

**Title: SAFEGUARDING POLICY**

**1.0 INTRODUCTION**

- 1.1 Safeguarding means protecting people's health, wellbeing and human rights, and enabling them to live free from harm, abuse and neglect. It's fundamental to high-quality health and social care.
- 1.2 This policy is written to inform staff of how to protect Service Users in our care. It is also designed to comply with Regulation 13 of the Social Care Act 2008. Staff should also be aware of the Key lines of Enquiry where our policy should outline our response to the Safe Section questions in subsection 1.

**2.0 POLICY**

- 2.1 This policy is based on the Six Principles of Safeguarding that underpin all our safeguarding work within our service.

**3.0 PRINCIPLES**

- 3.1 This Six Principles of Safeguarding are:

**1 Empowerment**

**We will** encourage Service Users to make their own decisions and provide them with support and information.

**From the Service Users perspective**

I am consulted about the outcomes I want from the safeguarding process and these directly inform me what happens.

**1 Prevention**

**We will** develop Prevention Strategies to prevent abuse and neglect that promotes resilience and self-determination.

**From the Service Users perspective**

I am provided with easily understood information easily about what abuse is, how to recognise the signs and what I can do to seek help.

**2 Proportionate**

**We will** ensure that a proportionate and least intrusive response is made balanced with the level of risk.

**From the Service Users perspective**

I am confident that the professionals will work in my interest and only get involved as much as needed.

**4 Protection**

- **We will** ensure that Service Users are offered ways to protect themselves, and there is a co-ordinated response to safeguarding.
- **From the Service Users perspective**

## QUALITY POLICY STATEMENT

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- I am provided with help and support to report abuse. I am supported to take part in the safeguarding process to the extent to which I want and to which I am able to.

### 5 Partnerships

**We will** work with other agencies where required to protect and safeguard our service users.

#### **From the Service Users perspective**

I am confident that information will be appropriately shared in a way that takes into account its personal and sensitive nature. I am confident that agencies will work together to find the most effective responses for my own situation.

### 6 Accountability

**We will** be accountable and transparent in delivering a safeguarding response.

#### **From the Service Users perspective**

I am clear about the roles and responsibilities of all those involved in the investigation and solution to the safeguarding problem.

## 4.0 RISK MANAGEMENT

4.1 We recognise that safeguarding is fundamentally managing risk about the safety and wellbeing of a Service User in line with the above six principles. The aim of risk management is:

- To promote, and thereby support inclusive decision making as a collaborative and empowering process, which takes full account of the individual's perspective and views of primary carers;
- To enable and support the positive management of risks. Where this is fully endorsed by the multi-agency partners as having positive outcomes;
- To promote the adoption by all staff of 'defensible decisions' rather than 'defensive actions'.

## 5.0 ACTIONS WE WILL TAKE TO PREVENT ABUSE FROM OCCURRING

5.1 Informing all staff of procedures in place within our organisation and being aware of the types of abuse to Service Users and the step taken to report such incidents.

5.2 Implementing a robust recruitment policy that demands that all potential staff have the required references in place and are subject to clearance through the DBS criminal records and barred list. Equivalent checks will be made for staff employed from overseas.

5.3 Ensure that all staff at all levels are given the correct training about abuse, harm and safeguarding.

5.4 Our Staff will receive training and awareness of how to protect the rights of others. As part of the staff induction, staff will be made aware of discrimination, which might amount to discriminatory abuse or cause psychological harm? This includes discrimination on the grounds of age, disability, gender, gender identity, race, religion, belief or sexual orientation.

- 5.5 Incorporated into our staff induction will be information on diversity, beliefs and values of people who use services and how this impacts on their everyday lives.
- 5.6 If the service employs nursing staff, it is the responsibility of the manager to ensure that checks are made with NMC to ascertain the current status of the applicant's registration category.
- 5.7 Our staff must take appropriate action from any source where abuse and harm is reported.
- 5.8 Fostering an environment of openness and transparency where both staff, Service Users and other stakeholders feel able to report any concerns they may have of a Service User being subject to abuse.
- 5.9 Implementing systems into our service to minimise the likelihood of abuse by Service Users to other Service Users and dealing appropriately with any challenging behaviour or aggression.
- 5.10 Ensuring robust procedures and systems are in place for when staff have any dealings with Service Users money, property or financial affairs.
- 5.11 Helping Service Users to manage relationships and situations which could become potentially abusive or harmful.
- 5.12 Reporting any safeguarding concerns to the officers of the Local Adults Safeguarding Board and the Care Quality Commission within the framework of current policies and professional guidance.

