



ABBEYFIELD POLICY & PROCEDURE/GOOD PRACTICE GUIDELINES

Policy Ref:	LG031P	Effective date:	May 2016
Owner:	Abbeyfield Oxford	Next review date:	July 2019

Reviewed by Abbeyfield Oxford Board, May 2016:

TITLE	SAFEGUARDING ADULTS
1 Background	<p>This policy has been developed to safeguard residents and people who use Abbeyfield Oxford services from suffering any form of abuse or improper treatment. Abbeyfield Oxford has a zero tolerance approach to abuse and neglect and will ensure all staff and volunteers are clear about their duty to safeguard the people they support from abuse and neglect and know what actions to take if they suspect or witness any form of abuse or improper treatment.</p>
2 Objectives	<p>Abbeyfield Oxford residents and people who use Abbeyfield Oxford services have the right to live their lives free from any form of abuse or improper treatment and the aim of this policy is to ensure:</p> <ul style="list-style-type: none"> • Abbeyfield Oxford staff and volunteers work vigilantly to safeguard residents and people who use Abbeyfield Oxford services and to prevent any form of abuse or improper treatment. • Any concerns involving suspected or actual abuse or improper treatment of any resident or person using Abbeyfield Oxford services will be taken extremely seriously and will be dealt with in accordance with robust safeguarding procedures. • Abbeyfield Oxford complies with all relevant legislation and regulations and works in partnership with other relevant bodies and agencies in connection with all safeguarding matters.
3 Scope	<p>All established staff, agency staff and volunteers working for Abbeyfield Oxford.</p> <p>NB The following terms used throughout this policy should be understood as follows:</p> <ul style="list-style-type: none"> • Manager - Abbeyfield Oxford House Manager • Resident – all those who live in Abbeyfield Oxford accommodation and/or use Abbeyfield Oxford services • Staff – all those employed by Abbeyfield Oxford; volunteers; agency workers.

<p>4Policy 4.1</p>	<p>INTRODUCTION</p> <p>On 1st April 2015 the Care Act 2014 came into force and Sections 42 to 46 of the Act updated adult safeguarding in England. It introduced new adult safeguarding guidance which replaced “No Secrets” in its entirety.</p> <p>New safeguarding duties apply to an adult who:</p> <ul style="list-style-type: none">• Has need for care and support (whether or not the local authority is meeting any of those needs); and• Is experiencing, or at risk of, abuse or neglect; and• as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it. <p>The local authority must make (or cause to be made) whatever enquiries it thinks necessary to enable it to decide whether any action should be taken in the adult’s case and, if so, what and bywhom. This duty is detailed in Section 42 of the legislation hence it is referred to as a S42 Enquiry.</p> <p>The safeguarding duties have a legal effect in relation to organisations other than the local authority, on for example the NHS and the Police. All local authorities will update their multi-agency safeguarding arrangements to reflect these changes.</p> <p>Local authority statutory adult safeguarding duties apply equally to those adults with care and support needs regardless of whether those needs are being met, regardless of whether the adult lacks mental capacity or not, and regardless of setting.</p>
<p>4.2</p>	<p>THE CARE ACT 2014</p> <p>The changes introduced in April 2015 are fully detailed in the Department of Health Care and Support Statutory Guidance issued under the Care Act 2014. Chapter 14 covers Adult Safeguarding, which replaces previous guidance, and Abbeyfield Oxford’s safeguarding policies and procedures reflect this guidance.</p> <p>Adult safeguarding, what it is and why it matters</p> <p>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.</p> <p>Organisations should always promote the adult’s wellbeing in their</p>

safeguarding arrangements. People have complex lives and being safe is only one of the things they want for themselves. Professionals should work with the adult to establish what being safe means to them and how that can best be achieved. Professionals should not be advocating “safety” measures which do not take account of individual wellbeing as defined in Chapter 1 of the Care and Support Statutory Guidance issued by the Department of Health.

The Care Act requires that each authority must:

- Make enquiries or cause others to do so, if it believes an adult is experiencing, or is at risk of abuse or neglect. An enquiry should establish whether any action needs to be taken to prevent or stop abuse or neglect, and if so by whom;
- Set up a Safeguarding Adults Board (SAB);
- Arrange where appropriate, for an independent advocate to represent and support an adult who is the subject of a safeguarding enquiry or Safeguarding Adult Review (SAR) where the adult has substantial difficulty in being involved in the process and where there is no other suitable person to represent and support them;
- Co-operate with each of its relevant partners in order to protect the adult. In their turn each relevant partner must co-operate with the local authority.

