

Safeguarding Vulnerable Adults Policy

Implementation Date: May 2014

Reviewed: April 2016

Review Date: April 2018

**CONTENTS**

|  |  |
| --- | --- |
| **SECTION** | **Page** |
| Contents | 2 |
| Introduction | 3 |
| Who might be causing abuse | 3 |
| The role of staff | 3 |
| Procedures if adult abuse is disclosed or discovered | 4 |
| Categories and signs of abuse | 4 |
| Recognising abuse | 5 |
| If abuse is disclosed, discovered or suspected | 5 |
| Confidentiality | 6 |
| CHUMS safeguarding contacts | 11 |
| Local safeguarding adults contacts | 12 |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **APPENDICES** |
| **A** | Safeguarding form for recording incidents/concerns | 7 |
|  |  |  |

**Introduction**

The purpose of this policy is to outline the duty and responsibility of staff, volunteers and trustees working on behalf of the organisation in relation to Safeguarding Vulnerable Adults.

All adults over the age of 18 years of age have the right to be safe from harm and

must be able to live free from fear of abuse of any kind and all complaints,

allegations or suspicions must be taken seriously.

A person can be vulnerable for many reasons and at different times and

situations in their life; it may be that they are unable to protect themselves or are

dependent upon others. The abuse may not always be deliberate and can

sometimes happen when others are trying their best but do not know the right

thing to do and this may cause harm.

This could include people with learning or physical disabilities, mental health

problems, older people or people with an impairment. It may also include

victims of domestic abuse, anti-social behaviour or even hate crime. There may

be drug or alcohol problems, poverty or homelessness.

Adult abuse can vary from not treating someone with respect and dignity affecting their quality of life to causing actual physical harm, violating a person’s human and civil rights. Abuse can happen anywhere i.e. at home, work, in the community.

**Who Might be causing the Abuse**

The person responsible for the abuse is usually known to the person/s being abused and can be: A relative, friend, carer, colleague, health professional, social care professional, paid or unpaid volunteer or neighbour. The person being abused may be worried about what will happen if they speak out and must be reassured it is okay to speak out.

**The Role of Staff**

All staff, volunteers and trustees working on behalf of CHUMS have a duty to promote the welfare and safety of everyone.

Staff, volunteers and trustees may receive disclosures of abuse or witness

vulnerable adults who may be at risk. This policy will enable all personnel to make

informed and confident responses if they feel another person is at risk of harm.

**Procedures if Adult Abuse is Disclosed or Discovered**

**Categories and Signs of Abuse**

The following signs MAY indicate abuse, BUT – there could be other

explanations:-

**Physica**l

Physical abuse can occur where there is no satisfactory explanation given. Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, using restraint, hair pulling. Physical abuse is any deliberate act to cause physical harm.

**Signs:** Unexplained cuts, bruises or fractures to any part of the body especially, in well protected areas. Slap, kick or finger marks, object shaped injuries, weight loss due to malnutrition/dehydration, untreated medical problem, and unexplained burns – the location of the burn/s and the type of burn.

**Emotional**

Emotional abuse can include humiliation, shouting, swearing, intimidation, emotional blackmail, denial of human rights, using racist language, prevention of seeing family and friends, controlling, harassment, threatening or verbal behaviour.

**Signs:** Flinching, avoiding eye contact, fearfulness, low self-esteem, tiredness or insomnia, tearfulness, appetite changes, weight loss or weight gain, isolation, lack of personal hygiene and respect, confusion.

**Sexual**

Sexual abuse involves forcing or enticing an adult to take part in sexual activities and can be committed by either a man or woman and in some cases a child. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex). They may also include sexual acts that the adult has not or cannot consent to.

**Signs:** Sudden changes in behaviour**,** poor concentration**,** disturbed sleep**,** incontinence**,** withdrawal, self-harm**,** bruising to upper arms, torn, stained or bloody underwear, recent difficulty in standing/walking.

**Neglect**

Neglect is when a person is suffering due to their physical, physiological or medical needs not being met by a carer preventing access to services such as health, social care or educational services. This could include withholding food, drink or heating.

**Signs:** Poor living conditions**,** isolation**,** inadequate heating and lighting**,** changes to physical state i.e. unclean, ill-fitting clothes**,** malnutrition

**Financial**

Financial abuse can take place in the form of theft, fraud, exploitation, taking or misusing possessions/property without permission.

**Signs:** Inability to pay bills, personal items going missing, person/s managing finances being evasive or uncooperative, unexplained funds missing from bank account, sudden interest by family/friends.

**Institutional**

This abuse is different from other categories of abuse because it is about who abuses and how they have abused, rather than the types of harm. Abuse occurs in relationships, families, a service or institution such as hospital, nursing home/residential setting. The perpetrator can be a single person or a group of people.

**Signs:** Unhomely or stark living conditions, lack of clothes and belongings, illegal confinement or restrictions.

**Recognising Abuse**

* The person may disclose themselves that they are being abused
* The person may make a chance remark
* The abuser may disclose it
* You may be witness to the abuse
* You may see physical signs of abuse
* A third party may disclose that someone is being abused

**If abuse is disclosed, discovered or suspected**

Promises of confidentiality must not be given as this may conflict with the need to

ensure the safety and welfare of the individual.

