

Safeguarding Adults Policy and Procedure

Our Policy

Working Families believes that no adult should experience abuse of any kind. We have a responsibility and duty of care to promote the welfare of all our service users, staff, and volunteers and to keep them safe and protected from all forms of harm including physical abuse, emotional abuse, sexual abuse, and neglect. We are committed to practice in a way that protects them.

All employees and volunteers at Working Families have a duty to safeguard adults.

Safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. Everyone has a right to be safeguarded from abuse or neglect.

We will do this by:

- Taking any concerns seriously, valuing, listening to and respecting these concerns
- Adopting safeguarding adults practices through procedures and a code of conduct for staff and volunteers
- Providing effective management for staff and volunteers through supervision, support, and training
- Recruiting staff and volunteers safely, ensuring all necessary checks are made
- Sharing information about the Adult Safeguarding policy and good practice with staff and volunteers
- Sharing concerns with agencies who need to know

The policy sets out Working Families policy and practice guidance for all staff and volunteers including the Senior Leadership Team and the board of trustees, paid staff, volunteers and interns, agency staff, students or anyone working on behalf of Working Families.

This document represents best practice, and all staff and volunteers must follow this policy and practice guidance.

The purpose of the policy is:

- To protect and safeguard adults who receive Working Families services and staff working for Working Families.
- To provide staff and volunteers with the overarching principles that guide our approach to safeguarding.
- Make all staff and volunteers aware of their rights and responsibilities in relation to safeguarding adults.
- Provide staff and volunteers with a framework within which to safely manage any concerns they have regarding the welfare of adults.

Procedures for reporting suspected abuse or harm

Safeguarding is never someone else's responsibility and all Working Families staff and volunteers are urged to maintain constant and high levels of vigilance in the light of the prevalence of abuse.

Staff and volunteers are always encouraged to communicate and consult upon any concerns they have, and to respond to disclosures of abuse and emergencies in a prompt and collaborative way so that the right support and protection is available.

Procedure for dealing with specific incidents or concerns of abuse

The following procedures relate to any incidents arising that may cause Working Families staff or volunteers concern for the welfare and safety of an adult. It is essential that all cases of concern are passed on to one of Working Families Safeguarding Officers.

Responding to disclosures, suspicions, and allegations of abuse

Staff and volunteers need to feel educated and empowered to know what to do if they have concerns about an adult. Working Families has Safeguarding Officers who are available for advice at any time. It is not the role of staff or volunteers to discuss or contact anyone outside the organisation unless there is a concern that an adult is at imminent risk of significant harm.

The role of Working Families Safeguarding Officers

1. The Safeguarding Officers can offer reassurance and advice to you on the situation you have faced.
2. If the situation is deemed to be of a legitimate concern, the Safeguarding Officers will decide if a referral is made. They will then action this within 24 hours.
3. The Safeguarding Officers will ensure Working Families safeguarding files are kept up to date, and that notes of any concerns are recorded in the correct way.
4. The Safeguarding Officers will seek support and advice from Working Families CEO, if required.
5. If a referral has been made to local Safeguarding Board, then the Safeguarding Officer will follow up any telephone referral within 48 hours. If they have not received an acknowledgement within three working days, they will contact again.
6. If the Safeguarding Officer feels that the case has not been responded to appropriately, they should discuss with the CEO and consider taking steps to escalate the case.
7. The Safeguarding Officers will store the information at Working Families in a secure file.
8. The Safeguarding Officers will ensure all staff and volunteers are trained and supported in safeguarding, as appropriate.

Allegations against staff/volunteers

It is essential in all cases of suspected abuse that action is taken quickly and professionally whatever the validity. It is the responsibility of staff to bring any concerns they have to a Safeguarding Officer as soon as possible. This may then be referred to the Senior Leadership Team for appropriate action. If the allegations refer to the Chief Executive, then this will be referred to the Chair of the Board of Trustees.

The member of staff against whom allegations are made will be advised to keep records of all conversations, meetings, letters, and phone calls relating to the allegations.

If a decision is made to pursue the allegation of abuse against a member of staff, this will be processed under Working Families disciplinary procedures. The allegation of abuse will also be reported to the Local Authority Safeguarding Team for the area where the staff member resides.

If staff/volunteers are in any doubt about whether an adult is being abused they should discuss it at an early stage with a Working Families Safeguarding Officer to clarify the best course of action. It is better to be proved wrong about a situation than to ignore it.

Sharing information

All staff should be aware that the threshold for sharing information by making an adult safeguarding referral is *a concern that an adult at risk may be at risk of significant harm*. Certainty or proof of harm is not necessary. Working Families also holds a list of people who can be contacted for further child and adult protection advice when needed.