Aims of adult safeguarding

The aims of adult safeguarding are to:

- Stop abuse or neglect wherever possible
- Prevent harm and reduce the risk of abuse or neglect to adults with care and support needs
- 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 well-being of an adult; and
- Address what has caused the abuse or neglect.

In order to achieve these aims, Abbeyfield Oxford will:

- ensure that everyone is clear about their roles and responsibilities;
- work co-operatively as part of local multi-agency partnerships to facilitate timely and effective prevention of and responses to abuse or neglect;and
- support the development of a positive learning environment at all levels.

<p>4.3</p>	<p>KEY PRINCIPLES OF SAFEGUARDING</p> <p>The following six principles apply to all sectors and settings including housing and care and support services. These principles will inform the ways in which we work with residents.</p> <p>Empowerment –People being supported and encouraged to make their own decision and informed consent.</p> <p>“I am asked what I want from the safeguarding process and these directly inform what happens”</p> <p>Prevention – It is better to take action before harm occurs.</p> <p>“I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help.”</p> <p>Proportionality – The least intrusive response appropriate to the risk presented.</p> <p>“I am sure that the professionals will work in my interest, as I see them and they will only get involved as much as needed.”</p> <p>Protection – Support and representation for those in greatest need.</p> <p>“I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want.”</p> <p>Partnership – Local solutions through services working with their communities have a part to play in preventing, eradicating and reporting neglect and abuse.</p> <p>“I know that staff treat any personal or sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me.”</p> <p>Accountability – Accountability and transparency in delivering safeguarding.</p> <p>“I understand the role of everyone involved in my life and so do they.”</p> <p>TYPES OF ABUSE AND NEGLECT</p>
<p>4.4</p>	<p>The following is a list of the different types and patterns of abuse and neglect and the different circumstances in which they may take place. This is not intended to be an exhaustive list but an illustrative guide as to the sort of behaviour which could give rise to a safeguarding concern:</p> <ul style="list-style-type: none"> • 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

