



**APRIL COMPLETE CARE SOLUTIONS LTD
(The “Company”)**

Safeguarding of Vulnerable Adults Policy

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1: Policy and Statutory Framework

Scope

This policy deals with the Safeguarding of Vulnerable Adults (as defined below). A separate policy covers Child Safeguarding (under 18s). Complaints unrelated to abuse must be made through April's Complaints Procedure. Criminal Records Bureau check requirements for staff are governed by separate guidance.

The provisions in this policy are linked to the In Safe Hands Guidelines and 2004 Inter-Agency Policy and Procedures for Responding to Alleged Abuse and Inappropriate Care of Vulnerable Adults in South Wales. These can be accessed via the Adult Safeguarding Website; www.swapforum.org.uk

Policy Statement

- April holds as one of its highest priorities the health, safety and welfare of all vulnerable adults which come under the responsibility of April.
- April has a duty to ensure that staff fulfil their responsibilities to prevent abuse of vulnerable adults and to report any abuse discovered or suspected.
- April will advise all service user's, their representatives and staff of the existence of April's Safeguarding of Vulnerable Adults Policy and Procedure, and the fact that this may require cases to be referred to investigative agencies in the interests of the vulnerable adult.
- April will work with appropriate local agencies, and in particular Local Authorities' Social Services Departments, to ensure that vulnerable adults are safeguarded through the effective operation of April's procedure.
- April recognises that any vulnerable adult can be subject to abuse and all allegations of abuse will be taken seriously and treated in accordance with April's procedure.
- April recognises that it is the responsibility of all staff to act upon any concern no matter how small or trivial it may seem.
- April recognises its responsibility to implement, maintain and regularly review the procedures that are designed to prevent or notify suspected abuse.
- April is committed to supporting, resourcing and training those who work with, or who come into contact with, vulnerable adults and to providing appropriate supervision.
- April will provide additional supervision measures, in response to individual needs, as identified by risk assessments.

Statutory Framework

The Police Act 1997 Disclosure & Barring Service require employers to carry out DBS Checks before employees are allowed to come into contact with vulnerable adults. April is required under this legislation to apply for an enhanced disclosure from the Criminal Records Bureau where staff are identified as working with such vulnerable adults. A vulnerable adult is defined (under the Safeguarding of Vulnerable Adults Regulations 2002) as:

'a person aged 18 or over who is receiving services of a type listed in paragraph (2) below and in consequence of a condition of a type listed in paragraph (3) below has a disability of a type listed in paragraph (4) below.

(2) The services are –

- (a) accommodation and nursing or personal care in a care home;*
- (b) personal care or nursing or support to live independently in his own home;*
- (c) any services provided by an independent hospital, independent clinic, independent medical agency or National Health Service body;*
- (d) social care services; or*
- (e) any services provided in an establishment catering for a person with learning difficulties.*

(3) The conditions are –

- (a) a learning or physical disability;*
- (b) a physical or mental illness, chronic or otherwise, including an addiction to alcohol or drugs; or*
- (c) a reduction in physical or mental capacity.*

(4) The disabilities are –

- (a) a dependency upon others in the performance of, or a requirement for assistance in the performance of, basic physical functions;*
- (b) severe impairment in the ability to communicate with others; or*
- (c) impairment in a person's ability to protect himself from assault, abuse or neglect.'*

The Inter-agency policy and procedures referred to above define a vulnerable adult as follows: 'A person who is 18 years of age or over and who is or may be in need of community care services by reason of mental or other disability, age or illness and who is or may be unable to take care of him/herself; or is unable to take care of him/herself, or unable to protect him/herself against significant harm or serious exploitation''

The procedures offer further guidance on what constitutes significant harm:

“ill treatment including sexual abuse and forms of ill treatment that are not physical); the impairment of physical, emotional, social and or behavioural development

The seriousness and extent of abuse are not always clear when a concern is first raised and factors to consider are:

- *The frailty or vulnerability of the person involved.*
- *The nature and extent of the abuse.*
- *The length of time or frequency of the abuse.*
- *The impact on the vulnerable adult*
- *The risk of repeated or escalating acts.*

The guidelines define abuse as follows:

- Physical abuse (includes hitting, slapping, pushing, kicking, misuse of medication, undue restraint or inappropriate sanctions).
- Sexual abuse (includes rape and sexual assault or sexual acts to which the vulnerable adult has not or could not consent and/or was pressured into consenting)
- Psychological abuse (includes threats of harm or abandonment, humiliation, verbal or racial abuse, isolation or withdrawal from services or supportive networks)
- Financial abuse (includes theft, fraud, pressure around wills, property or inheritance, misuse or misappropriation of benefits)
- Neglect and or acts of omission (includes failure to access medical care or services, negligence in the face of risk taking, failure to give prescribed medication, poor nutrition or lack of heating)
- Institutional abuse (this can take place within both residential or community settings and relates to standards of care and practice)
- Racial and homophobic abuse (whilst not classed as an individual category of abuse these need to be noted in situations where the victim perceives abuse to have been racist or homophobic in its intent)
- Domestic abuse where the community care criteria apply.
- Self neglect/harm – where there is a lack of mental capacity

Vulnerable adults include:

People with learning disabilities, mental health problems, older people and disabled people may fall within this definition, particularly when their situation is complicated by additional factors such as:

- Physical frailty
- Chronic illness
- Sensory impairment
- Challenging behaviour
- Social problems
- Emotional problems
- Poverty
- Homelessness
- Substance abuse

April will keep its policy and procedures on safeguarding of vulnerable adults under review to take account of any new Government legislation, regulations or best practice documents to ensure that staff are kept fully up to date with their responsibilities and duties with regard to the safety and well-being of vulnerable adults.

2: Procedures

The purpose of these guidelines is to ensure that the rights of vulnerable adults are protected.

Health and Safety considerations are addressed as part of this process, with reasonable adjustments being made where appropriate.

Members of staff who will be engaging with the vulnerable adult on a regular basis are made aware of relevant issues.

Training on compliance with statutory and local requirements relating to the reporting of concerns will be offered through April's Staff Development programme for all staff.

Procedural steps (Guidelines replicated from Inter-Agency Policy and Procedures for Responding to Alleged Abuse and Inappropriate Care of Vulnerable Adults in South Wales (2004))

Where a disclosure of alleged abuse is made the member of staff receiving the allegations should:

Ensure the individual understands that confidentiality cannot be guaranteed where there is a risk of another individual being abused and that if there is a risk of others being abused, April has a legal obligation to report instances of alleged abuse to the Social Services Department SoVA team;

Explain that the number of people involved will be kept to a minimum, that information will be disclosed on a need to know basis and that the person reporting will always be kept informed of action taken;

Make it clear to the person reporting the abuse that if the allegation should result in a criminal prosecution, then nothing that the victim or witnesses say can remain confidential;

In the case of a vulnerable adult reporting apparent abuse, listen carefully to him/her, using the adjacent guidelines:

Take accurate notes of:

- dates
- times
- facts
- observations
- Date and names of those present at the meeting must also be recorded

Additionally:

- Ensure immediate medical attention if necessary.
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- Avoid making comments other than expressing understanding
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- Listen patiently and carefully and stay calm
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- Where relevant be careful not to destroy evidence
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- Do not question or interview the person, or ask them to repeat the account, as this may lead to confusion and may jeopardise later proceedings;

If you do need to ask for clarification you should ask questions such as. “What happened here”, “how did this happen” etc. rather than “who did this”.

Advise the person that you will take the next steps in the SOVA policy

Immediately inform the relevant designated Manager.