As far as possible, the confidentiality of all individuals involved in any allegation, investigation or resulting disciplinary proceedings will be respected. However, there may be circumstances in which it is necessary to share information with parties such as social services, the police, or other relevant parties. We cannot therefore guarantee that the confidentiality of disclosures can be maintained in all circumstances. Staff are made aware of this and service users are informed of this when contacting Working Families.

Referring without consent:

Justifiable reasons when a referral can be made without consent include:

- Emergency or life-threatening situations
- When other people are, or may be, at risk, including children
- When sharing the information could prevent a serious crime
- When a serious crime has been committed. If this is the case, a referral must be made. If it is a serious crime, then the police will also be contacted.

Making safeguarding personal

Working Families is committed to 'making safeguarding personal'. This means that employees and volunteers must adopt a person-led and outcomes-focused approach to safeguarding. The adult should be engaged in a conversation about how best to respond to their safeguarding situation in a way that enhances their involvement, control, and choice at the beginning, middle and end of the safeguarding process.

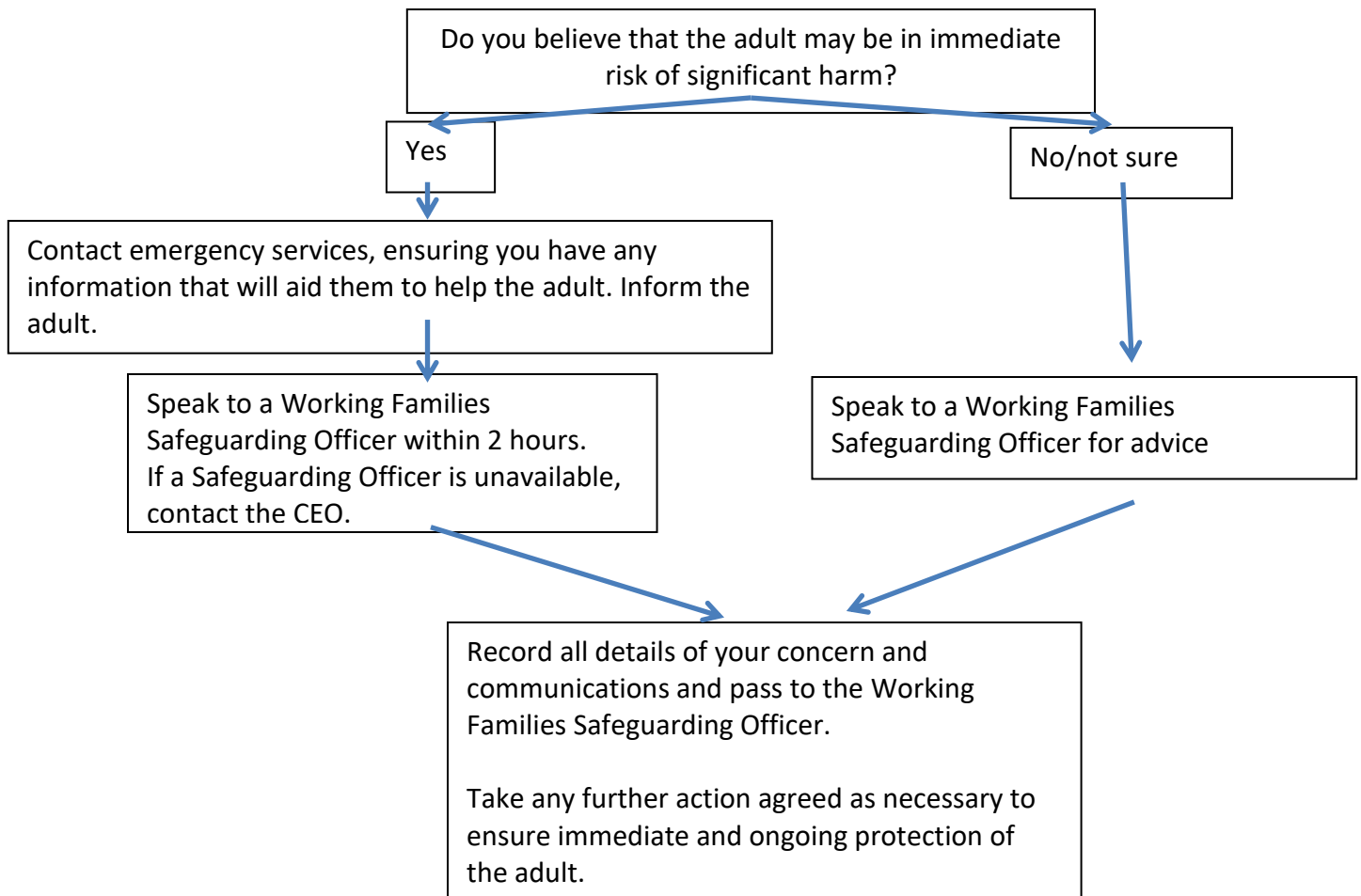
Training

All staff who interact with working parents and carers (service users) will receive basic Safeguarding training as part of their induction and at regular intervals throughout their employment (at least every 3 years). Staff with extensive involvement with Working Families service users, or who have a staff management responsibility, will receive additional training. Volunteers may be trained as appropriate for their specific role but as a minimum should be alerted to the fact that if they become concerned about the welfare of a child or adult at risk, they should always contact a Working Families Safeguarding Officer without delay and share their concern. All staff and volunteers will be updated on this Policy on an annual basis and/or when relevant changes come into effect. A record of safeguarding training undertaken is held within BreatheHR.

Staff Supervision and Support

In addition to training, internal arrangements are in place to support staff through stressful situations, including dealing with adult welfare concerns, complaints, or hostility. All employed staff have an identified line manager and are appraised annually and have regular one-to-one meetings.

If you are concerned about an adult, use the following flowchart:



How to respond:

- Ask for support and advice if you have any concern
- Be clear and honest about the limits of confidentiality if this is raised, and never promise to 'keep a secret'
- If the Safeguarding Officer does not pursue the matter, or the member of staff reporting feels that their concerns have not been taken seriously, then they should raise this with Working Families CEO.

Appendix 1

Scope of policy

Working Families will ensure that all staff and volunteers comply with best practice by attending training on Adult Safeguarding Policy and procedures. They will be inducted and supported to enable them to identify and appropriately manage adult safeguarding issues.

Legal Framework – Adult Safeguarding