	<p>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.</p> <ul style="list-style-type: none"> • 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 as a result 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. <p>Incidents of abuse may be one-off or multiple, and affect one person or more. Repeated instances of poor care may be an indication of more serious problems and of what we now describe as organisational abuse. In order to see these patterns it is important that information is recorded and appropriately shared.</p> <p>Patterns of abuse vary and include:</p> <ul style="list-style-type: none"> • serial abusing 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; or • opportunistic abuse such as theft occurring because money or jewellery has been left lying around.
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4.5	<p>Financial abuse</p> <p>Financial abuse is the main form of abuse identified by the Office of the Public Guardian both amongst adults and children at risk. Financial recorded abuse can occur in isolation, but as research has shown, where there are other forms of abuse, there is likely to be financial abuse occurring. Although this is not always the case, everyone should also be aware of this possibility.</p> <p>Where the abuse is by someone who has the authority to manage an adult's money, the relevant body should be informed, for example, the Office of the Public Guardian for deputies and Department for Work and Pensions (DWP) in relation to appointees.</p> <p>INFORMATION SHARING AND CONFIDENTIALITY</p> <p>Sharing the right information, at the right time, with the right people, is fundamental to good practice in adult safeguarding but has been highlighted as a difficult area of practice.</p> <p>The Care Act 2014 S45 'supply of information' duty covers the responsibilities of others to comply with requests for information from the Safeguarding Adults Board. Sharing information between organisations as part of day-to-day safeguarding practice is already covered in the common law duty of confidentiality, the Data Protection Act, the Human Rights Act and the Crime and Disorder Act. The Mental Capacity Act is also relevant as all those coming into contact with adults with care and support needs should be able to assess whether someone has the mental capacity to make a decision concerning risk, safety or sharing information.</p> <p>Organisations need to share safeguarding information with the right people at the right time to:</p> <ul style="list-style-type: none">• prevent death or serious harm• coordinate effective and efficient responses• enable early interventions to prevent the escalation of risk• prevent abuse and harm that may increase the need for care and support• maintain and improve good practice in adult safeguarding• reveal patterns of abuse that were previously undetected and that could identify others at risk of abuse• identify low-level concerns that may reveal people at risk of abuse• help people to access the right kind of support to reduce risk and promote wellbeing• help identify people who may pose a risk to others and, where possible, work to reduce offending behaviour• reduce organisational risk and protect reputation. <p>Adults have a general right to independence, choice and self-determination including control over information about themselves. In the context of adult safeguarding these rights can be overridden in certain circumstances such as emergency or life-threatening situations.</p> <p>The law does not prevent the sharing of sensitive, personal information</p>
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	<p>within organisations. If the information is confidential, but there is a safeguarding concern, sharing it may be justified. In addition the law does not prevent the sharing of sensitive, personal information between organisations where the public interest served outweighs the public interest served by protecting confidentiality – for example, where a serious crime may be prevented.</p> <p>The Data Protection Act enables the lawful sharing of information.</p> <p>Staff cannot give a personal assurance of confidentiality and should always report safeguarding concerns to their line manager in the first instance except in emergency situations. However, it is good practice to try to gain the person’s consent to share information and as long as it does not increase risk, practitioners should inform the person if they need to share their information without consent.</p> <p>Any approach from the press or media will be referred to the relevant department based at Abbeyfield’s national office in St Albans and any press statements will not give out or imply any personal details.</p>
<p>4.6</p>	<p>THE FUNDAMENTAL STANDARDS</p> <p>On 1st April 2015 the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 came into force. The regulations apply to all registered persons (providers and managers) registered with the Care Quality Commission (CQC) that carry on regulated activities. Part 3 of these new regulations has two sections: Section 1 describes the requirements relating to persons carrying on or managing a regulated activity. Section 2 introduces the fundamental standards below which the provision of regulated activities and the care people receive must never fall. The fundamental standards replace the Essential Standards of Quality and Safety. Regulation 13: Safeguarding Service Users from Abuse and Improper Treatment governs safeguarding arrangements to protect people from abuse and also covers discrimination or unlawful restraint, which includes inappropriate deprivation of liberty under the terms of the Mental Capacity Act 2005.</p> <p>Duty of Candour. The duty of candour, which is part of the fundamental standards, applied to NHS providers from October 2014 and was extended to include all other providers from April 2015. The duty of candour requires providers to be open and transparent with people who use their services about their care and treatment, including when it goes wrong.</p>
<p>4.7</p>	<p>PREVENTING ABUSE</p> <p>It is essential to recognise the importance of preventing abuse and neglect wherever possible. Observant staff making early, positive interventions with individuals and families can make a huge difference to their lives, preventing the deterioration of a situation or breakdown of a support network. It is often when people become increasingly isolated and cut off from families and friends that they become extremely vulnerable to abuse and neglect. Robust risk management processes can prevent concerns escalating to a crisis point and requiring</p>

4.8	<p>intervention under safeguarding.</p> <p>The principles of good practice will be observed at all times and residents will be central to all we do.</p> <p>Residents have a right to:</p> <ul style="list-style-type: none">• Have their privacy respected and be treated with dignity• Be valued and recognised as unique individuals• Have control over their lives and matters which affect them• Be as independent as possible• Make informed choices about the care and support they receive. <p>Each resident's care plan (in care services) and My Life Plan (in housing) will include a comprehensive assessment of their needs, including any known risks. Actions to prevent or reduce known risks will be clearly recorded and acted upon.</p> <p>We will make information available to residents and their families, and to staff and volunteers, about internal and external safeguarding policies and procedures. We will also ensure residents have information about, and access to, local advocacy services.</p> <p>Residents and visitors will have access to Abbeyfield Oxford's <u>Complaints Procedure</u>.</p> <p>Abbeyfield Oxford will ensure robust recruitment procedures are in place and that all staff and volunteers are properly vetted, to include DBS checks, to ensure they are suitable to work with older people.</p> <p>All staff will receive safeguarding training that is commensurate with their role and this will be a mandatory requirement. The performance of each member of staff will be properly monitored and reviewed through the formal processes of appraisal and supervision.</p> <p>Each Manager will foster an open and inclusive management style that encourages people to voice any concerns and will ensure people know that their concerns, however minor, will be taken seriously and acted upon.</p> <p>ROLES AND RESPONSIBILITIES</p> <p>All staff are individually responsible for preventing, identifying and responding to abuse. In order to respond appropriately where abuse or neglect may be taking place, anyone in contact with the adult, whether in a volunteer or paid role, must understand their own role and responsibility and have access to practical and legal guidance, advice and support. This will include understanding local multi-agency policies</p>
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<p>4.9</p>	<p>and procedures and attending training commensurate with their role. Employees must understand that this policy is also incorporated into their contract of employment.</p> <p>Front Line Staff</p> <p>Operational front line staff are responsible for preventing, identifying and responding to allegations of abuse and substandard practice. Staff at operational level need to share a common view of what types of behaviour may be abuse or neglect and what to do as an initial response to a suspicion or allegation that someone is being, or is at risk of being, abused or neglected.</p> <p>The House Manager is responsible for ensuring that this policy is fully implemented and for ensuring all staff receive appropriate support, advice, guidance and training which is updated regularly.</p> <p>The House Manager should raise any queries about the application or interpretation of this policy with the Operations Trustee.</p> <p>Trustees</p> <p>The board of trustees is responsible for ensuring that Abbeyfield Oxford safeguarding policies and procedures are effective in minimising abuse and safeguarding residents from harm. The team will ensure that safeguarding policies and procedures are regularly reviewed and updated and that changes are effectively communicated throughout the organisation. The team will ensure there are suitable systems in place to monitor the effectiveness of safeguarding arrangements and that where things go wrong, lessons are learned to ensure any mistakes are not repeated.</p> <p>DISCLOSURE AND BARRING SERVICE (DBS)</p>
<p>4.10</p>	<p>The Safeguarding Vulnerable Groups Act 2006 provides the legislative framework for a vetting and barring scheme for people who work with children or vulnerable adults.</p> <p>The Disclosure and Barring Service (DBS) helps employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups, including children.</p> <p>The DBS is responsible for:</p> <ul style="list-style-type: none">• processing requests for criminal records checks• deciding whether it is appropriate for a person to be placed on or removed from a barred list• placing or removing people from the DBS children's barred list and adults' barred list for England, Wales and Northern Ireland