Always remember – never delay in reporting your concerns, to ensure that a proper investigation takes place. Do not worry about being mistaken. It is better to have discussed your concerns with somebody who has the experience and responsibility to make an informed assessment and take positive action

At the end of the discussion, *if there appears to be a risk of others being abused*, the matter *must be passed to the Designated Manager*. The designated manager **MUST** then contact the appropriate Local Authority Social Services Department.

If there does not appear to be a risk to others, when considering issues of confidentiality it is important to bear in mind that personal information can be disclosed only **with the individual’s consent, or where there is an overriding public interest or justification for doing so**.

In determining whether an individual has capacity to give informed consent, the following factors should be considered:

Mental capacity is a legal concept. It is the ability at that point in time to understand, retain and use the information required to make an informed decision on a specific issue and understand the consequences. It is also necessary to be able to communicate this decision.

Adults are presumed to have mental capacity until it has been assessed they do not.

All reasonable steps must be taken to help the adult to make those decisions which they are able to.

This includes being creative in the way in which information is given to the adult in an accessible form.

An adult must not be treated as being unable to make a decision just because they make an unwise choice. Lack of mental capacity will be decided using the assessment as defined by the Mental Capacity Act 2005. Thorough multi-disciplinary assessments should set out the reasons upon which their judgement is based. They should address carers’ views of the adult’s mental capacity.

Where it appears that an offence has been committed against a vulnerable adult who does not have the mental capacity to make an informed choice, the Designated Person must make a referral to Social Services.

In determining whether there is an overriding justification for disclosing despite the objection of a vulnerable adult who has the mental capacity to make an informed consent, this must be for one of the following reasons:

- Prevention or Detection of Crime, or
- The Public Interest
- The vital interests of an individual

The decision regarding whether to disclose and the reasons for reaching the decision must be recorded in writing.

The Designated Manager will be responsible for recording essential information about each case and for collecting reports and notes as appropriate. Any detailed information about an allegation will be confined to those employees involved, relevant managers and Designated Persons (where necessary) and (if not involved in the allegations), with the consent of the person concerned. The Designated Person will be responsible for referral to external agencies, at the earliest practicable opportunity.

The staff reporting the allegations will be kept informed of the progress of the case on a 'need to know' basis.

3. Allegations of abuse against a member of staff

There are occasions when a vulnerable adult may accuse members of staff of abuse. In such cases, the member of staff receiving the allegation should inform the Designated Manager, who will immediately make a referral to Social Services. The Manager will liaise with Social Services regarding appropriate action, including possible police involvement, prior to initiating any internal investigation/action.

NB – This must not delay the process or any referral to Social Services.

This role will be fulfilled by the Registered Manager, who will be responsible for:

- Overseeing any referral is made to the relevant authorities;
- Ensuring a proper record of any referral, complaint or concern (even where this does not lead to a referral);
- Ensuring that all staff undertake training at the appropriate level on a regular basis;

The Manager is trained to follow internal procedures involved in reporting abuse and to observe legal requirements.

4. The Role of the Manager

- To provide support to staff potentially involved in the operation of the policy by:
 - Ensuring training needs are established and in service training needs of staff are notified to the Registered Manager;
 - Ensuring all staff know who the Designated Manager is;
Ensuring that all staff know that concerns about abuse or possible abuse
 - are to be brought to the Designated Manager or in his/her absence to the Registered Manager;
- a) To discuss the situation with the appropriate Local Authority including advice and discussion regarding whether a formal referral for the safeguarding of vulnerable adults is required.
- b) To act as the contact for agencies needing to contact the Agency about safeguarding of vulnerable adults matters;
- c) To identify the need for support that any employee may have when subject of/involvement in allegations of abuse and liaising with the Registered Manager to ensure that the employee is aware of support mechanisms available;
- d) To maintain confidential records of all action taken in respect of any case involving allegations of abuse;

If the Designated Manager is the subject of an allegation, the staff member informed of/identifying the alleged abuse must refer to the Registered Manager, who will fulfil the role of the Designated Manager. If no Designated Manager can be contacted, a direct referral must be made to the appropriate Local Authority Social Services Department.