The legal guidelines for adult protection differ from those of child protection, which is covered by a separate policy, in that adults have the right to take risks and may even choose to live at risk if they have the capacity to make such a decision.

Working Families policy is guided by the procedures for the protection of adults as described in the Care Act in 2014.

Adults aged 18 and over have the potential to be vulnerable (either temporarily or permanently) for a variety of reasons and in different situations. An adult may be vulnerable if they:

- Have a learning or physical disability
- Have a physical or mental illness, chronic or otherwise, including an addiction to alcohol or drugs
- Have a reduction in physical or mental capacity
- Are detained in custody
- Are receiving community services because of age, health, disability, or immigration status
- Are living in sheltered accommodation or a residential care home
- Are unable, for any other reason, to protect themselves against significant harm or exploitation

Appendix 2: Types of Abuse

Abuse is a violation of an individual's human and civil rights by any other person or persons. Abuse can be physical, sexual, psychological, financial, or material, social, or discriminatory based on gender, race, disability or any other form of harassment.

This Appendix lists further details of different types of abuse. Abuse can also arise from acts of neglect, omission, or failure to act.

Abuse may be a single act or repeated over time or people. It may cause significant harm or exploitation of the person subjected to it. Abuse can be intentional or unintentional and can result from a lack of knowledge. Some forms of abuse may seem minor but may cause a great deal of harm over time and/or may reduce a person's opportunities later in life. Some forms of abuse such as assault or theft are criminal offences.

Significant Harm is any ill-treatment including sexual abuse and forms of ill-treatment that are not physical but also the impairment of, or failure to prevent an avoidable deterioration in, physical, intellectual, emotional, social, or behavioural development.

Hidden and enduring abuse against women includes domestic abuse defined as: "...any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or have been intimate partners or family members, regardless of gender or sexuality."

Violence against women also includes harmful traditional practices amongst black and minority ethnic (BME) communities such as so called 'honour-based violence', female genital mutilation (FGM), forced marriage as well as abuse that transgresses human rights such as human trafficking.

People who abuse are often well known to the person and may be:

- A partner, relative or friend
- A member of staff or a volunteer
- A paid carer, key worker, professional or volunteer
- Other service users
- A health visitor, social care worker or other worker from any agency
- A visitor, neighbour, or other associates
- Another service user or Adult at risk
- A person who deliberately targets vulnerable people to exploit them and strangers.

Recognising Abuse and Neglect- Recognition that an adult is being abused or neglected may come through various routes, including:

- Being told by the adult themselves
- The adult may make a chance or throwaway remark which raises concern
- The person abusing the adult may say something
- Being a witness to the abuse
- Seeing signs or symptoms of abuse e.g., physical evidence such as bruising or behavioural changes (see Appendix 1 for further examples)
- Being informed by a third party.

