay?" Do **NOT** use leading questions.
- Listen carefully to what the person has to say and take it seriously.
- Do **NOT** investigate or take sole responsibility for a situation where an adult makes a disclosure.
- **ALWAYS** explain to the person that any information they have disclosed will have to be shared with others.
- Support Projects should immediately notify the office/Project CHAPO or a member of SMT if they are unavailable.
- For non-support projects immediately notify your line manager or a member of SMT.
- Following discussion a referral should be made to the local safeguarding board
- If the incident occurs out of normal working hours, contact the On Call Manager on 07747 565791 for further advice as to whether to refer to the local safeguarding board or police.
- Record what was said as soon as possible after any disclosure.

- The person who receives the allegation or has the concern should complete the Local Authority safeguarding referral and Actions internal safeguarding report on the case management system ensuring that it is signed and dated.
- Respect confidentiality and file documents securely.
- Ensure that case notes and the safeguarding report are inputted onto the case management system the same working day or at the very latest within 24 hours.

## **Stage 2**

Where an employee or volunteer has a suspicion that a vulnerable adult has been abused or significantly harmed, or is at risk of abuse or significant harm they will take immediate action. The employee or volunteer will contact the police or local Social Care team. Local contact information should be stored with copies of this policy, in the CHAPO folder or will be available on the safeguarding page of the Intranet.

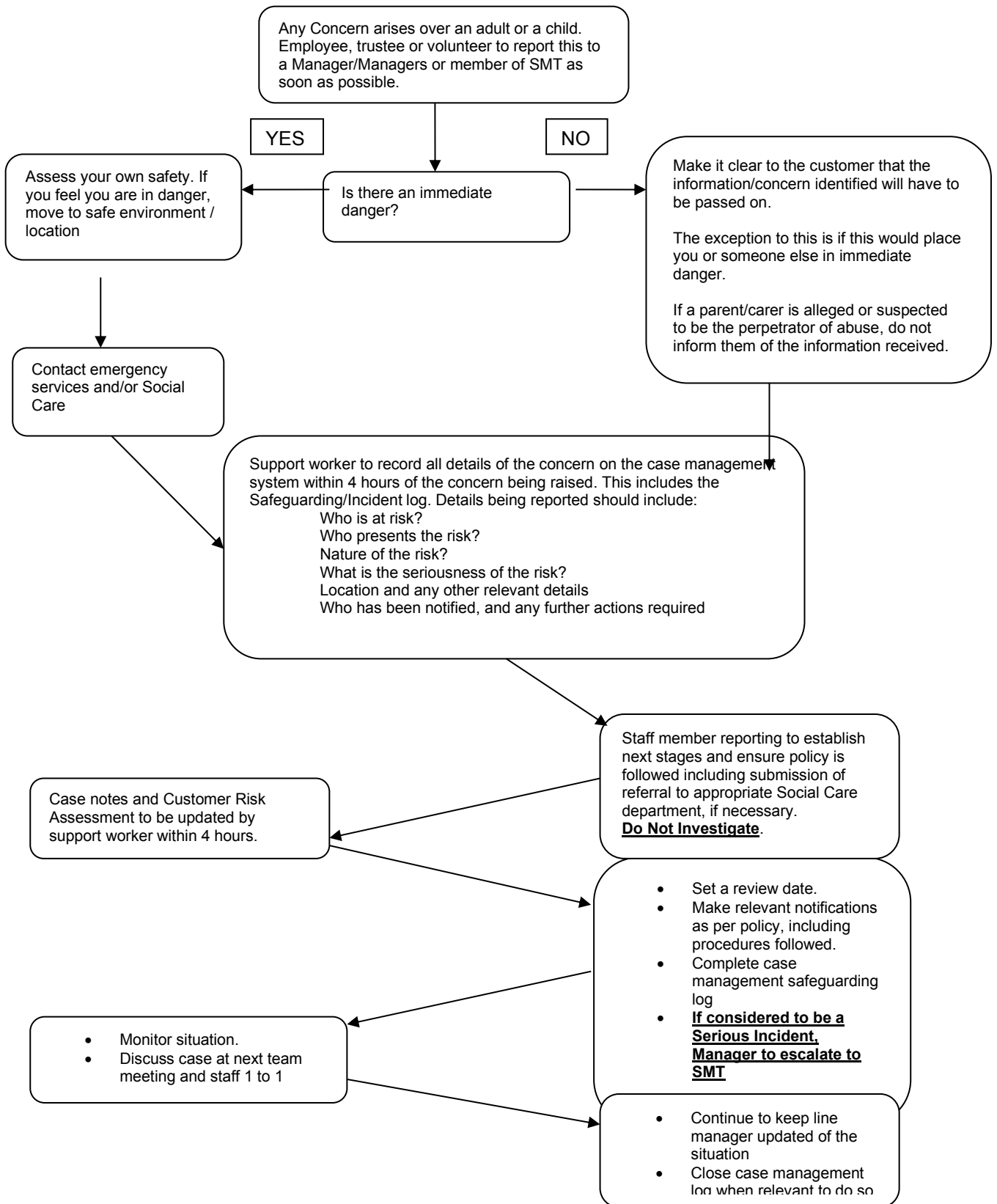
### **In an emergency – do not delay – ring 999**

If a referral is made direct to Social Care this must be followed up in writing within 48 hours.

