



Policy for Safeguarding Vulnerable Adults in Need of Care and Support

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1 Purpose

This policy and procedure to safeguard adults sets out how Cruse is to ensure that staff, volunteers and service users know how to recognise signs of abuse and neglect and, where they do occur, that there is appropriate response to protect those affected from further harm. Robust safeguarding procedures make it more likely that abuse is detected and further incidents prevented. Cruse has internal procedures to make sure:

1. As far as possible, all staff and volunteers are fit to be in contact with adults at risk.
2. All staff and volunteers know what to do when they are concerned about abuse or potential abuse of an adult at risk.

2 Who is affected by this policy

This policy applies to all paid employees, seconded staff, trustees, volunteers, students, agency workers, contract, and unpaid staff working on behalf of Cruse any capacity and in any setting. All clients of Cruse should be made aware of Cruse safeguarding policies and procedures.

3 Roles and responsibilities

Cruse recognises that it is the responsibility of professionals to determine whether abuse has taken place but it is everyone's responsibility to report concerns.

3.1 Trustees

To comply with their legal duties, trustees must react responsibly to reports of safeguarding risks and incidents of abuse and take steps to make sure all staff know how to deal with these.

Trustees should report a serious incident to the Charity Commission if:

There has been a breach of procedures or policies at Cruse which has put clients at risk, including a failure to carry out checks which would have identified that a person is disqualified under safeguarding legislation, from working with children or adults.

The Charity Commission is the regulator of charities in England and Wales and maintain the charity register. The Charity Commission strategy for dealing with safeguarding issues in charities can be found here;

<https://www.gov.uk/government/publications/strategy-for-dealing-withsafeguardingissues-in-charities>

3.2 Clinical Director

1. Ensure there is a named lead person to promote safeguarding awareness and practice within the organisation
2. Monitor and audit Safeguarding training requirements for National Designated Lead for Safeguarding
3. Ensure regular reporting to the Trustees.

3.3 National Designated Lead for Safeguarding

Role:

The National Designated Lead for Safeguarding has overall strategic responsibility for embedding effective safeguarding practices across the organisation and providing a source of additional expertise and support for colleagues.

The role of National Designated Lead for Safeguarding is not however, to remove the reporting and recording obligations of Hubs, managers or services. Safeguarding is everybody's responsibility and all staff and volunteers will be trained at the appropriate level for their role.

Responsibilities:

National Designated Lead for Safeguarding will be expected to:

1. Keep abreast of national agendas and policy changes in relation to safeguarding adults/ children (as applicable to specific remit) and cascade this appropriately
2. Lead on the development and review of safeguarding policies and practices across Cruse
3. Provide additional expertise and guidance upon request from other staff; particularly in relation to complex cases
4. Ensure safeguarding awareness is embedded across Cruse through effective, appropriate and timely communication and updates to colleagues
5. Assist and advise Cruse to develop and embed safeguarding training throughout Cruse.
6. Interface effectively with the Board providing information on request
7. Attend relevant training necessary to carry out role effectively
8. Will ensure that all Hub Managers have the appropriate experience and training (minimum training being Cruse safeguarding module and briefing regarding the role, delivered by NDLS) and whose name is notified to Network Support and recorded on CIS by the Hub
9. Will ensure that National Services E.g. Helpline, etc. have a Safeguarding Officer who is appropriately experienced and trained, (minimum training being Cruse safeguarding module and briefing about understanding of role) and whose name is notified to and recorded by Network Support
10. Will review this policy and its procedures annually
11. Ensure that service users, their relatives or informal carers have access to information about how to report concerns or allegations of abuse
12. Monitor and carry out training compliance for Hub Managers and Operational Leads
13. Will audit adherence to safeguarding processes for quality assurance

3.4 Hub Managers/ Volunteer and Training Coordinators

Responsibilities

1. Ensure volunteers and employees access safeguarding training prior to supporting clients and safeguarding training is accessed annually via Webinar/E Learning.
2. Ensure, employees and volunteers have access to and are familiar with this safeguarding adult policy and procedure and their responsibilities within it and receive appropriate training at a level commensurate with their role
3. Ensure staff and volunteers have support and supervision when dealing with a safeguarding matter
4. Work with the National Designated Lead for Safeguarding to ensuring that all Areas have a Safeguarding Officer who is appropriately experienced and trained, and whose name is notified to Network Support and recorded on CIS by the Area. (N.B. This may be the same person for both Vulnerable Adults and Children and Young People.)
5. To audit and monitor compliance with training requirements. (Refer to the safeguarding training table, for safeguarding training requirements)
6. Will work with the National Designated Lead for Safeguarding to carry out an audit to ensure Local Safeguarding Officers are in place across the network with the NDLS
7. Ensure the Mental Capacity Act is used to make decisions on behalf of those adults at risk who are unable to make particular decisions for themselves
8. Ensure the contact details of the local safeguarding contact and named officer (SGO) should be available to all bereavement volunteers, staff, administrative volunteers, supervisors and management volunteers;

3.5 Safeguarding Officers

Responsibilities

1. Will ensure safeguarding concerns are documented as stated in the recording allegations and concerns guidance on CIS and must include decisions made and by whom
2. Will ensure staff and volunteers/staff are supported and guided when safeguarding issue are identified and reported.
3. Undertake minimum training of Cruse safeguarding module and briefing regarding the role, delivered by NDLS.