## **6.0 TYPES OF ABUSE**

- 6.1 Abuse to Service Users can take a number of different forms, these might be:
- Physical Abuse
  - Sexual Abuse
  - Psychological Abuse
  - Financial Abuse
  - Neglect or acts of omission
  - Discrimination
  - Religious Abuse.
  - Abuse due to sexual orientation
  - Chemical Abuse (medication)
  - Self-harm
  - Inhuman or degrading treatment
  - Inappropriate or excessive restraint and other forms of organisational abuse/harm.

**7.0 PROVIDING INFORMATION TO SERVICE USERS ON ABUSE**

7.1 The manager will ensure that Service User's, advocates and those acting on their behalf and staff are aware of our procedure and policy on abuse and are given appropriate information about the following:

- What abuse is and how to recognise the signs.
- What they should do if they or another person are being abused or suspect abuse, including relevant contact details under the local safeguarding procedures.
- What they might expect to happen when a referral is made under the local safeguarding procedures.
- How information about a safeguarding concern is appropriately shared in line with multi-agency procedures, taking into account the sensitive nature of the information.
- Information that reassures people that safeguarding procedures are delivered in a way that protects people's human rights, including their human rights to life and not to be treated in an inhuman or degrading way.
- Information that assures people that staff who are required to use restrictive physical interventions have received specialist training.

7.2 The manager should ensure that staff are kept up to date about changes to national and local safeguarding arrangements.

**8.0 IDENTIFYING ABUSERS**

8.1 As a service, we recognise that abuse can come from a number of different sources. It is our responsibility to protect those in our charge from abuse. These sources may be:

- The staff and management of the service.
- Volunteers working in the service.
- Visiting health and social care practitioners and other official visitors.
- Service users' friends and relatives.
- People who have contact with service users while they are temporarily outside the premises.
- Other service users.

**9.0 STAFF ROLE AND ACCOUNTABILITY IN RELATION TO ABUSE**

9.1 All staff in our service have a responsibility to:

- Provide all service users with the best possible care.
- Desist from any abusive/harmful action in relation to service users.
- Report to the manager any act that they may consider to be abusive or harmful.
- Co-operate in the investigation of any incident or alleged incident of abuse.
- Have regular updated training sessions on safeguarding and abuse.

9.2 Each member of staff in our service must be aware of the procedure for reporting any type of abuse or circumstances that may lead to abuse on to their manager. If the abuse involves the management within the service, then the incident must be passed on to the next line manager.

**10.0 MANAGERS RESPONSIBILITIES**

- 10.1 The manager of our service will have responsibility for:
- Developing systems and structures within their service which ensure that the best possible care is delivered.
  - Encouraging a culture and ethos that does not tolerate any sort of abuse/harm.
  - Auditing and revising the services policies and procedures to prevent and deal with any abuse/harm.
  - Operating a robust recruitment and personnel policy that identifies and potentially excludes the recruitment of any potential or actual abusers.
  - Providing training for staff in all aspects of safeguarding, abuse/harm and protection.
  - Swiftly investigating any evidence of abuse/harm.
  - Learning from any incidents of safeguarding and implementing improvements to procedures and policies to effect changes to the service if any deficiencies in the way in which the service operates.
  - Collaborating with all other relevant agencies in combating abuse/harm and improving the safeguarding and protection of service users.
  - Liaising with the relevant safeguarding adults' authority teams and following their guidance and instructions where applicable, including the issues arising from multi-agency involvement.

**11.0 ACTING ON AND REPORTING OF ABUSE**

- 11.1 Each member of staff in our service must be aware of the procedure for reporting any type of abuse or circumstances that may lead to abuse on to their manager. If the abuse involves the management within the service, then the incident must be passed on to the next line manager.
- 11.2 Staff should be aware of situations which might cause actual or potential harm and use their best judgement to stop any further harm being perpetrated. Staff should seek help and support during any intervention.
- 11.3 The manager will take immediate action to identify and stop any abuse, including separating the abuser from the abused person, this might be Service User to Service User or if a staff member, this may involve suspension or disciplinary procedures being invoked.
- 11.4 The manager must take additional action to provide further support, protection and care to a Service User who has been harmed.
- 11.5 A best interest's decision may be made on behalf of a Service User who has been subject to harm. They may lack capacity and be unable to give their consent to the matter being reported. This will be carried out in line with Mental Capacity Procedures.
- 11.6 It is the responsibility of the manager to discuss with any Service User that has been considered to be abused or harmed, what type of action might be taken. The Service User may not want the matter to proceed with a referral being made to any authority. It is still

the manager's responsibility to seek advice from the safeguarding officer about appropriate course of action to take.

