

# Safeguarding Adults Policy and Procedures

## Policy Statement

Harlequin Care is committed to the protection and safety of any adults with care and support needs that we work with. We recognise that all such adults have the right to freedom from abuse. We maintain rigorous procedures for the protection of adults with care and support needs and expect all staff, volunteers or those employed by Harlequin Care on a contract basis to take responsibility for following these procedures and complying with national and local authority Safeguarding Adults Board procedure and guidelines. Harlequin Care Designated Safeguarding Trustee will undertake regular compliance audits by completing the Safeguarding Checklist on an annual basis and to report back to the Designated Safeguarding Lead (DSL) and other Trustees to ensure that the charity is meeting all safeguarding requirements.

## Definition of Adult with Care and Support Needs

*Care and Support Statutory Guidance* (2020 updated June 2022,) covers safeguarding adults in [Chapter 14](#).

The Social Care Institute for Excellence notes that 'Adult with care and support needs' is a term that covers a wide range of people, from those with a learning disability to those experiencing dementia - and may also include adults whose mental capacity fluctuates, such as those with mental health or substance misuse difficulties. This is in line with the terminology used in *Care and Support Statutory Guidance (CSSG)*.

The CSSG 2020 defines adult safeguarding as protecting an adult's right to live in safety, free from abuse and neglect. The safeguarding duties apply to an adult (person who is aged 18 or over) who:

- has needs for care and support (whether or not the local authority is meeting any of those needs)
- is experiencing, or at risk of, abuse or neglect
- 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

Harlequin Care works directly with adults at risk and vulnerable adults.

## Aims of Adult Safeguarding

The aims of adult safeguarding are to:

- prevent harm and reduce the risk of abuse or neglect to adults with care and support needs
- stop abuse or neglect wherever possible
- safeguard adults in a way that supports them in making choices and having control about how they want to live
- promote an approach that concentrates on improving life for the adults concerned
- raise public awareness so that communities as a whole, alongside professionals, play their part in preventing, identifying and responding to abuse and neglect
- 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 wellbeing of an adult
- address what has caused the abuse or neglect

Please see **Appendix A** of this document for definitions of abuse and neglect.

## Six key principles underpinning all adult safeguarding work

The CSSG sets out 6 principles that apply to all sectors and settings and underpin all adult safeguarding:

1. **Empowerment:** People being supported and encouraged to make their own decisions and informed consent.
2. **Prevention:** It is better to take action before harm occurs.
3. **Proportionality:** Taking the least intrusive response appropriate to the risk presented.
4. **Protection:** Support and representation for those in greatest need.
5. **Partnership:** Use local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.
6. **Accountability:** There is accountability and transparency in delivering safeguarding.

## Making safeguarding personal

Making safeguarding personal means it should be person-led and outcome-focused. It engages the person in a conversation about how best to respond to their safeguarding situation in a way that enhances involvement, choice and control as well as improving quality of life, wellbeing and safety.

## **What steps will Harlequin Care take to Safeguard Adults?**

Trustees and senior members of the organisation are required to:

- Ensure that volunteers accept responsibility for helping to prevent abuse of adults with care and support needs who access our services. A copy of this policy and procedures is given to all staff and others working or volunteering for Harlequin Care during their induction. They must send an email to the Safeguarding Trustee to confirm they have read and understood this policy.
- Ensure all staff undertake appropriate safeguarding training and refresher training.
- Ensure that this policy is adhered to.
- Ensure all staff are subject to checks via the Disclosure and Barring Service and volunteers without a DBS will not work unsupervised.
- Ensure that staff and volunteers are aware of how to recognise signs of abuse.
- Recognise that special care is needed in dealing with carers whose age, inexperience, level of social understanding, or physical state puts them at risk of abuse.
- Notify appropriate authorities in cases where an incident needs to be reported to other regulators such as the Disclosure and Barring Service.
- Notify the Charity Commission promptly if any serious, actual or alleged safeguarding issues have occurred (role of the Safeguarding Trustee/Director and DSL).