Where a member of staff reporting alleged abuse is concerned that insufficient/inappropriate action has been taken in respect of an allegation, reference should be made to April's Whistle Blowing Code of Practice.

5. Dissatisfaction with investigation/way in which complaint was handled

If any person wishes to complain about the way in which the matter was handled, they may make a complaint under the Complaints procedure, or issue a grievance under the Grievance Procedure.

6. Confidentiality

Confidentiality and trust should be maintained, subject to the legal duty to make a referral. Staff must act on the basis that the safety of the vulnerable adult is the overriding concern. The vulnerable adult should be informed at the earliest possible stage of the disclosure that the information will be passed on. All conversation regarding a vulnerable adult should always be held in private.

Whatever happens, staff should always be open and honest with the vulnerable adult if they intend to take the case further.

If staff have any concerns about the progress of the case or have any other concerns these should be discussed with the Designated Manager, although they always retain the right to consult trade union or legal advisors, subject to relevant Data Safeguarding legislation regarding the privacy of others.

7. Advocates

A vulnerable adult or their carer may request that the vulnerable adult is supported by an advocate during any investigation. This will be arranged in consultation with Social Services and the Police, if appropriate. Members of staff may request representation from recognised trade unions, friends, relatives or legal advisors.

CODE OF BEHAVIOUR RELATING TO THE SAFEGUARDING OF VULNERABLE ADULTS FOR APRIL STAFF

April recognises that it is not practical to provide definitive instructions that would apply to all situations at all times whereby staff come into contact with vulnerable adults and to guarantee the safeguarding of both vulnerable adults and staff.

However, below are the standards of behaviour required of staff in order to fulfil their roles within April. This code should assist in the safeguarding of both vulnerable adults and members of staff.

These guidelines also apply to volunteers who work in an unpaid capacity in April premises.

Staff must:

Implement the Vulnerable Adult Safeguarding Policy and Procedures at all times

Staff should not:

- engage in rough, physical games including horseplay with vulnerable adults other than organised sporting activities that form part of the care plan;
- allow or engage in inappropriate touching of any kind;
- provide personal care including toileting, unless it forms part of the care plan, identifying need;
- physically restrain a vulnerable adult unless the restraint is to prevent physical injury of the vulnerable adult/other vulnerable adults/visitors or staff.
- **In all circumstances physical restraint must be appropriate and reasonable, otherwise the action can be defined as assault.**
- Engage in conduct that would be construed as bullying, discrimination or harassment within the meaning of the April Bullying and Harassment Policy;
- engage in a personal relationship with a vulnerable adult.

Implications for staff

Staff who breach any of the above conditions may be subject to disciplinary proceedings. If an allegation against a member of staff has occurred then following any Social Services or police investigation, if there is any allegation of misconduct, an investigation will be carried out in accordance with the staff disciplinary procedure for dealing with such allegations against staff; copies of this procedure are available from April's office. The investigating officer will be

required to liaise with the Designated Manager in the case to clarify if s/he has any relevant records relating to the allegation.

Social Services Health & Wellbeing Act 2014:

The Social Services and Well-being (Wales) Act received Royal Assent and became law on 1 May 2014. It came into force on 6 April 2016.

The Act provides the legal framework for improving the well-being of people who need care and support, and carers who need support, and for transforming social services in Wales. The Act changes the way people's needs are assessed and the way services are delivered- people will have more of a say in the care and support they receive.

It also promotes a range of help available within the community to reduce the need for formal, planned support.

- Services will be available to provide the right support at the right time
- More information and advice will be available
- Assessment will be simpler and proportionate
- Carers will have an equal right to be assessed for support
- There will be stronger powers to keep people safe from abuse and neglect.