

Safeguarding Adults Policy

PURPOSE

- To ensure that New Forest Mencap (NFM) is taking reasonable steps to protect the people who use its services from harm.
- To ensure that workers (paid and unpaid) know how to recognise and refer or report concerns.
- To set out a clear system of referring or reporting to relevant organisations as soon as any worker suspects or identifies concerns or allegations against NFM workers are made.

INTRODUCTION

New Forest Mencap is an organisation which provides support and services to people with learning disabilities and their parent carers and families. Many of those who use these services will be adults with care and support needs and therefore may be adults at risk. Safeguarding duties apply to all New Forest Mencap workers (paid or unpaid), including staff, volunteers, Trustees, and those delivering services under an Agreement with New Forest Mencap, every worker (whether or not they are in direct contact with those who use NFM services) has a duty to take action if abuse of an adult with care and support needs is suspected/disclosed. Appropriate safeguarding training will form part of any worker induction programme.

This policy should be read in conjunction with all other New Forest Mencap policies but significantly with the Confidentiality policy, the Whistleblowing policy and the Disclosure and Barring Services policy.

A separate policy is available to provide feedback regarding the quality of services/activities provided by NFM.

1. DISCLOSURES OF ABUSE AND SUSPICIONS OF ABUSE

New Forest Mencap requires that all workers (paid or unpaid) act in a timely manner where:

- An adult with care and support needs has made a disclosure about being harmed or being at risk of harm,
- There is concern or suspicion that an adult with care and support needs is being harmed or is at risk of being harmed.

New Forest Mencap considers “harm” to be as broadly defined in appendix I of this document, but the definition is not limited only to the examples given there.

A) DISCLOSURES OF ABUSE

The worker's primary responsibility is to protect the adult making the disclosure.

Disclosures of abuse will always be reported to the relevant Safeguarding Board and/or the police. Consent to do this will be obtained from the person making the disclosure but where consent is not given, or capacity is not evident in this regard, this can be overridden in accordance with the Confidentiality policy (and a record of this made in accordance with this policy).

Procedure

1. If a disclosure of abuse is made to a New Forest Mencap worker, the worker should:
 - listen carefully
 - remain calm
 - explain their duty to report (discussing consent and confidentiality)
 - give reassurance
 - protect the person (if it is a police or medical emergency)
 - make an immediate evaluation of the risk and take reasonable and practical steps to ensure that the adult is not in any immediate danger
 - not press for details
 - not ask for details
 - not ask leading questions (i.e. introduce new concepts)
 - not give sweeping reassurances
 - not stop the flow, make comment or judgment
 - not confront the alleged abuser
 - record (write down) what the person making the disclosure actually said – no paraphrasing or summarising on the NFM Reporting a Safeguarding Disclosure form (appendix ii) (if you do not have a Report of a Safeguarding Disclosure form to hand you may append your written account to a form later and sign the declaration on the form then) The worker to whom the disclosure has been made should also contact the external agencies named on the Reporting a Safeguarding Disclosure form and record any advice received on that form.
2. a) Support the service user to contact the police and / or the Safeguarding Board and ensure that they do so immediately after the disclosure.

b) If the service user does not feel able to do this, the New Forest Mencap the worker to whom the disclosure has been made should obtain the consent of the service user to contact the police and / or Safeguarding Board and contact them directly themselves.

c) Where consent is not given, or there is no capacity to give consent, this can be overridden in accordance with the Confidentiality policy.
3. The disclosure must be reported to the Designated Safeguarding Lead (Operations Manager) who will ensure that the details are recorded in a central Record of Disclosure of Harm (which will only give the name of the person making the disclosure and a record of to whom in the police or Safeguarding Board the disclosure information was passed to)(appendix iii)

4. Any conditions of the current insurance policies held by NFM with regard to safeguarding disclosures must also be followed.

B) SUSPICIONS OF ABUSE

New Forest Mencap workers should discuss any suspicions (based on what they see not what they feel) with the Designated Safeguarding Lead on the same day as they occur. If the Chair of the Trustees determines that action needs to be taken in this regard, they will determine who will contact the Safeguarding Board to discuss the suspicion, record their advice and record any subsequent actions taken by New Forest Mencap. If it is agreed that the worker who has the suspicion will make this contact, they will also report back to the Designated Safeguarding Lead by email any advice or actions given by the Safeguarding Board.