When supporting carers and safeguarding adults we will:

- Ensure all information, advice and resources are presented to them in a manner that they can access, and that takes account of any difficulties they may have
- Check that they have understood the information, advice or resources we have given them. If they are unable to understand or we have concerns over their understanding, we will ensure another adult who is involved in their care also has access to the information, advice or resources (with the consent of the adult with care and support needs, within the guidelines of our data protection policy).
- In Harlequin Care group sessions, we will actively promote an inclusive and positive environment and Harlequin Care facilitators will ensure that adult safeguarding is central to the provision and accessibility of our service.

## **What will Harlequin Care do if there is a concern about an adult with care and support needs?**

It is not the responsibility of anyone working for Harlequin Care to decide whether or not abuse of an adult with care and support needs has taken place. However, there is a responsibility to act on any concerns they may have through contact with the appropriate authority. The procedure to follow if any staff member or volunteer has any concerns about adult safeguarding is set out in **Appendix B**. If it is appropriate for a concern to be raised with the appropriate authority then the following contact details should be used.

For all Harlequin Care services, if you have reason to believe an adult may be at risk of suffering abuse or neglect you should contact the Designated Person for Safeguarding. The Designated Person for Harlequin Care is **Sarah Slade on 07949 155919**

If no one is available you should decide whether to take further action because there is a risk of immediate, significant harm and report it yourself to Adult Social Care and inform the Nominated Safeguarding Officer.

#### Dorset Safeguarding Adults Board

Email: <https://www.dorsetcouncil.gov.uk/w/dorset-safeguarding-adults-board>

Telephone: 01305 221016

If they are not available, contact Dorset County Council Adult Care Services by calling the out of hours on **01305 855250**.

#### **Mental health support**

If your or someone else's life is in danger, call 999 immediately.

If you are worried about someone else, there are several places you can go to get support:

- Call Samaritans on 116 123
- Call NHS Connection, Dorset's mental health helpline, on 0800 652 0190
- Text SHOUT to 85258

If there is an immediate risk to life or a serious injury or a serious crime has been committed the police must be contacted direct as set out below:

- **Immediate response:** For incidents concerning an adult where there is immediate danger to life, risk of injury or a crime being committed dial 999.
- **High;** For incidents taking place against an adult where there is NO immediate risk to life or property but a police response is required as soon as practicable due to the seriousness of the incident and/or potential loss of evidence dial 101.
- **Routine:** For incidents that have taken place against an adult where that person wishes to report a crime please dial 101 and specify that a crime has been committed and that person wishes to make a complaint of crime.

#### **Who will investigate?**

In Dorset it is the responsibility of Adult Care Social Services and (as part of their delegated social care duties) to investigate allegations of possible or actual abuse.

Dorset Constabulary has the lead responsibility for investigating any criminal offences committed against adults with care and support needs. A dedicated team of officers and staff specialise in safeguarding adults from abuse (SAFA). The SAFA investigation team

deal with allegations of crime committed against an adult at risk by a person in a position of trust or someone with a responsibility of care – this includes family members.

## **Policy Awareness**

We ensure that carers are aware of our Safeguarding Adults Policy by displaying it on our website. We remind carers at every session that we follow our Safeguarding Adults Policy.

## **Confidentiality**

Though Harlequin Care has a duty to ensure confidentiality, it must be stressed that where abuse to adults with support needs is suspected, reported or concerns are raised, DSL must be notified. The vulnerable adult will have been made aware that staff cannot ignore issues around abuse and that steps will be taken to deal with them in as sensitive a manner as possible. Carers are asked to consent to an alert being made, where they have capacity to do so. Reasons for overriding consent, e.g that others may be at risk, or legal obligations must be explained to the carer. Given the duty to cooperate in the Care Act 2014, there are only a limited number of circumstances in which it would be acceptable not to share information pertinent to safeguarding with relevant multi-agency safeguarding partners. These would be where the person involved has the mental capacity to make the decision in question and does not want their information shared, and:

- ◆ Their 'vital interests' do not need to be protected.
- ◆ Nobody else is at risk.
- ◆ There is no wider public interest.
- ◆ No serious crime has been or may be committed.
- ◆ The alleged abuser has no care and support needs.
- ◆ No Harlequin Care staff are implicated.
- ◆ No coercion or duress is suspected.
- ◆ The risk is not high enough to warrant a referral to a Multi-Agency Risk Assessment Conference (MARAC)
- ◆ No other legal authority has requested the information. If there is continued reluctance from one partner to share information on a safeguarding concern, or in instances where an alerting organisation thinks that the local authority response is not sufficient, then the matter should be referred to the Safeguarding Adults Board (SAB). The SAB should discuss the issue, including the organisation's stated reasons for not sharing the information. The SAB will decide what course of action to take. The SAB can also consider whether the concern warrants a request, under Clause 45 of the Care Act 2014, for the 'supply of information'. The person who raises concerns or suspects abuse must discuss the concern confidentially with their DSL. The facts should be checked and the person who is the subject of the concerns should be made aware of the process. The following information must be obtained when abuse is suspected: ◆ The adult's name and age ◆ Where they live and with whom ◆ Which organisations are providing them with help or services ◆ Why you are concerned ◆ Details of the person(s) who may be abusing the vulnerable adult. The DSL will then contact social

services or the police if the abuse is violent or a vulnerable adult is in immediate physical danger. A list of contact names and numbers are at the end of this document. Records of all reports of concerns or incidents will be kept in a confidential file.

### **What happens next**

All cases of possible abuse are treated very seriously. Social services will arrange for a team manager to investigate the case. The team manager will talk to other people and organisations, including the police and should make a decision about how to proceed within 24 hours. They will decide if no further action is needed or arrange a meeting for organisations involved with the adult. This meeting will share information and agree how to proceed. The team manager will make sure any action agreed at the meeting and any follow meetings take place. Actions might include taking immediate action to protect the adult, interview the person and other people, deciding how to support the adult; decisions about possible criminal investigation or disciplinary action and producing a protection plan to make sure the adult stays safe.

## **Appendix A: Types of abuse and neglect**

### **What is Abuse and neglect?**

Abuse is a violation of an individual's human and civil rights by another person or persons. It may be systematic and repeated or may consist of a single incident. Abuse is when a person or persons have caused harm, or may be likely to do so, to the physical, sexual, emotional, financial or material wellbeing of an adult with care and support needs. Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it.

The Care Act 2014 and the Care and Support Statutory Guidance 2020 define the categories of abuse and neglect. The main forms set out in the Statutory Guidance chapter 14 are not an exhaustive list but an illustrative guide to the sort of behaviour which could give rise to a safeguarding concern:

- **physical abuse** – including assault, hitting, slapping, pushing, misuse of medication, restraint, inappropriate physical sanctions
- **domestic violence** – including psychological, physical, sexual, financial, emotional abuse; so-called 'honour' based violence
- **sexual abuse** - including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure, sexual assault, sexual acts to which the adult has not consented or was pressured into consenting
- **psychological abuse** - including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling,

intimidation, coercion, harassment, verbal abuse, cyber abuse, isolation or unreasonable and unjustified withdrawal of services or supportive networks

- **financial or material abuse** - including theft, fraud, internet scamming, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits
- **modern slavery** – encompasses slavery, human trafficking, forced labour and domestic servitude, traffickers and slave masters using whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.
- **discriminatory abuse** – including harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion.
- **organisational abuse** - including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice because of the structure, policies, processes and practices within an organisation.
- **neglect and acts of omission** - including ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.
- **self-neglect** – a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding.
- **Domestic abuse** – The cross-government definition of domestic violence and abuse is: any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality.

## Recognising abuse

Incidents of abuse may be one-off or multiple and affect one person or more. Professionals and others should look beyond single incidents or individuals to identify patterns of harm. Repeated instances of poor care may be an indication of more serious problems and of what we now describe as organisational abuse. To see these patterns, it is important that information is recorded and appropriately shared.