3.6 Volunteers and staff

1. To attend safeguarding training to have the skills to recognise those who may be vulnerable and to know the appropriate action to take if they have concerns.
2. to respond and report to allegations of abuse, including those made against staff and volunteers
3. ensure that disclosures of non-recent abuse are dealt with appropriately
4. ensure concerns or allegations of abuse are always taken seriously
5. ensure sharing information across professional boundaries and with agencies that need to know

6. have followed the procedures for the recruitment and selection of staff and volunteers, and the completion of DBS checks,
7. Ensure they update at the required intervals their DBS checks and safeguarding training.

4. Definitions of abuse

4.1. An adult at risk is any person who is:

- **aged 18 years and over AND who does or may need care or support because of frailty, learning or physical or sensory disability of mental health issues AND who is or may be unable to take care of him or herself, or take steps to protect him or herself from significant harm or exploitation.**

4.2. "Abuse" is a violation of an individual's human and civil rights by any other person or persons. Abuse may consist of single or repeated acts. It may be physical, verbal or psychological, it may be an act of neglect or an omission to act, or it may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which he or she has not consented, or cannot consent. Abuse can occur in any relationship and may result in significant harm, or exploitation of, the person subject to it.

It may be caused by anyone who has power over the person whether they are a carer, a paid member of staff or professional. It can be caused by a person deliberately intending to harm, failing to take the right action or through their ignorance. It can involve one or a number of people. Institutional abuse can occur when the abuse arises as a result of persistently poor care or a rigid and oppressive regime. Defining abuse is complex.

4.3 The Care Act 2014 sets out statutory responsibilities for organisations and defines safeguarding as:

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

5. Six safeguarding principles

Cruse embraces the key six principles of Safeguarding:

- **Empowerment:** People being supported and encouraged to make their own decisions and informed consent.
- **Prevention:** It is better to take action before harm occurs.
- **Proportionality:** The least intrusive response appropriate to the risk presented.

- **Protection:** Support and representation for those in greatest need.
- **Partnership:** Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.
- **Accountability:** Accountability and transparency in safeguarding practice.

6 **Definitions:**

6.1. **Who is an adult at risk?**

For the purposes of this policy, an adult at risk is an adult who:

- is aged 18 years or more, and
- has needs for care and support (whether or not these are currently being met),
- is experiencing, or is 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.

Such a definition includes adults with physical, sensory and mental impairments and learning disabilities, howsoever those impairments have arisen e.g. whether present from birth or due to advancing age, chronic illness or injury.

Also included are people with a mental illness, dementia or other memory impairments, people who misuse substances or alcohol.

The definition includes unpaid carers (family and friends who provide personal assistance and care to adults on an unpaid basis). The definition may include victims of Domestic Abuse, hate crime, anti-social behavior, self-neglect and mandatory reporting of Female Genital Mutilation (FGM). see further information here <https://intranet.cruse.org.uk/node/900>

The presence of a particular condition or disability does not automatically mean that an adult is an adult at risk. A person can have a disability but be perfectly able to look after their own well-being etc. Their circumstances as a whole should be considered and all three elements of the definition must be met in order for them to be classed as an adult at risk.

6.2 **What is ‘harm’?**

The definition of “harm” referred to in this policy does not exclusively pertain to ill treatment (including sexual abuse and all forms of ill treatment which are not physical), but includes the impairment of, or an avoidable deterioration in physical, or mental health or emotional wellbeing.

6.3 **What is ‘abuse’?**

Abuse pertains to the violation of an individual’s human and civil rights by another person or persons. It may consist of a single or repeated act. It may be an act of neglect (abuse by omission) or it may occur when a vulnerable adult is persuaded to enter into a financial transaction or sexual act to which he/she has not consented or whose consent was deemed diminished due to a lack of understanding.

Abuse results in significant harm, or exploitation of, the vulnerable adult. It may be perpetrated by anyone who has power over the person whether as a carer, relative, paid

member of staff, volunteer or spouse, or as a result of persistently poor care or a rigid and oppressive regime. When occurring in a family, this can be termed as 'domestic abuse', the most common being between spouses, or parents and children.

6.4 The main forms of abuse

- Self-neglect
- Signs
- Physical Abuse
- Misuse of Medication
- Sexual Abuse
- Psychological/Emotional/Mental Abuse
- Financial or Material Abuse
- Female Genital Mutilation
- Modern Slavery
- Exploitation
- Discriminatory
- Domestic violence
- Neglect and Acts of Omission
- Discriminatory Abuse
- Institutional Abuse
- Multiple forms of Abuse
- Patterns of Abuse/Abusing

Explanations and examples of the above can be found in the Procedures for Safeguarding at Appendix 1.