- 11.7 The manager of the service will ensure that the local safeguarding authority is informed of the abuse according to local safeguarding procedures in place. The Care Quality Commission will be informed as a part of the notifications process.
- 11.8 It is the responsibility of the manager to report any allegations or actual abuse to family and other stakeholders.
- 11.9 In some circumstances, the manager of the service will need to inform the police of the matter and take guidance from them on what measures need to be taken.
- 11.10 All aspects of the Service Users privacy and dignity will be protected at this time.
- 11.11 The manager will take the lead from the Local Safeguarding Authority and attend strategy meetings where requested with other interested stake holders to ensure that an action plan is in place to safeguard the Service User and prevent similar incidents occurring. This will be met following the timescales and direction of the safeguarding authority.
- 11.12 The manager should contribute to actions required including sharing information and attending forums where experience and lessons learned can be shared with other providers.
- 11.13 The manager may seek specialist advice and support when addressing and managing an incident of abuse that has occurred.

**12.0 ACTION TO BE TAKEN FOLLOWING AN INVESTIGATION**

- 12.1 If abuse was established and was perpetrated from a staff member, the manager should initiate the services disciplinary policy. If the abuse is proved against the staff member, the most likely action would be dismissal and a referral to the Disclosure and Barring Service. This would prevent the individual concerned from obtaining future employment in the care sector.
- 12.2 Other employment sanctions could apply depending on whether there might have been mitigating or extenuating circumstances. In some cases, retraining could be appropriate.
- 12.3 The Service User and their family will be informed of any further outcomes, from the investigation and be consulted about any form of redress or apology being issued by the service.

**13.0 SUPPORT GIVEN TO STAFF AND SERVICE USERS**

- 13.1 As part of our supporting role, the manager should ensure that arrangements are put in place that enables staff and Service Users affected by the incident to access counselling services if required.
- 13.2 Any allegation of abuse, harm or discrimination will be treated seriously. Service users will be supported to express their concerns along with family members and supporters. Staff must not unlawfully victimise people who use services for making a complaint about discrimination.
- 13.3 People should be supported to take part in the safeguarding process to the extent to which they want or are able to, or to which the process allows and are kept informed of progress.
- 13.4 The manager should ensure that people are made aware of, support and encourage the Service User to access sources of support outside the service including local independent information advice, independent mental capacity advocacy services or independent mental health advocacy services where relevant.
- 13.5 As part of the service, the manager promotes a culture where people feel reassured that their care, treatment and support will not be compromised if they raise issues of abuse.

**14.0 RECORDS TO BE TAKEN**

- 14.1 At each stage of the process, accurate records of all actions will be recorded paying close attention to the sensitivity of the situation regarding the Service User and their family.
- 14.2 The manager of the service will keep all records relating to any safeguarding incident, separate from other records and in a confidential folder.
- 14.3 The manager will keep a record of all staff who have been made aware, read and understood our policy on safeguarding and abuse.
- 14.4 A record will be kept of all staff who have received safeguarding training. This training will be updated for all staff when due. The record will display to the services regulators the status of staff safeguarding training for compliance.

**15.0 LEARNING FROM INCIDENTS OF ABUSE**

- 15.1 At the end of an incident involving possible or actual abuse/harm, the manager should carry out a review of what has happened. The purpose of the review is to establish whether the service or its management has been in any way culpable, ineffective or negligent. The lessons learnt should pave the way for how the service should operate in the future, and passing on any appropriate information to other agencies.
- 15.2 If necessary the service's policies, procedures and training arrangements should be modified in response to any material that has emerged from the incident or the

investigation. The service might carry this out with advice and guidance from the local Adults' Safeguarding Board.

**16.0 STAFF TRAINING**

16.1 The manager will arrange staff training for staff in all aspects of safeguarding, abuse/harm and protection.

**17.0 SAFEGUARDING OF CHILDREN VISITING THE SERVICE**

17.1 We are committed to safeguarding children when they are on our premises and safeguard the interests of Service Users and staff when children visit.

17.2 Children are defined in accordance with UK legislation as being 0-18 years of age. Our Service will endeavour to uphold the rights enshrined within the UN Convention on the Rights of the Child (1989) and the requirements of all other relevant UK and NI legislation relating to children and vulnerable adults.

17.3 While our service will ensure that there are safeguarding arrangements in place for children visiting our service, we also respect the rights of those Service Users who use our service when children visit.