<p>4.11</p>	<p>All Abbeyfield Oxford staff and some volunteers are required to have an Enhanced criminal record check from the DBS before commencing employment/volunteering and to have a new check carried out every five years.</p> <p>Through referrals to the DBS, workers who have harmed a resident, or placed a resident at risk of harm, are banned from working in a care position with vulnerable groups. The barred lists apply to those working or volunteering in regulated activities. Regulated activity providers include registered care homes, staff agencies, domiciliary care agencies; and adult placement schemes.</p> <p>If someone is removed by being either dismissed or redeployed to a non-regulated activity, from their role providing regulated activity following a safeguarding incident, or a person leaves their role (resignation, retirement) to avoid a disciplinary hearing following a safeguarding incident and Abbeyfield Oxford feels they would have dismissed the person based on the information they hold, then Abbeyfield Oxford has a legal duty to refer to the Disclosure and Barring Service. If an agency has provided the person, then the legal duty sits with that agency. In circumstances where these actions are not undertaken then the local authority can make such a referral.</p> <p><i>NB</i> The term 'vulnerable adult' has been amended as it was felt to be inappropriate to label an adult as vulnerable solely due to their circumstances, age or disability. In general terms, an adult (a person aged 18 or over) is classed as vulnerable when they are receiving one of the following services:</p> <ul style="list-style-type: none">• Health care;• Relevant personal care;• Social care work;• Assistance in relation to general household matters by reason of age, illness or disability;• Relevant assistance in the conduct of their own affairs; or• Conveying (due to age, illness or disability in prescribed circumstances). <p>WHISTLEBLOWING (PUBLIC INTEREST DISCLOSURE)</p> <p>Staff are strongly encouraged to take action and report concerns if they suspect a resident is being abused, regardless of who the perpetrator is. Abbeyfield Oxford respects those who stand up for anyone who they suspect or know is being abused, and staff are assured that they will not be victimised or treated unfairly as a result of reporting malpractice.</p> <p>If a member of staff feels unable to report concerns to the Manager for whatever reason, they should disclose their concerns to the Manager's line manager. The law (Public Interest Disclosure Act 1998) protects anyone making certain disclosures in the public interest. Staff should refer to Abbeyfield Oxford's <u>Whistleblowing Policy</u> for further information.</p>
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ABBEYFIELD POLICY

5 Finance, Value for Money & Social Value	TBC
6 Linked Policies	Appropriate Use of Restraint Complaints Confidentiality DBS Policy Equality and Diversity Training, Learning and Development Whistle Blowing
7 Legislation / Regulation	The Care Act 2014 Care and Support Statutory Guidance issued under the Care Act 2014 Safeguarding Vulnerable Groups Act 2006 Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 13 Human Rights Act 1998 Mental Capacity Act 2005 Public Interest Disclosure Act 1998
8 Review	Every 3 years, subject to any regulatory or legislative updates.