Safe-Guarding Procedures

Recognising and responding to the abuse or neglect of adults with care and support needs:

The Thrive Project works with adults who may have support needs and therefore can often be vulnerable to abuse from others but could also be perpetrators of abuse associated with their lifestyle or personal situation also.

It is recognised that The Thrive Project is required to ensure the safety of everyone accessing or associated with the project and therefore expect all Volunteers and Service Users to be always vigilant, report concerns of abuse or neglect and promote a safe environment in which to do so.

This guidance covers how to recognise and what to do when you think:

- an adult with care and support needs is experiencing, or is at risk of, abuse and neglect ….
- and who, because of their care and support needs, is unable to protect themselves from abuse or neglect.

1. Recognising Abuse or Neglect - Definitions

1.1. Adults with care and support needs-

This describes adults aged 18 or over who need extra help to manage their lives and be independent. This may include:

- people with a learning disability or physical disability.
- people with mental health needs.
- people with sensory needs.
- people with cognitive needs, e.g. acquired brain injury.
- people who are experiencing short or long-term illness.

However, it is important to note that inclusion in one of the above groups does not necessarily mean that a person is implicitly unable to protect themselves from abuse or neglect.

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The Care Act guidance 2014 describes “care and support” as-

“The mixture of practical, financial and emotional support for adults who need extra help to manage their lives and be independent – including older people, people with a disability or long-term illness, people with mental health problems, and carers. Care and support include assessment of people’s needs, provision of services and the allocation of funds to enable a person to purchase their own care and support. It could include care home, home care, personal assistants, day services, or the provision of aids and adaptations.”

1.2. Abuse or neglect-

Defining abuse or neglect is complex and rests on many factors. The term “abuse” can be subject to wide interpretation. It may be physical, verbal or psychological, it may be an act of neglect or occur where a vulnerable person is persuaded to enter into a financial or sexual transaction to which they have not or cannot consent.

Abuse or neglect may be the result of deliberate intent, negligence or ignorance.

Exploitation can be a common theme in the experience of abuse or neglect. Whilst it is acknowledged that abuse or neglect can take different forms, the Care Act guidance identifies the following types of abuse or neglect:

- Physical abuse – including assault, hitting, slapping, pushing, misuse of medication, restraint or 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 and sexual assault or 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 bullying, 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 use 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 forms of 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 – this covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding.

2. Responding to abuse or neglect – What to do.

2.1 Address any immediate safety and protection needs.

- Make an immediate evaluation of the risk and take steps to ensure that the adult is in no immediate danger. Where appropriate, call 999 for emergency services if there is a medical emergency, other danger to life or risk of imminent injury, or if a crime is in progress.
- Inform the Manager or Team Leader on shift and ensure that they have all the information required to take over or help supervise and support you
- Summon urgent medical assistance from the GP, or other primary healthcare service if there is a concern about the adult's need for medical assistance or advice. You can call the NHS 111 service for urgent medical help or advice when it's not a life-threatening situation.
- Consider if there are other adults with care and support needs who are at risk of harm and take appropriate steps to safeguard them.
- Consider supporting and encouraging the adult to contact the Police if a crime

has been or may have been committed.

- Take steps to preserve any physical evidence if a crime may have been committed and preserve evidence through recording.

2.2. Dealing with disclosures.

The possibility of abuse can come to light in various ways, for example:

- an active disclosure of abuse by the adult.
- a passive disclosure of abuse where someone's attention is drawn to the symptoms of the abuse.
- a growing awareness that "something is not right".
- an allegation of abuse by a third party.
- a complaint or concern raised by an adult or a third party who doesn't perceive that it is abuse.

Good Practice Guide – Responding to Disclosures

It is often difficult to believe that abuse or neglect can occur. Remember, it may have taken a great amount of courage for the person to tell you that something has happened. They may fear the abuse could get worse if they tell, and fear of not being believed can also cause people not to tell.

