

Title:	SAFEGUARDING: PART 2 – SAFEGUARDING VULNERABLE ADULTS
Type:	POLICY
Group:	SAFEGUARDING
For:	CHAILEY HERITAGE FOUNDATION

VERSION CONTROL:			
Version No	New document or reasons for revision	Agreed by	Date
2.0	Reviewed and updated	Governors (S&W and FGB)	Autumn 2016
2.1	Reviewed – no changes made	OM3 (DB)	Autumn 2017
2.2	Reviewed – references to appendices made clearer	OM3 (DB)	Autumn 2018
2.3	Reviewed and updated		Autumn 2019
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Leads:	Director of Social Care Social Care Quality Improvement Manager, Clinical Social Care Quality Improvement Manager Headteacher Deputy Head Staff and Pupil Support Manager Teacher (LB) Ofsted Registered Manager for the Children’s Home Head of Community Operations CQC Registered Manager Night Team Manager Safeguarding and Whistleblowing Governor Online Safety Governor
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Review Frequency:	1 year
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Next Review Process to Start:	Autumn 2021
This document will remain valid during the review process	

LINKED DOCUMENTS:

Key documents including related policies:

External

- **Sussex Safeguarding Adults Policy and Procedures (May 2019)**
- **Mental Health Act 1983 (Amended 2007)**
- **Human Rights Act 1998**
- **Equality Act 2010**
- **Mental Capacity Act 2005 Code of Practice including Deprivation of Liberty Safeguards**
- **Mental Capacity (Amendment) Act 2019 and Liberty Protection Standards**
- **Care Act 2014**
- **Statement on CQC's role and responsibilities for Safeguarding Children and Adults (2018)**
- **Care and Support Statutory Guidance (2020)**

Chailey Heritage Foundation link documents include:

- **Online Safety Policy (was E-Safety)** (*Chailey Heritage Foundation*)
- **Whistleblowing Procedure** (*Chailey Heritage Foundation*)
- **Mobile Phone and Smart Device Policy** (*Chailey Heritage Foundation*)
- **Internet Policy** (*Chailey Heritage Foundation*)
- **Anti-Bullying Policy** (*Chailey Heritage Foundation*)
- **Good Practice Guidelines for Intimate Care** (*Chailey Heritage Foundation*)
- **Managing Allegations** (*Chailey Heritage Foundation*)

- *For other useful documents, see Appendix 1 ('all appendices saved with Safeguarding Policy - Part One – Child Protection')*

All Policies, Procedures, Guidelines, Protocols for Chailey Heritage Foundation

SAFEGUARDING ADULTS

Sections:

1. KEY PRINCIPLES
2. LEGAL DEFINITION
3. KEY PROCEDURES – NATIONAL GUIDANCE
4. KEY PROCEDURES – ADULT

SECTIONS BELOW OF PART 1 (CHILD PROTECTION) REMAIN VALID FOR PART 2 (SAFEGUARDING VULNERABLE ADULTS)

5. KEY TRAINING
6. KEY PEOPLE
7. KEY MEETINGS
8. KEY PARTNERS AND AGENCIES

All adult clients using Chailey Heritage are 'Adults at Risk', and all children using Chailey Heritage are 'Children in Need'. Throughout this document, the term 'Young People' (YP) will be used to encompass children and young adults who access services at or from Chailey Heritage Foundation (CHF).

In consideration of the fact that staff and volunteers at Chailey Heritage Foundation might work across both children's and adult services, any safeguarding incidents must follow the checklist in Appendix 2 (all appendices saved in 'Safeguarding Policy - Part One – Child Protection'.

