

Safeguarding Policy

General Principles

This policy sets out the values and principles that underpin all work with vulnerable adults and children and gives procedures and guidelines for all staff and partners working for and with AgilityEco.

All staff must ensure that the policy and procedure is applied.

Definitions of Abuse

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

It may involve:

'a single or repeated act, or omission occurring within a personal or closed relationship where there is an expectation of trust, which causes harm or distress to a person'
(*No Secrets – Department of Health 2000*)

- b. Abusers** can be anyone who knowingly or unknowingly inflicts harm on another person, however the following are in positions of trust and have access to people who are vulnerable:
- i. health, social support or other professional visitor
 - ii. staff or management
 - iii. volunteers
 - iv. service user
 - v. friend, family member or other social visitor
- c. A Resident** is any person residing in the area within which AgilityEco operates, whether their tenure is owner-occupier, private rental, supported, general needs, sheltered or other housing.
- d. Significant Harm** or ill treatment, (including sexual abuse and forms of ill-treatment that are not physical); The impairment of, or an avoidable deterioration in, physical or mental health, and the impairment of physical, emotional, social or behavioural development' (*Law Commission 1995*). (*Protection of Vulnerable Adults (Safeguarding Adults) Policy & Procedure (Feb 2008) Final*)
- e. A Vulnerable Adult** refers to any person aged 18 years or over who is or may be in need of community care services by reason of mental, physical or learning disability, age or illness and who is or may be unable to take care of himself or herself, or unable to protect himself or herself against significant harm or serious exploitation which may be occasioned by actions or inactions of other people'
(*Law Commission 1995*). (*Protection of Vulnerable Adults (Safeguarding Adults) Policy & Procedure (Feb 2008) Final*)

Potential Indicators of Abuse

These lists are not intended to be exhaustive or prescriptive. They are included to provide guidance and information.

- a. Physical Abuse** is the deliberate infliction of pain, physical harm or injury including: hitting, slapping, punching, pushing, kicking, hair pulling, restraint, withholding or misuse of medication.

Indicators include:

- i. multiple bruising
- ii. a history of unexplained falls and/or minor injuries
- iii. fractures not consistent with falls or explanations of the injury
- iv. unexplained loss of hair in clumps
- v. cuts that are not likely to be explained by self-injury
- vi. finger marks
- vii. burns not consistent with possible explanations

Effect on the vulnerable person:

- i. may appear withdrawn
- ii. scared
- iii. reclusive
- iv. flinching when touched
- v. an increased awareness

- b. Psychological and Emotional Abuse** is any pattern of behaviour by another that results in the psychological harm to a vulnerable adult and may include: verbal abuse, humiliation, insults, ridicule, bullying, threats, enforced isolation, coercion, lack of privacy or choice, denial of dignity.

Indicators include:

- i. strain within the relationship
- ii. the suspected abuser acts differently towards the vulnerable adult when others are present
- iii. an air of silence in the home when the alleged abuser is present
- iv. a general lack of consideration for the vulnerable adult's needs
- v. refusal to allow the vulnerable adult an opinion of their own
- vi. denial of privacy in relation to their care, feelings or other aspects of their life
- vii. denial of access to the vulnerable adult, especially where the adult needs assistance which they will consequently not receive
- viii. denial of freedom of movement e.g. locking the person in a room or tying them to a chair
- ix. alterations in the psychological state, possible withdrawal or fear

Effect on the Service User:

- i. may display confidence checking behaviour – i.e. putting themselves down / constant approval seeking
- ii. personality change

iii. self-abuse may be present

- c. **Sexual Abuse** is any sexual act carried out without the informed consent of a vulnerable adult, or where the person would not be capable of understanding the consequences of their actions and may include fondling, sexual intercourse, offensive or suggestive language, inappropriate touching, looking, taking indecent photographs.

Indicators include:

- i. unexplained bruising around the vaginal, rectal or genital areas
- ii. unexplained difficulties in walking
- iii. reluctance of the person to be alone with an individual known to themselves
- iv. unexplained behaviour change
- v. unexplained bleeding from vaginal, rectal or genital areas
- vi. stained or bloody clothing

Effects on the Service User:

- i. may feel unsafe or scared
- ii. display checking behaviours
- iii. may wish to cover-up
- iv. can lead to self-harm, anorexia, bulimia or nervosa

- d. **Financial Abuse** is the misappropriation of the funds of a vulnerable adult and may include misuse of finances, exploitation, theft or fraudulent use of money, embezzlement, misuse of property or possession. Can also include where staff become involved in wills or Power of Attorney, or where carers use their store loyalty cards to obtain goods for tenants.