2. ALLEGATIONS AGAINST NEW FOREST MENCAP WORKERS (PAID OR UNPAID)

Any allegations or concerns about the conduct of a New Forest Mencap worker towards a New Forest Mencap service user will be taken seriously and should be immediately reported to the Chair of the Trustees of New Forest Mencap. An investigation will be undertaken as follows:

- an impartial investigator will be appointed (this may be an internal or external person)
- the investigation will be in respect of the allegation made. If further areas of concern manifest these will be advised to the Trustees separately for their consideration for additional investigations.
- the investigator should document all witness testimonies.

Following the investigation, the Trustees may designate the allegation as:

- a) demonstrably false
- b) unprofessional practice which can be addressed with performance management or through the disciplinary procedures
- c) an Adult Safeguarding concern in which case the section of this policy "Disclosures of Abuse" or "Suspicions of Abuse" will be used.

If a worker (paid or unpaid) tenders their resignation or a contractor ceases to provide their services following an allegation being made, New Forest Mencap will continue to implement this policy.

If New Forest Mencap dismisses or removes a worker (paid or unpaid) from working with vulnerable adults because they have harmed a vulnerable adult through their actions or inactions (relevant conduct¹), or

¹ Relevant conduct in relation to vulnerable adults is conduct which: • Endangers a vulnerable adult or is likely to endanger a vulnerable adult • If repeated against or in relation to a vulnerable adult, would endanger an adult or would be likely to endanger them • Involves sexual material relating to children (including possession of such material) • Involves sexually explicit images depicting violence against a person (including possession of such images), if it appears to DBS that the conduct is inappropriate • Is of a sexual nature involving a vulnerable adult, if it appears to DBS that the conduct is inappropriate. A person's conduct endangers a vulnerable adult if they: a. Harm a vulnerable adult, b. Cause a vulnerable adult to be harmed, c. Put a vulnerable adult at risk of harm, d. Attempt to harm a vulnerable adult, or e. Incite another to harm a vulnerable adult -

because they represent a risk of harm to an adult with care and support needs (i.e. satisfied the harm test²), or have received a caution or conviction for a relevant offence, the Designated Safeguarding Lead will

- a) make a referral to the police and/or the local Safeguarding Board (and confirmation gained that, if relevant, either of those bodies will be making a referral to the Disclosure and Barring Service)
- b) adhere to any conditions of the current insurance policies held by NFM with regard to safeguarding
- c) initiate a review into working arrangements
- d) deal with the employment/volunteering of the worker in accordance with the NFM HR policy.

3. DIGITAL SAFEGUARDING

New Forest Mencap will apply the same rigorous levels of safeguarding with respect to its online activities as it does to its in-person activities, whilst recognising that additional safeguards and processes may be required in this environment.

All correspondence sent by email from New Forest Mencap workers (paid or unpaid) should come from a @newforestmencap.org email address or other email address managed by New Forest Mencap.

Any data regarding NFM, its clients or business should not be downloaded onto personal computers. Where possible an NFM device should be used to read NFM email accounts, return attendance information and similar activities.

Where services and activities are delivered by online platforms (e.g., zoom, Teams, Facebook live) the access codes for these should only be available to people who are registered with New Forest Mencap. Publicity regarding online meetings should not include access codes and service users are requested not to share access codes with other people.

All New Forest Mencap online services will be delivered via the New Forest Mencap zoom account (or similar account in the name of New Forest Mencap) – personal meeting rooms set up on personal accounts should not be used.

All New Forest Mencap online services must be attended by a New Forest worker (paid or unpaid), including where the activity is led by an external contractor.

DBS Referral Guide FAQs

² Harm Test - To satisfy the harm test there needs to be credible evidence of a risk of harm to children or vulnerable adults such as statements made by an individual regarding conduct/behaviour, etc. For a case to be considered as a risk of harm, relevant conduct would not have occurred but there must be tangible evidence rather than a “feeling” that a person represents a risk to children and / or vulnerable adults. For example, a teacher who confides in their head teacher that they are sexually attracted to children (but who had not engaged in ‘relevant conduct’) would satisfy the harm test = DBS Referral Guide FAQs

If someone should gain access to a New Forest Mencap online activity who is not registered with New Forest Mencap, the worker hosting the session will ask for information about how they obtained the code and request that they complete a registration form before they can join a future session.