Write down what you have been told and keep it factual, include the date, time, where abuse took place, names of others involved and a description of injuries if seen

Do not delay

Do not act alone

Do not start to investigate

Consult with the Safeguarding Lead

**DO’s:**

* Make sure the individual is safe
* Remain calm and do not show shock or disbelief
* Listen carefully to what is being said and repeat back what is being said as this will confirm your understanding and that the person is being listened to
* Explain that all information given will be treated seriously
* Record clear and concise facts as soon as possible
* Report to your Safeguarding lead

**DON’T:**

* Be judgmental or voice your own opinion or panic
* Ignore the allegation
* Ask leading questions
* Make false promises
* Make statements such as ‘I am shocked, don’t tell anyone else’

**Confidentiality**

Staff, volunteers and trustees have a professional responsibility to share relevant

information about the protection of vulnerable adults where necessary and on a

need to know basis.

All written records will be kept secure in a locked cabinet in the CEO’s office.

If an adult confides in a member of staff/volunteer and requests that the information is kept secret, it is important that the member of staff/Volunteer informs the adult that he or she has a responsibility to refer cases of alleged abuse to the appropriate

agencies.

Consent should be obtained from the vulnerable adult before sharing personal information with social care or other agencies unless there is an added safety risk. In the case of young adults with disabilities the professional should consider whether a conversation with the parent/carer should be undertaken in the first instance.

**Safeguarding Form for Recording Incidents/Concerns**

The importance of recording all stages of the safeguarding process cannot be overemphasised. This form is designed as an aide memoir to help ensure appropriate procedures are followed after a safeguarding concern.

Please ensure that you distinguish between a fact, an allegation and an opinion within the report.

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Adult |  | Date of birth |  |

|  |
| --- |
| Brief description of concerns (including adults view) |
|  |

 **By whom…………………………………………………………….**

 **Date……………………………………….**

 **Action Taken**

|  |
| --- |
| Description of action taken (including who referred to, names, times, telephone numbers, etc.) |
|  |

 **By whom…………………………………………………………….**

 **Date……………………………………….**

|  |  |  |
| --- | --- | --- |
| If a referral has not been made, please give reasons as to why not | Signed | Date |
|  |  |  |

 **Chronology of Events/Concerns**

|  |  |
| --- | --- |
| Concern/event | Action/result |
|  |  |

 **Signature…………………………………………………………………..**

 **Date……………………………………….**

|  |  |
| --- | --- |
| Concern/event | Action/result |
|  |  |

 **Signature…………………………………………………………………..**

 **Date……………………………………….**

|  |  |
| --- | --- |
| Concern/event | Action/result |
|  |  |

 **Signature…………………………………………………………………..**

 **Date……………………………………….**

 **Chronology of Events/Concerns**

|  |  |
| --- | --- |
| Concern/event | Action/result |
|  |  |

 **Signature…………………………………………………………………..**

 **Date……………………………………….**

|  |  |
| --- | --- |
| Concern/event | Action/result |
|  |  |

 **Signature…………………………………………………………………..**

 **Date……………………………………….**

|  |  |
| --- | --- |
| Concern/event | Action/result |
|  |  |

 **Signature…………………………………………………………………..**

 **Date……………………………………….**

**Further Notes**

Has this report been shared with the named adult? Yes/No

|  |
| --- |
| Adult’s relationship with peers (Include social skills) |
|  |
| CHUMS relationship with family |
|  |
| Adult’s presentation (physical appearance, hygiene, diet if known, etc.) |
|  |
| Attendance and punctuality |
|  |
| Other comments |
|  |
| Signed: |  | Dated: |  |

**CHUMS Safeguarding Adults Contacts**

**Safeguarding Lead**

Amanda Cullens

Main Office: 01525 863924

Email: Amanda.cullens@chums.uk.com

**Local Safeguarding Adults Contacts**

**Bedford Borough Council**

Vivien Matthews

Safeguarding Manager

Borough Hall

Cauldwell Street

Bedford. MK42 9AP

**Telephone: 01234 267422**

**Fax: 01234 276076**

**Email: Vivien.Matthews@bedford.gov.uk**

**Email:** adult.protection@centralbedfordshire.gov.uk

**Tel:** 0300 300 8123 (**After hours emergencies only)**

**Central Bedfordshire Council**

Emily White

Safeguarding Vulnerable Adults Manager

Houghton Lodge, Houghton Close

Ampthill, Beds. MK45 2TG

**Direct Dial:** 0300 300 8122

**Fax:** 0300 300 8239

**Email:** emily.white@centralbedfordshire.gov.uk,

**Email:** adult.protection@centralbedfordshire.gov.uk

**Tel:** 0300 300 8123 (**After hours emergencies only)**

**Luton Borough Council**

Maureen Sheridan

Adult Safeguarding Manager

Unity House

111 Stuart Street

Luton LUI 5NP

**Telephone:** 01582 547659/547660

**Email:** Maureen.Sheridan@luton.gov.uk

**Email:** adult.protection@centralbedfordshire.gov.uk

**Tel:** 0300 300 8123 (**After hours emergencies only)**

**Bedfordshire Police**

Safeguarding Unit

Police Headquarters

Woburn Road, Kempston

Bedfordshire MK43 9AX

**Tel:** 01234 841212