1. KEY PRINCIPLES

- 1.1 All children and vulnerable adults, disabled and non-disabled, have the human rights to be safe from abuse and neglect, to be protected from harm, including bullying, and to achieve the Every Child Matters outcomes, including Staying Safe.
- 1.2 The Safeguarding Vulnerable Adults' Policy and Procedure should always be used when there is an allegation or suspicion that a vulnerable adult is being abused or neglected i.e. being caused significant harm by another person or group of people.
- 1.3 In order to ensure that the welfare of disabled children and vulnerable adults is safeguarded and promoted, it needs to be recognised that additional action is required. Research and inspection indicate that disabled children and vulnerable adults face an increased risk of abuse or neglect. Disabled children and vulnerable adults can be abused and neglected in ways that others cannot.
- 1.4 At CHF, the client group is predominantly children and young adults who are disabled, and vulnerable to harm. Therefore, all who are employed to work at CHF must be committed to safeguarding, must undergo safeguarding training and must be highly aware of safeguarding issues around disabled children and vulnerable young adults. All staff must be aware of the different requirements and procedures in relation to children and those aged 18 years and over. The Safeguarding Adults procedures apply to all young people aged 18 years and over, both in the school and social care provision. CHF has a fundamental duty to ensure that this is the case.
- 1.5 CHF has a legal duty to follow Sussex Safeguarding Adults Policy and Procedures, who have a decision-making and coordinating role in regard to safeguarding adults.
- 1.6 All safeguarding work with adults should incorporate the principles of empowering adults, with a focus on meeting the desired outcomes of the adult.

- 1.7 CHF enforces zero tolerance in regard to abuse, and will treat all reports and allegations seriously.
- 1.8 This policy outlines CHF's key safeguarding principles, policies & procedures, documents, training, people, meetings, and involved partners & agencies.
- 1.9 The Care Act 2014 and the Care Act guidance set out statutory requirements to develop and assess the effectiveness of safeguarding arrangements founded on six key principles:
- **Empowerment** – people being supported and encouraged to make their own decisions.
 - **Prevention** – it is better to take action before harm occurs
 - **Proportionality** – the least intrusive response appropriate to the risk presented
 - **Protection** – support and representation for those in greatest need
 - **Partnership** – local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.
 - **Accountability** – accountability and transparency in delivering safeguarding.

Chailey Heritage Foundation is committed to upholding these key principles.

2. LEGAL DEFINITIONS

2.1 Definition of Adult at Risk

2.1.1 An adult at risk of abuse or neglect is defined as someone who has needs for care and support, who is experiencing, or at risk of, abuse or neglect and as a result of their care needs - is unable to protect themselves. All partners should be using this definition when raising a concern about abuse/neglect of an adult. (Care Act, 2014).

2.1.2 The adults using Futures services – Accommodation, Life Skills Centre, the Hub and Pathways, will all meet the above classifications.

2.2 Definition of Safeguarding

2.2.1 Safeguarding means protecting an adult's 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. (Care and Support Statutory Guidance, 2020).

2.2.2 The Care Quality Commission states that Safeguarding adults means:

- a) Protecting the rights of adults to live in safety, free from abuse and neglect.
- b) People and organisations working together to prevent and stop both the risks and experience of abuse or neglect.
- c) People and organisations making sure that the adult's wellbeing is promoted including, where appropriate, taking fully into account their views, wishes, feelings and beliefs in deciding on any action.
- d) Recognising that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances and therefore potential risks to their safety or wellbeing.

- 2.2.3 The Sussex Safeguarding Policy defines safeguarding as 'protecting an adult's right to live in safety, free from abuse and neglect.' Their policy states their aims are to:
- a) Stop abuse or neglect wherever possible.
 - b) Prevent harm and reduce the risk of abuse or neglect to adults with care and support
 - c) needs.
 - d) Safeguard adults in a way that supports them in making choices and having control about how they want to live.
 - e) Promote an approach that concentrates on improving life for the adults concerned
 - f) Raise public awareness so that communities as a whole, alongside professionals, play their part in identifying and preventing abuse and neglect.
 - g) Provide information and support in accessible ways to help people understand the different types of abuse, how to stay safe and what to do to raise a concern about the safety or well-being of an adult.
 - h) Address what has caused the abuse or neglect.