Patterns of abuse vary and include:

- serial abuse, in which the perpetrator seeks out and ‘grooms’ individuals. Sexual abuse sometimes falls into this pattern as do some forms of financial abuse.
- long-term abuse, in the context of an ongoing family relationship such as domestic violence between spouses or generations or persistent psychological abuse.
- opportunistic abuse, such as theft occurring because money or jewellery has been left lying around.

### **Who may be the abuser?**

Anyone can perpetrate abuse or neglect, including spouses/partners, other family members, neighbours, friends, acquaintances, local residents, people who deliberately exploit adults they perceive as vulnerable to abuse, paid staff or professionals and volunteers, strangers.

### **Where does abuse occur?**

Abuse can happen anywhere: for example, in someone’s own home, in a public place, in hospital, in a care home or in college. It can take place when an adult lives alone or with others.

## **Appendix B: Procedure to follow if there is a possible adult safeguarding concern**

Anyone can witness or become aware of information suggesting that abuse and neglect is occurring. Regardless of how the safeguarding concern is identified, everyone should understand what to do, and where to go locally to get help and advice.

The Dorset Safeguarding adults procedure gives specific guidance to support the seven stages of a safeguarding enquiry. Harlequin Care staff and volunteers will only be directly involved in the first two stages of guidance. A full copy of the Dorset Safeguarding adults at risk procedure can be found at:

<https://www.dorsetcouncil.gov.uk/care-and-support-for-adults/dorset-safeguarding-adults-board/dorset-safeguarding-adults-board>

### **Stage one: having a concern**

***(This part of the procedure applies to all Harlequin Care staff and volunteers)***



## **Responding to an adult with care and support needs who is making a disclosure**

- assure them that you are taking them seriously
- listen carefully to what they are telling you, stay calm, get as clear a picture as you can, but avoid asking too many questions at this stage
- do not give promises of complete confidentiality
- ask the person what they would like to happen
- explain that you have a duty to tell your DSL or other designated person within the organisation, and that the information may need to be shared with others who could have a part to play in protecting them
- reassure them that they will be involved in decisions about what will happen
- explain that you will try to take steps to protect them from further abuse or neglect
- provide support and information in a way that is most appropriate to them
- do not be judgemental or jump to conclusions
- report the concern to your DSL in line with your safeguarding procedures • make a record of the concern and action taken (see below).

## **Making a record**

It is vital that a written record of any incident or allegation is made as soon as possible after the information is obtained. This record must include:

- date and time of the incident
- exactly what the adult at risk said, using their own words (their account) about the abuse and how it occurred or exactly what has been reported to you • appearance and behaviour of the adult at risk • any injuries observed.

The record should be factual. However, if the record does contain opinion or assessment, it should be clearly stated as such and be backed up by factual evidence. Information from another person should be clearly attributed to them.

This information should then be shared immediately with the Designated Person:

**Sarah Slade**

**Mobile number: 07949 155919**

**Emergency contact number: 07949 155919**

If they are not available the staff member/volunteer should contact:

**Dorset Adult Social Services: 0300 123 4042**

If you have reason to believe an adult receiving mental health services in Dorset or who has an urgent mental health problem may be at risk of suffering abuse or neglect then a safeguarding referral can be made to:

**Partnership University NHS Foundation Trust (HPFT) on 0800 6444 101 (between 8am and 5pm) 01438 843322 or (between 8am and 5pm)**

The member of Harlequin Care Trustee Board with responsibility for Safeguarding is:

**Sandra Wayman**

**Email : sandra.wayman@btinternet.com**

**Mobile : 07540 401351**

Any action taken should be shared with the DSL as soon as is possible. Any safeguarding matter affecting the Charity should be brought to the attention of the Safeguarding Trustee.