Indicators include:

- situations where, despite having a personal income/pension, the vulnerable adult is without money soon after its receipt. Particularly where that person is not able to spend money without assistance
- unexplained shortage of money despite a seemingly adequate income
- unexplained withdrawals from savings accounts
- unexplained disappearance of financial documents e.g. building society books and bank statements

Effects of the Service User

- may find themselves in debtor rent arrears
- their personal appearance may change
- may take part in reduced social activities
- may also suffer depression, feel isolated or embarrassed

- e. **Neglect** may be deliberate or by default where the abuser is not able to provide the care needed and may not recognise the need for that care to be given. The abuser may also be neglecting them. Neglect can also occur where regimes or routines are too rigid, or where treatment is withheld, or the wrong treatment is given.

Indicators include:

- consistent lack of supervision for long periods, especially during activities which hold danger for them
- denial of religious or cultural needs
- physical problems and medical needs that are not attended to

Effect on the Service User

- constant fatigue or listlessness
- loss of weight
- poor hygiene
- persistent hunger
- inappropriate dress

- f. **Self-Neglect** although not technically abuse as another person is not involved, may be considered in some circumstances as a type of abuse.
- g. **Discriminatory Abuse** can manifest itself in any of the above ways and frequently will include a combination of forms of abuse. What differentiates it from the other categories is that the abuse is motivated by prejudice and discrimination against the individual because he or she is perceived to belong to a specific group; this may be gender sexual orientation, race, religion or disability amongst others.

When delivering services to vulnerable people from minority ethnic communities, it is important to acknowledge that the failure to recognise their cultural, religious and ethnic diversity can be interpreted as a form of abuse, since it denies the individual of their own personal identity.

Note that more than one of these types of abuse may occur at one time though only one may present itself initially.

Staff Training and Awareness

All members of staff working with vulnerable children and adults will be subject to Disclosure and Barring checks. Where appropriate training will be given.

Acting on Abuse or Suspicion of Abuse

a. Emergency

When someone has been attacked and immediate assistance is needed to help the individual, protect property or protect evidence.

In an emergency, a quick assessment of the situation is made in order to conclude that the emergency services should be summoned.

- i. Call appropriate emergency service.
- ii. Do not put yourself in danger.
- iii. Do not contaminate the evidence.
- iv. Once emergency is over, follow the process under appropriate non- emergency situation.

b. Dealing with Alleged, Suspected or Confirmed Abuse (non- emergency)

Confirmed abuse is a situation when there is clear evidence of abuse taking place, for example when you have seen it yourself and it cannot be anything else.

Suspected abuse is a situation where, from your own observation, rumours etc, you think someone may be being abused but you do not know for certain.

Alleged abuse is a situation when someone reports to you that an individual is being abused or the individual alleges he / she is being abused.

Where possible, staff should discuss non-emergency situations with their manager or with the Senior Officer. In line with local safeguarding/social services procedures staff should immediately report the alleged, suspected or confirmed abuse to safeguarding/social services by completing their alert form Staff should telephone the relevant agency to inform them that an alert form is being completed.

Social services are the lead agency in abuse of vulnerable children / adult situations and **in all cases**, staff must make a referral.

Staff should ensure that a note of the circumstances and of all actions taken is included on client forms or on any other appropriate internal records.

'Grey Areas'

Situations where what is actually going on is very unclear and there may not even be a definite victim, but there is a lot of hostility, people may feel victimised or someone is acting out of character. Where a member of staff is uncertain as to how to proceed they should, as a matter of urgency, discuss the situation with their manager and agree a course of action in line with this policy.

Responsibility

All staff working with vulnerable children or adults, or who have contact with vulnerable children or adults are responsible for implementing this policy and associated guidelines in association with their managers and appropriate partner agencies.

The Senior Officer holds day-to-day responsibility for this policy and, in the first instance for taking action. The Senior Officer will report to the trustees any serious issues or instances that may arise relevant to this policy.