- Accept what the person is saying – do not question the person or get them to justify what they are saying – reassure the person that you take what they have said seriously.
- Don't 'interview' the person; just listen calmly to what they are saying. If the person wants to give you lots of information, let them. Try to remember what the person is saying in their own words so that you can record it later.
- You can ask questions to establish the basic facts but try to avoid asking the same questions more than once or asking the person to repeat what they have said- this can make them feel they are not being believed.
- Don't promise the person that you'll keep what they tell you confidential or "secret".
- Explain that you will need to tell another person, but you'll only tell people who need to know so that they can help.

2.3. Speak to the adult who is experiencing, or is at risk of, abuse or neglect.

From the very first stages of concerns being identified, the views of the adult should be gained. This will enable the person to give their perspectives about the potential abuse or neglect concerns that have been raised, and what outcomes they would like to achieve.

These views should directly inform what happens next.

There will be occasions where speaking to the adult could put them at further or increased risk of harm. This could be, for example, due to retaliation, or a risk of fleeing or removal of the adult from the local area, or an increase in threatening or controlling behaviour if the person causing the risk of harm were to know that the adult had told someone about the abuse or neglect, or that someone else was aware of it.

The safety of the adult and the potential for increasing the risk should always be considered when planning to speak to the person. Any such situations where there is the potential for endangering safety or increasing risk should be assessed carefully and advice taken from your management, or from an external agency as appropriate.

2.4. When speaking to the adult -

- Speak to the adult in a private and safe place and inform them of the concerns. The person alleged to be the source of the risk should not be present in all but the most exceptional of circumstances.
- Get the adult's views on the concern and what they want done about it.
- Give the adult information about the adult safeguarding process and how that could help to make them safer.
- Explain confidentiality issues, how they will be kept informed and how they will be supported.
- Identify communication needs, personal care arrangements and access requests.
- Discuss what could be done to make them feel safer.

Good Practice Guide – Recording

As soon as possible on the same day, make a written record of what you have seen, been told or have concerns about. Try to make sure anyone else who saw or heard anything relating to the concern of abuse also makes a written report.

The report will need to include:

- when the disclosure was made, or when you were told about/witnessed this incident/s,
- who was involved, any other witnesses including service-users and other staff,
- exactly what happened or what you were told, person's own words, keeping it factual and not interpreting what you saw or were told,
- any other relevant information, e.g. previous incidents that have caused you concern.

Remember to:

- include as much detail as possible,
- make sure the written report is legible and is of a quality that can be photocopied,
- make sure you have printed your name on the report and that it is signed and dated,
- keep the report/s confidential, storing them in a safe and secure place until it will be needed.

Good Practice Guide – Preserving Physical Evidence

What to do?

In cases of physical or sexual abuse, contact the Police immediately. Ask their advice about what to do to preserve physical evidence.

As a guide-

- Where possible leave things as and where they are. If anything must be handled, keep this to an absolute minimum.
- Do not clean up. Do not touch anything you do not have to. Do not throw

anything away which could be evidence.

- Do not wash anything or in any way remove fibres, blood etc.
- Preserve the clothing and footwear of the victim.
- Preserve anything used to comfort or warm the victim, e.g. a blanket.
- Note in writing the state of the clothing of both the victim and alleged perpetrator. Note injuries in writing. As soon as possible, make full written notes on the conditions and attitudes of the people involved in the incident.
- Take steps to secure the room or area where the incident took place. Do not allow anyone to enter until the Police arrive.

In addition, in cases of sexual assault –

- Preserve bedding and clothing where appropriate, do not wash.
- Try not to have any personal or physical contact with either the victim or the alleged perpetrator.
- Offer reassurance and comfort as needed but be aware that anyone touching the victim or alleged perpetrator can cross contaminate evidence.

To report a Safeguarding Adult Concern Please Contact:

Torbay Safeguarding Adults Single Point of Contact Team (SPOC)

Phone: 01803 219888

Email: safeguarding.alertstct@nhs.net

All calls will be taken seriously and responded to in a timely manner.

The Torbay Safeguarding Adults Board firmly adopts a zero tolerance of adult abuse in Torbay and as such encourages all of those within the Torbay community to work in partnership to safeguard adults with care and support needs from abuse or neglect.