In the event of an external Serious Case Review or an internal Serious Incident Review the IT file will be immediately exported therefore it is essential that there is a good audit trail of all communications made and received, contact and actions.

### **What trustees should do if they suspect a vulnerable adult is at risk of harm or abuse:**

Trustees should immediately contact a member of SMT for advice and contact details re relevant local safeguarding board.



**When to report a safeguarding concern** – the following are identified as forms of abuse:

- Physical Abuse – including hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanction
- Domestic abuse (see Action’s Domestic Abuse Policy for more guidance)
- Sexual Abuse – including rape and sexual assault to which the vulnerable adult has not consented to, including Child Sexual Exploitation which has continued into adulthood.
- Psychological Abuse
- Financial or material abuse – including theft, fraud and exploitation
- Modern slavery
- Discrimination – e.g. racist or sexist abuse
- Organisational abuse
- Neglect and acts of omission – e.g. ignoring medical or physical needs
- Self-neglect (this does not include self-harm or suicidal idealisation)
- “Cuckooing” – exploiting a vulnerable individual by way of “taking over their home” for the purpose of criminal activity

**Internal recording of safeguarding incidents:**

All employees, trustees and volunteers are to be aware that any document related to adult safeguarding concerns could potentially be used as a legal document. This means these documents could be used in a court of law if deemed necessary. Due to this, all written evidence must be recorded in an accurate, concise and timely manner. This includes notes taken immediately following the concern observed, which must be scanned and attached to the relevant customer record onto the case management system (please see flowchart above). All relevant facts must also be recorded in the case notes onto the case management system and Safeguarding log completed with dates and times of incidents as soon as possible and within 24 hours.

If an employee or volunteer has any concerns or is unsure about anything related to child and adult protection, including perceived poor or inappropriate practice, then they need to speak to the Child and Adult Protection Officer (CHAPO), who will be a local manager, or if they are not available, another service manager or member of SRMB. With any child or adult safeguarding concerns the employee or volunteer is required to follow the flowchart in this policy (above), which will be displayed in your office.

All safeguarding concerns must be reported immediately. Any child and adult safeguarding matters take priority over everything else (for example other appointments are to be cancelled if necessary). Employees and volunteers must liaise with their line manager regarding any future visits to the customer due to potential risk issues. The risk assessment should be updated immediately and signed by the line manager (see flowchart).

Trustees should seek advice immediately from the Chair of SRMB or if they are unavailable, another member of SRMB.

When a report is received regarding a potential Child or Adult Protection concern, the CHAPO will ensure as much information as possible is obtained by the employee or volunteer, including the following:

Time/date/location of risk  
What is the risk?  
Who is at risk?  
What is already known about the customer/child that may contribute to the risk?  
What is the seriousness/immediacy of the risk?  
Is there anyone else involved/at risk?  
What action has already been taken and by whom?

The CHAPO should then assess with the employee or volunteer the seriousness of the risk. They will decide whether the incident should be phoned through to Children's Social Care or monitored internally.

If it is to be reported to Social Care, the employee or volunteer should phone the incident through. Details of the time, date and who they spoke to **must** be recorded onto the case management system. This should be supported, in writing, and emailed securely to Children's Social Care, within **48 hours**. The letter must include all of the risk details highlighted in the phone call, including any risks to employees and volunteers visiting that person or property. A copy of the letter must be scanned into the customer's file on the case management system.

The employee or volunteer must then follow up this referral the next working day for feedback from Children's Social Care. It is important to note that they may not be able to give much feedback, depending on the nature of their enquiries. If this is the case and a potential risk to employees and volunteers has been highlighted as a result of the referral, the risk assessment should reflect new risk management plans to address this. Children's Social Care should be informed of such a risk. The response needs to be updated on the log, recording any further action required by Action or Children's Social Care.

## **Supervision**

As well as reporting initial concerns to the CHAPO, employees and volunteers should inform their line manager (if they are different). All child or adult safeguarding issues **MUST** be discussed with the line manager in regular, minuted supervision sessions and updates given within the Service User section of the contract Team Meeting.

Line managers and workers should be aware that dealing with Child Safeguarding issues can be potentially distressing. Employees and volunteers should be aware that the Westfield counselling service is available free of charge to all employees. For contact information speak to HR.