2.3 **Types of Abuse** (Care Act 2014)

2.3.1 The main categories of abuse as recognised by the Care Act 2014 are:

- a) Physical abuse: examples include slapping, rough handling, twisting of limbs/ extremities, misuse of medication, or inappropriate sanctions or restraint.
- b) Sexual abuse: examples include rape and sexual assault or sexual acts to which the vulnerable adult has not consented, could not consent or was pressured into consenting. Non-contact abuse such as voyeurism, involvement in pornography.
- c) Psychological/Emotional Abuse: Examples include: verbal assault or intimidation, emotional abuse, deprivation of contact verbal abuse, threats of harm or abandonment, humiliation or blaming, overriding of consent, choices or wishes, felling worthless, frightened or unloved.
- d) NB: Psychological/emotional abuse will usually occur in conjunction with other forms of abuse
- e) Financial Abuse: Examples include: theft, fraud, exploitation, and pressure in connections with wills, property, possessions or benefits.
- f) Neglect or acts of omission: Examples include: ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.
- g) Discriminatory Abuse: This abuse is usually motivated by discriminatory and oppressive attitudes towards race gender, culture background, religion physical and/ or sensory impairment, sexual orientation and age.
- h) Organisational abuse, neglect and poor practice: This may take the form of isolated incidents of poor or unsatisfactory professional practice at one end of the spectrum, through to persuasive ill treatment or gross misconduct.

- i) Self-neglect: has been recognised within the Care Act 2014 as part of the safeguarding framework.
- 2.3.2 In 2013, the Home Office announced changes to the definition of Domestic Abuse to include safeguarding work where there are concerns of domestic abuse within a person home.
- 2.3.3 Prevent is part of the government's counter terrorist strategy, aiming to stop people becoming terrorists or supporting terrorism. CHF staff need to be aware of safeguarding adults from radicalisation.
- 2.3.4 Modern Slavery exists in the UK and includes exploitation in the sex industry, forced labour, domestic servitude in the home and forced criminal activity. CHF staff need to be aware of the potential indicators.
- 2.3.5 Honour based abuse is defined as an incident or crime involving violence, threats of violence, intimidation coercion or abuse (including psychological, physical, sexual, financial or emotional abuse) which has or may have been committed to protect or defend the honour of an individual, family and/ or community for alleged or perceived breaches of the family and/or community's code of behaviour.

3. KEY PROCEDURES - NATIONAL GUIDANCE

- 3.1 CHF follows national and local guidelines. In regard to adults, CHF works within the guidance of the Sussex Safeguarding Adults Policy and Procedure
<http://sussexsafeguardingadults.procedures.org.uk/>
- 3.2 The Care Act received Royal Assent on 14th May 2014 and for the first time placed Safeguarding on a statutory footing. The Care and Support Statutory Guidance to support the implementation of The Care Act was amended in 2020. The Care Act introduced major reforms to the legal framework for adult care and support and places specific duties onto local authorities which states they must:
 - a) Lead a multi-agency local adult safeguarding system that seeks to prevent abuse and neglect and stop it quickly when it happens
 - b) Make enquiries, or request others to make them, when they think an adult with care and support needs may be at risk of abuse or neglect and they need to find out what action may be needed
 - c) Establish Safeguarding Adults Boards, including the local authority, NHS and police, which will develop, share and implement a joint safeguarding strategy
 - d) Carry out Safeguarding Adults Reviews when someone with care and support needs dies as a result of neglect or abuse and there is a concern that the local authority or its partners could have done more to protect them
 - e) Arrange for an independent advocate to represent and support a person who is the subject of a safeguarding enquiry or review, if required.