**18.0 RISK ASSESSMENT OF CHILDREN VISITING**

18.1 In preparation to accommodate children visiting the service, the manager should carry out a risk assessment. The risk assessment will identify any health, safety and security issues that may pose a risk to children and Service Users.

18.2 The risk assessment should be recorded along with the steps taken to reduce potential risks to children, Service Users and staff.

**19.0 VISITORS RESPONSIBILITIES**

19.1 Whilst we welcome children to visit our service, our responsibilities for safeguarding requires children to be accompanied by an adult at all times. Adults with accompanying children should discuss with the manager and staff about appropriate visiting times.

19.2 We will require adults accompanying children while on the premises, children are never left unsupervised.

19.3 Children should stay with the adults who accompany them at all times, ensuring that they never wander into other Service Users rooms, which must be strictly off limits.

19.4 Children must always be under supervision and should never be allowed to wander around the premises into unsafe areas, such as the homes kitchen, laundry or any place that might pose a risk to their wellbeing.

19.5 The outside of the building should also be off limits to children because of the dangers of parked cars or other hazards which might be harmful to them.

**20.0 CONSULTING WITH SERVICE USERS**

20.1 We will consult with our Service Users about visiting arrangements for children prior to the implementation of this policy. We are aware that some Service Users may be concerned about lack of control of disruptive children which could have a detrimental effect on their quality of life. We recognise the importance of Service Users privacy and dignity.

**21.0 INNAPROPRIATE VISITS**

21.1 There are circumstances when children will not be permitted to visit the service. For example if there is an infection prevalent in the building or there are areas where redecoration or maintenance are taking place.

**22.0 STAFF CHECKS**

22.1 We have a robust recruitment process in place and all staff employed in our service have been subject to references checks to ensure they are suitable for employment. They have also undergone Disclosure and Barring Checks to ensure they are not listed on the sex offenders register.

**24.0 REPORTING ABUSE**

24.1 If any member of staff is concerned about the safety of children, it will be their responsibility to report this to the manager who will refer the matter to the Safeguarding Authority. *(Please refer to Procedure MA-11, Reporting Bad Practice whistleblowing).*

**References**

Woodford Baptist Homes Ltd.  
Adult Safeguarding Social Care Institute of Excellence 2011.  
London Multi Agency Adult Safeguarding Policies and Procedures 2015.  
Regulation 13 of the Social Care Act 2008.

Our service will seek to inform staff of their responsibilities for informing their manager about any actual or potential safeguarding issues and can be used in association with the following policies and procedures in the Cared 4 System:

- MA-11 Reporting Bad Practice.
- MA-12 Harassment Violence and Bullying.
- MA-14 Sexuality and relationships.
- PP-01 Recruitment.
- PP-03 Staff Induction and Probation.
- PP-05 Staff Supervision and Appraisal.
- PC-08 Management of challenging behaviour.
- SD-10 Service Users finances.
- SD-14 Safeguarding people from abuse.
- SD-16 Comments suggestions and complaints.
- SD-21 Missing Service user.
- QP-01 Comments Suggestions and Complaints.
- QP-10 Residents Charter of Rights.
- QP-23 Privacy Dignity and Human Rights.
- QP-28 Same and Cross Gender Care.
- QP-39 Managing Behaviour (Restraint).
- QP-42 Equality Diversity.
- QP-52 Professional boundaries.

This policy is written to show the commitment of this service to the safeguarding of its users and to show how it complies with Regulation 13 of the Health and Social Care Act 2008 (Regulated Activities) Regulations

**Guidance for managers**

This procedure addresses Safeguarding service users from abuse and improper treatment, Regulation 13 (1) (2) (3) (4) (a) (b) (5) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Part 3)

**What the Care Quality Commission requires**

Key Lines of Enquiry- **Safe Service S1 (Mandatory)**

**How are people protected from bullying, harassment, avoidable harm and abuse that may breach their human rights?**

Prompt	Compliance Evidence
How are people protected from abuse and avoidable harm, including breaches of their dignity and respect, which can result in psychological harm	Para 5.4 of this policy addresses the prompt
How are people protected from discrimination, which might amount to discriminatory abuse or cause psychological harm? This includes discrimination on the grounds of age, disability, gender, gender identity, race, religion, belief or sexual orientation.	Para 5.4 of this policy addresses the prompt
How are people supported to understand what keeping safe means, and how are they encouraged to raise any concerns they may have about this?	Paras 7.0 of this policy addresses the prompt.
Are people kept safe by staff who can recognise signs of potential abuse and know what to do when safeguarding concerns are raised?	Para 7.0 of this policy addresses the prompt.