## **Training for staff, trustees, and volunteers**

Action will ensure that **all** staff members, trustees and volunteers who may come into contact with vulnerable adults whether paid or unpaid, undertake training to gain a basic awareness of the signs and symptoms of abuse and how to report concerns. Safeguarding training should be prioritised for new employees and volunteers and must be completed within six months of the start of employment.

Staff and volunteers should attend child and adult protection training every two years as a minimum. All new staff should attend local safeguarding training as soon as possible and within six months of their employment start date. Training is usually delivered by local Safeguarding Boards, and this is the preferred method of delivery. However where local



training is not available, employees and volunteers should attend any in-house training available or online training in order to ensure that their knowledge is refreshed and updated. Local area Safeguarding Boards may offer online training as an alternative to traditional group training. Managers should ensure that training is made available as part of any new employee's induction.

All staff, trustees and Volunteers should read Action's Safeguarding policies and procedures within the first week of employment and carry out the quiz to check their understanding.

Service Managers are responsible for ensuring that all employees and volunteers receive appropriate training, and that each employee updates their individual training record on Snowdrop as appropriate.

Managers should carry out a training needs analysis of their team to identify additional training in relation to the needs of their customers e.g.:

- Prevent agenda (mandatory for all action staff)
- Hate crime
- Domestic abuse (mandatory for all Action staff)

### **Child and Adult Protection Officers (CHAPOs)**

All Service Managers are designated Child and Adult Protection Officers (CHAPO's).

CHAPO's are responsible for ensuring all local safeguarding information is recorded on the case management system, the information is printed off and placed in the CHAPO folder, which is available in each office. The folder should include details of safeguarding log, referrals and local information relating to safeguarding.

All concerns raised with CHAPO's, even if they do not result in a referral to Children's Social Care, should be recorded using the internal safeguarding form and stored in the safeguarding folder.

Child and Adult Safeguarding should be a standard item on every team meeting agenda. This is to ensure that if a CHAPO was absent the chair would be able to follow up on a case if it has not been concluded.

**Role of the CHAPO** – The designated CHAPO's are responsible for ensuring that ALL Child and Adult Protection concerns are dealt with and monitored in the appropriate way, though it is the responsibility of the support worker for carrying out the actions. CHAPO's are responsible for ensuring concerns are logged and recorded correctly, and ensuring the necessary reporting through to, and follow up with, Children's Social Care.

### **Multi-agency working**

Where possible staff should work with partner agencies to engage in a multi-agency approach to support the vulnerable adult at risk of harm or abuse, this may include one of the following:

**MARAC** – MARAC is a **Multi-Agency Risk Assessment Conference** to tackle domestic abuse in the community. To refer a case to MARAC a referral is required. Referral to MARAC is undertaken by the individual who risk assesses the victim using a "CAADA DASH" form. If

the DASH form scores 14+ MARAC referral completed and sent to the appropriate MARAC team and the appropriate IDVA Service. MARAC is for victims who are deemed at high risk of domestic abuse.

Once a referral is received the MARAC agenda is sent out to lead and invited agencies eight working days prior to the meeting. All invited persons are required to research the cases to be heard. If you are unable to attend or unable to send an Action representative, then you need to contact the lead agency (Police) or the MARAC team and pass on any relevant information. All information will be shared at the meeting, a safety action plan is developed for each victim and actions agreed. Each Agency will be responsible for completing their actions within the safety plan and for updating their local systems. Details of local MARAC contacts should be placed within the CHAPO safeguarding folder.

**Multi-Agency Public Protection Arrangements (MAPPA)** is the name given to arrangements in [England](#) and [Wales](#) for the "responsible authorities" tasked with the management of registered sex offenders, violent and other types of sexual offenders, and offenders who pose a serious risk of harm to the public.<sup>[1]</sup> The "responsible authorities" of the MAPPA include the [National Probation Service](#), [HM Prison Service](#) and [England and Wales Police Forces](#). MAPPA is coordinated and supported nationally by the Public Protection Unit within the [National Offender Management Service](#). MAPPA was introduced by the Criminal Justice and Courts Services Act 2000 and was strengthened under the [Criminal Justice Act 2003](#). MAPPA 3 meetings should be attended by a Service Manager; MAPPA 2 meetings should be attended by Service Managers and Support Workers; MAPPA 1 meetings should be attended by Support Workers and/or Service Managers.

**VARMS** - Vulnerable Adults Risk Management Meetings are multi-agency meetings and they have different titles and processes in different local Authority areas. They offer a multi-agency approach to providing support to a vulnerable adult or young person. CHAPOs will have information about local procedures which they must make all their staff aware of.

### **Managing allegations made against a member of staff, trustee or volunteer**

An allegation is **not** a concern about the quality of care or practice or a complaint; an allegation may relate to a person who works with vulnerable adults who have:

- behaved in a way that has harmed a vulnerable adult
- possibly committed a criminal offence against a vulnerable adult or
- behaved towards a vulnerable adult that indicates they may pose a risk of harm to children or young people.