<https://www.gov.uk/government/publications/care-act-2014-part-1-factsheets/care-act-factsheets#factsheet-7-protecting-adults-from-abuse-or-neglect>

4. KEY PROCEDURES – ADULTS

- 4.1 Anybody can raise a safeguarding concern for themselves or another person. Even where an issue may not appear to be described as abuse or neglect, it is important that anyone concerned should seek advice and support. This information must be shared with Adult Social Care. **It is important to remember that there may be concerns that have been identified or raised by others of which you may not be aware. Passing on your concerns can enable serious abuse or harm to be prevented from happening or from continuing.**
- 4.2 In the first instance, if there is an emergency situation then the appropriate services (Police, Ambulance) should be contacted and the person being supported should be made as safe as possible.
- 4.3 CHF also has internal procedures to support adult safeguarding. All staff are trained to know that any concerns should be raised with a member of the CHF Safeguarding team - posters giving the Safeguarding Team photos and their contact details are displayed throughout CHF. These posters also include information on Whistleblowing for staff who feel they cannot raise or discuss their concerns with a CHF Manager or one of the Safeguarding Team. This information gives contact information for East Sussex Duty and Assessment Team (0345 60 80 191); and for out of hours contact, the Emergency Duty Service for East Sussex and Brighton and Hove (01273 295 555).
- 4.3 In **ALL** adult safeguarding concerns, East Sussex Adult Social Care **must** be contacted. The local authority has a duty to undertake an enquiry to ascertain if the concern meets three basic checks:
- a) an adult who has needs for care and support (whether or not any of those needs are being met);
 - b) may be experiencing, or at risk of, abuse or neglect; and
 - c) as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of, abuse or neglect.
- 4.4 If the concern meets the basic checks, the local authority's duty to undertake an enquiry under Section 42 of the Care Act is triggered. An Enquiry Manager will be appointed who will have overall responsibility for co-ordinating responses and decision making. The local authority may decide to ask CHF to carry out an investigation, but this should only happen once requested, and not before adult social care is contacted. The outcome of any CHF investigation will be returned to adult social care so that the appointed Enquiry Manager can conclude the case.
- 4.5 As with the Part 1 of this policy (Child Protection) a Sharing Information Pro-Forma will be used for any concern raised, to ensure key safeguarding staff are always promptly informed of any safeguarding concerns, across both CHF and CCS. (APPENDIX 1 – all appendices saved with 'Safeguarding Policy - Part One – Child Protection')
- 4.6 All adults have a legal right to make decisions about their own lives. If the person raising the safeguarding concern is not the adult themselves, every possible effort should be made to seek their views and agreement, **unless** doing so it likely to increase the risk of harm to themselves or others
- 4.7 Wherever possible there should be communication with the adult to establish their views, taking the following into consideration:
- a) Choose a private space where the adult is likely to feel secure.
 - b) If the adult has raised the concern, use open questions e.g. 'tell, explain, describe' to gain an understanding of the concern. Do not ask leading questions or begin to investigate.

- c) If someone else has raised a concern, inform them sensitively and note their response.
 - d) In all cases, attempt to get the adult's views on what they want done about the concern.
 - e) Give the adult information about advice and support, and about the safeguarding procedures and how these will make them safer.
 - f) Identify any relevant capacity issues the adult may have, including the potential need for support from an advocate.
 - g) Explain what will happen next, and how they will be supported and kept informed.
 - h) In all cases, make notes of the information given in a factual way and date and time this appropriately.
- 4.8 If a safeguarding concern is raised in connection to an adult who is deemed not to have capacity, the principles of the Mental Capacity Act 2005 must be followed. All staff must receive relevant training in regard to the Mental Capacity Act.
- 4.9 If an adult who lacks capacity to make an informed decision about a safeguarding incident does not want a concern to be raised, a Best Interest decision, in line with the Mental Capacity Act, will need to be instigated.
- 4.10 If an adult **with** capacity does not want action to be taken in regard to a safeguarding concern, this does not override a staff member's responsibility to share key information with relevant professionals. If there appears to be significant risk to the adult, sharing this information will be a duty of care. In such circumstances, the adult must always be advised what information will be shared with whom, and the reasons for this. They must be reassured that their views and wishes will be respected as much as possible, and kept up to date with any discussions and actions.