The New Forest Mencap Service Delivery policy also applies to the delivery of online services or activities. In addition to this, any online group such as a Facebook group or WhatsApp group offered by New Forest Mencap will be moderated by them.

Safeguarding with regard to data held by New Forest Mencap (including the use of images on advertising and social media) is covered in the New Forest Mencap Data Protection policy.

4. HISTORICAL ABUSE DISCLOSURES and SUSPICIONS

Historical abuse is where abuse occurred to the person before they attained age of 18 years. If information of this nature is shared with an NFM worker, they should aim to:

- a) establish if the individual is aware of the alleged abuser's recent or current whereabouts,
- b) establish if the individual is still in contact with the alleged abuser,
- c) support the service user to contact the police and / or the Safeguarding Board and ensure that they do so immediately after the disclosure,
- d) gain consent to share this information with other agencies including the police,
- e) where consent is not given, or there is no capacity to give consent, this can be overridden in accordance with the Confidentiality policy.

5. RECRUITMENT AND SAFEGUARDING

See NFM Use of Disclosure and Barring Service policy and the HR policy and regarding safer recruitment and ongoing duty for workers to disclose relevant information.

6. GOOD PRACTICE

- NFM Registration forms will include information with regard to availability of our Safeguarding and Confidentiality policies.
- Accessible information with regard to the NFM Safeguarding policy and procedures should be displayed during any NFM activity or service.

MEASURABLE INDICATORS OF IMPLEMENTATION

- training records will show that workers have received Safeguarding training.
- All disclosures of harm will be acted upon and records held centrally in this regard.
- All suspicions of harm will be acted upon, and records held centrally in this regard.
- All allegations of harm will be acted upon, and records held centrally in this regard
- A Record of Harm will be kept centrally
- Safeguarding information is visible during any NFM service/activity.

Review of this policy is due: Annually as per guidance from the Charity Commission

Change History

Issue	Date	Author	Reason	Approved
1.0	August 2019	Jackie Lillywhite	Revised policy	
1.1	January 2021	Jackie Lillywhite	Amendment re digital service delivery	
1.2	January 2023	Jackie Lillywhite	To align with NFM chosen safeguarding training for all workers (paid and unpaid)	Approved January 13 th , 2023, by Trustees
1.3	March 2023	Michael Snell	Word Document with minor drafting corrections	

Appendix i

Type of abuse	For example,	Possible indicators
Physical	Hitting, slapping, pushing, shaking, dragging, kicking, medication misuse, restraint, inappropriate physical sanctions, causing discomfort/withholding care, putting at risk of infection	History of unexplained injuries, bruising, slap marks, grip marks (arms, legs, inner thighs), black eyes and injuries to face/scalp, marks made by implements, pattern and colouration indicating repeated incidents, burns or scalds, bite marks, unexplained ulcers, or pressure sores, flinching
Psychological	Anything that adversely impacts a person's emotional wellbeing, threats or harm or abandonment, intimidation, harassment, depriving choice/privacy, humiliation or ridicule, opinions disregarded, living in a culture of fear or coercion, denying access to social activities, having opinions and behaviours explained solely in terms of a person's age, gender, disability, sexuality, ethnicity or religion, unjustified withdrawals of services or supportive networks	Uncharacteristic behaviour, loss of interest, withdrawn, anxiety or depressed, fearful, irritation, aggressive or challenging, poor concentration, sleep disturbance, self-harm, eating problems, weight loss/gain
Financial	Exploitation or misappropriation of a person's funds or property, not allowing them to manage money or denying them access to their personal funds or benefits, money or possessions stolen, money borrowed by staff or volunteers who have responsibility to provide services, unauthorised disposal of property or possessions, being asked to part with money under false pretences, coercion in relation to an adult's financial affairs or arrangements, including in connection with misappropriation of property, possessions or benefits	Unexplained inability to pay bills, Power of Attorney obtained when person lacks capacity, unexplained withdrawal of money from accounts, person lacking goods or services they can afford, extortionate demands for payments for services or work done
Neglect and acts of omission	Deliberate or unintentional failure to provide basics, failure to respond to needs or preventing someone else to meet their needs, withholding care or access to medical help, isolation, failure to report abuse, failure to undertake responsible risk assessment and allow persons to harm themselves, in appropriate use of medication, over medicating or withholding medication. <i>Self-neglect is not an adult protection issue but should be raised with the person responsible for their care</i>	Cold or dark accommodation, neglect of accommodation, poor physical condition, e.g., ulcers, clothing or bedding soiled or wet, failure to assess health and social care, weight loss or gain through unsuitable food
Institutional	Collective failure where rituals and routines of the institution force the individual to sacrifice their own lifestyle. Failure to ensure adult protection policy and procedures are in place and complied with. Failure to provide appropriate level of awareness and training on adult protection. Batch care. Use of power. Deprived environment. Lack of personal possessions.	Unacceptable practice encouraged, tolerated, or left unchanged, organisational standards not being met, service users not treated with dignity or respect, diverse needs not recognised, services are inflexible, communication with family/carers discouraged, insufficient staff training
Discriminatory	Values, beliefs and culture or the majority results in a misuse of power that denies equal opportunities to some minority groups or individuals, verbal abuse, unequal treatment, deliberate exclusion from services	Lack of respect for individual beliefs and cultural backgrounds, signs of sub-standard service offered to a minority group or individuals, repeated exclusion from rights afforded to other citizens, isolation due to language barriers
Sexual	The involvement of people in sexual activities for which they have not given consent or do not fully understand or were pressured into consenting to, the other party is a close relative, and the action would be incestuous, rape, touching or being forced to touch, forced to watch pornography, innuendo or harassment, not having the choice of a male or female carer for intimate personal care	Disclosure either direct or hints, veiled comments, partial disclosure, repetition of phrases like "it's a secret" or "I will hurt you", urinary tract infections or STDs, pregnancy, difficulty walking or standing, torn or stained underclothing or bedding, bruising to the thighs/under arms, bleeding; bruising, torn tissue or injury to rectal or vaginal area, promiscuity, explicit/seductive language, self-harm, obsession with washing, fear of pregnancy that may be exaggerated, substance misuse, change in appearance or self-neglect