Action will ensure that any allegations made against employees, trustees and volunteers will be dealt with swiftly and in accordance with these procedures:

- The worker receiving the report must ensure that the vulnerable adult is safe and away from the person against whom the allegation is made.
- A member of the senior management team or SRMB should be informed immediately. In the case of an allegation involving a member of the management team, the allegation should be taken to someone higher up. For example, if the allegation is against a Service Manager, a member of SMT or HR Manager must be notified. This person must be independent of the allegations being made. In the

eventuality that the allegation is made against the Chief Executive Officer, HR Manager should be notified for guidance. If an allegation is made against a trustee this should be taken to the Chief Executive Officer

- The notified managers should adhere to the guidance laid out in the local area's safeguarding Vulnerable Adults Procedures.
- The person reporting the concerns to the manager should also inform his/her line manager if appropriate. The notified manager should inform the line manager of the employees and volunteers about who the allegations are being made, the HR Manager or in their absence another member of the Senior Management Team.
- The responsible officer should contact the Local Authority Designated Officer (LADO) within the local Safeguarding Unit for advice on how to proceed with the immediate situation, within one working day, even if the allegations are made directly to the police. Outside of working hours the Emergency Duty Team can give advice and/or in the event of an emergency situation arising, the police should be contacted.
- The individual who first received/witnessed the concern should make a full written record of what was seen, heard and/or told as soon as possible after observing the incident/receiving the report. It is important that the report is an accurate and factual description. The manager (if appropriate) can support the worker during this process but must not complete the report for the worker. This report must be made available on request from either the police and/or social services.
- Regardless of whether a police and/or social care investigation follows, Action will ensure that an internal investigation takes place and consideration is given to the implementation of disciplinary procedures. This may involve an immediate suspension and/or ultimate dismissal dependant on the nature of the incident.
- The Independent Safeguarding Authority may be informed about the allegations, and outcome. This will be decided as part of the LADO process.
- Please see Confidential Reporting policy in relation to whistleblowing
- Any staff member about whom an allegation is made will be immediately removed from work dealing with customers; this may or may not include suspension without prejudice. Support will be offered through the HR department whilst an investigation is ongoing.
- Any individual (paid worker or unpaid volunteer) removed (i.e. dismissed) from work due to posing a risk of harm to vulnerable adults must be disclosed to the Disclosure and Barring Service. It is an offence for the organisation to fail to make a referral without good reason.

### **Data Protection & Confidentiality GDPR**

It is acknowledged that we may have a legal duty to breach a customer's confidentiality if they are deemed to be a risk to themselves or others. This should be clearly identified with customers at referral, assessment, sign up and reviews. All customers should also sign at

least two documents (assessment and referral confidentiality waivers) to state they understand the company's policy on this subject and that they are happy to accept support under this proviso. In addition, any comment that leads employees and volunteers to believe confidentiality may have to be breached, should be discussed with the customer immediately providing it is safe to do so.

At assessment all customers should be made aware that Action operates an information-sharing policy with partner agencies, and that concerns may be passed on to other relevant agencies even if they do not warrant a full child or adult safeguarding referral.

Under our Data Protection policy, client records will be destroyed after twenty years.

Please see Data Protection & Confidentiality Policy for full guidance – all disclosures must follow the procedures laid out in this policy.

## **Governance and Review**

Role of Trustees – in line with the Charity Commission's expectations, Action's trustees will proactively safeguard and, where appropriate, promote the well-being and welfare of the charity's customers. They will take reasonable steps to protect beneficiaries, staff, volunteers and others connected with the activities of the charity from harm. This is a key governance priority for Action.

Safeguarding Risk Management – Action's SMT oversees and monitors the development and review of all safeguarding policies and procedures within the organisation. It also provides a forum to carry out internal serious incident reviews to facilitate a "lessons learnt" approach to share across the organisation to enable improvements and learning in service delivery and safeguarding. SMT is chaired by the Chief Executive and has representatives from different customer groups and areas of the organisation at a managerial level.

SMT will review this policy every two years. Key stakeholders, such as local safeguarding boards will be consulted on the content of the policy to ensure it aligns with Local Safeguarding policies.

- The policy will be disseminated to all employees, trustees and volunteers through the established methodology, through the governance structure and in local team meetings.
- Safeguarding must be an agenda item at every team meeting, Service Manager meeting, Senior Management Team meeting and Board meeting for trustees.
- SMT must ensure that information, updates and good practice guidance is regularly and promptly circulated.
- All employees and volunteers will be required to sign that they have read, understood and agree to be bound by this policy.
- SMT will review safeguarding practice annually and prepare a report to the Board of Trustees quarterly.