### **Stage two: raising a concern.**

***(This part of the procedure applies to Harlequin Care Designated Safeguarding Lead)***

#### **Speaking to the adult with care and support needs about the concern**

It may be appropriate for the manager to speak to the adult about a safeguarding concern that has been raised. To do this, the manager should consider:

- getting their views on what has happened and what they want done about it.
- giving information about the safeguarding adults process and how that could help to make them safer.
- explaining how they will be kept informed.
- identifying communication needs, personal care arrangements and access requests
- discussing what could be done to ensure their safety.

#### **Speaking to the person alleged to have caused harm**

The safeguarding concern should not be discussed with the person alleged to have caused harm, unless the immediate welfare of the adult with care and support needs makes this unavoidable. However, if they are a member of staff and an immediate decision has to be made to suspend them, the person has a right to know in broad terms what allegations or concerns have been made about them.

#### **Allegations against a member of staff or volunteer**

As well as deciding whether or not to refer the issue for an investigation under the safeguarding adults procedures the DSL must also decide whether to follow other relevant organisational reporting procedures. Where a concern indicates that a member of staff or volunteer may have caused harm, referral to the organisation's disciplinary procedures should also be considered. However, any interviews with the adult with care and support needs, the person who may have caused harm or witnesses should be agreed as part of the strategy discussion, particularly where there may be a criminal investigation. While the investigating team or the police may suggest a member of staff/volunteer is removed from working with an adult who is at risk of abuse, it is the responsibility of Harlequin Care to address this and take any subsequent action.

## **Factors to consider when raising a concern**

The following should be considered:

- the mental capacity of an adult with care and support needs to make decisions about their own safety. Remember to assume capacity unless there is evidence to the contrary (capacity can be undermined by the experience of abuse and where the person is being exploited, coerced, groomed or subjected to undue influence or duress)
- the vulnerability of the adult with care and support needs
- the nature and extent of the abuse or neglect
- the impact on the individual
- the risk of repeated or increasingly serious acts involving the person causing the harm

## **Deciding whether or not to raise a concern**

A concern should be raised when:

- there is a concern that an adult with care and support needs is at risk of being abused or neglected, and are at risk of significant harm
- the adult with care and support needs has capacity to make decisions about their own safety and wants this to happen
- the adult with care and support needs has been assessed as not having capacity to make a decision about their own safety, but a decision has been made in their best interests to make a referral
- a crime has been or may have been committed against an adult with care and support needs without mental capacity to report a crime and a 'best interests' decision is made
- the abuse or neglect has been caused by a member of staff or a volunteer
- other people or children are at risk from the person causing the harm
- the concern is about organisational or systemic abuse
- the person causing the harm is also an adult with care and support needs

## **Making a decision not to raise a concern**

If the adult with care and support needs has capacity and does not consent to a concern being raised and there are no public or vital interest considerations, they should be given information about where to get help if they change their mind or if the abuse or neglect continues and they subsequently want support to promote their safety. Harlequin Care must be clear that the decision to withhold consent is not made under undue influence, coercion or intimidation. A record must be made of the concern, the adult's decision and of the decision not to refer, with reasons. A record should also be made of what information they were given. It is recommended that organisations have a separate part of the adult's file or record that is clearly labelled 'safeguarding'.

## **Making a decision to raise a concern without consent**

Where there is an overriding public interest or vital interest, or if gaining consent would put the adult at further risk, a concern must be raised but the lack of consent and the reason for it must be explicit. This includes situations where:

- other people or children could be at risk from the person causing harm
- it is necessary to prevent crime
- there is a high risk to the health and safety of the adult with care and support needs
- the person lacks capacity to consent

The adult with care and support needs would normally be informed of the decision to refer and the reasons, unless telling them would jeopardise their safety or the safety of others. If the adult is assessed as not having mental capacity to make decisions about their own safety and to consent to a referral being made, the DSL must make a decision in their best interests in accordance with the guidance set out in the Mental Capacity Act 2005.

**Sign Off on Policy**

**Name:**

**Position:**

**Signed:**

**Dated:**

**We are committed to reviewing our policy and good practice guidelines annually.**

The policy was last reviewed on:

.....(Date)