Working Families recognises that an Adult at risk may not be able to disclose the abuse for various reasons including:

- They may be afraid of what will happen if they tell someone

- They have been abused in the past and may have had bad experiences when they confided in others about the abuse
- They have low self-esteem, depression, dissociative symptoms, or other problems which undermine their capacity to give an account
- Their trust in others has been undermined by threats made by abusers
- They may not realise what is happening is unusual or abusive
- They may feel that they have no option other than to tolerate abuse rather than face the difficult time that will follow if they disclose e.g., deportation.

Capacity

Capacity refers to an individual's ability to decide or take a particular action for themselves at a particular time, even if they can make other decisions. For example, they may be able to make small decisions about everyday matters such as what to wear, or what a healthy diet would be, but they lack capacity to make more complex decisions about financial matters. Capacity may be affected by things such as medication, substances, and some untreated mental health issues. Where an adult is found to lack capacity to decide then any action taken, or any decision made for, or on their behalf, must be made in their best interests.

Abuse can take many forms, and incidents of abuse may be one-off or multiple, and affect one person or more. Abuse may also be very subtle and therefore we draw your attention to the following types of abuse which you may come across. Professionals and others should look beyond single incidents or individuals to identify patterns of harm. This list is not exhaustive, and we therefore encourage you to be alert and take the initiative to spot these forms of abuse as well as other forms that might occur:

- **Physical abuse:** including hitting, slapping, scratching, pushing, rough handling, kicking, misuse of medication, restraint without justifiable reasons, inappropriate sanctions including deprivation of food, warmth, clothing, and health care needs.
- **Sexual abuse:** including rape, indecent exposure, sexual harassment, inappropriate looking or touching, unwanted sexual text messages, 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 and sexual coercion.
- **Emotional or Psychological abuse:** including threats of harm or abandonment, deprivation of contact, humiliation, ridicule, blaming, controlling, intimidation, coercion, unwanted communication, stalking, harassment, inappropriate messaging; with kisses attached, verbal abuse and cyber bullying, isolation or unreasonable and unjustified withdrawal from services or supportive networks. Deliberate denial of religious or cultural needs and failure to provide access to appropriate skills and educational development.
- **Domestic abuse:** including psychological, physical, sexual, financial, emotional abuse; so-called 'honour' based violence. And can affect those it is not aimed at within the home.
- **Financial or material abuse:** including misuse or theft of money, fraud, extortion of material assets or inappropriate requests for money, pressure in connection with wills, property or inheritance of financial transactions, or the misuse or misappropriation of property, possessions, or benefits.
- **Neglect and acts of omission:** including ignoring medical or physical care needs, failure to provide access to appropriate health, social care and support or educational services or equipment for functional independence, the withholding of the necessities of life, such as medication, adequate nutrition, heating, and lighting. Failure to give privacy and dignity.
- **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, colour, language, gender and gender identity, age, disability, sexual orientation, or religion. Hate crime
- **Institutional or 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.
- **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. Safeguarding within the Affiliated Group

Appendix 3

Responding to an adult who raises a concern

If a concern is raised by the adult themselves, the staff member or volunteer receiving the information must remember to:

- Listen and acknowledge what is being said.
- Be reassuring and calm.
- Be aware that the person's ability to recount their concern or allegation will depend on age, culture, language and communication skills, and disability.
- Not promise full confidentiality.
- Ask their consent to take up their concerns. Consult with the Safeguarding Officer if the adult does not agree.
- Explain what will happen next.
- Try to encourage and support them to share their information.
- Give them a timescale for when, by whom and how they will be contacted again. Never leave the person to wait to hear from someone, i.e., a police officer or social worker, without any idea of timescale or place.
- Not contact the person about whom the allegation or concerns are being raised to tell them about the information, as this could be putting the person making the allegations in danger, for example, where there is domestic violence taking place, and/or it may prejudice any investigation.

Making decisions about when to refer an adult can be complex, and at this point the Safeguarding officer and employee or volunteer will consider the following questions to aid the decision-making process:

- Empowerment: What does the person want? What rights need to be respected? Are there duties to act, are others at risk of harm?
- Protection: Is this person at risk? What support do they need? Is capacity an issue? Should others (such as a carer) be involved?
- Proportionality: Have risks been weighed up? Does the nature of the concern require referral?
- Partnership: What is the view of others involved?
- Accountability: Is the decision well-made? Is it defensible?