Radicalisation	Exposing an adult to extreme ideas which could lead to terrorism	Service users being pressurised to change values or beliefs, encouraged to feel hate or anger towards certain people or groups and encouraged to want to hurt them

Disability and Hate Crime	Violence or hostility towards someone because they have a disability/disabilities, or are associated with someone who has a disability/disabilities (e.g., the parent of a child with disability)	People may be throwing things in your garden or damaging your property. Sometimes, disputes with neighbours escalate into verbal or physical abuse
Domestic Abuse	Violent or aggressive behaviour within the home, typically involving the violent abuse of a spouse or partner.	<p>symptoms of depression, anxiety, post traumatic stress disorder, sleep disorders, suicidal tendencies or self-harming, alcohol or other substance misuse, unexplained chronic gastrointestinal symptoms, unexplained gynaecological symptoms, including pelvic pain and sexual dysfunction, adverse reproductive outcomes, including multiple unintended pregnancies or terminations, delayed pregnancy care, miscarriage, premature labour and stillbirth or concealed pregnancy, genitourinary symptoms, including frequent bladder or kidney infections, vaginal bleeding or sexually transmitted infections, chronic unexplained pain, traumatic injury, particularly if repeated and with vague or implausible explanations, problems with the central nervous system – headaches, cognitive problems, hearing loss, repeated health consultations with no clear diagnosis. The person may describe themselves as ‘accident prone’ ‘silly’, intrusive ‘other person’ in consultations, including partner or spouse, parent, grandparent, or an adult child (for elder abuse).</p> <p>Forced marriage or other “honour based” violence</p>
Female Genital Mutilation	The partial or total removal of the external genitalia of girls and young women for non-medical reasons	Girls living in communities that practice FGM are most at risk. It can happen in the UK or abroad. In the UK, the Home Office has identified girls and women from certain communities as being more at risk: Somali, Kenyan, Ethiopian, Sierra Leonean, Sudanese, Egyptian, Nigerian, Eritrean, Yemeni, Kurdish and Indonesian
Human Trafficking	the action or practice of illegally transporting people from one country or area to another, typically for the purposes of forced labour or sexual exploitation.	<p>Be fearful of police/authorities; Be fearful of the trafficker, believing their lives or family members’ lives are at risk if they escape; Exhibit signs of physical and psychological trauma e.g. anxiety, lack of memory of recent events, bruising, untreated conditions; Be fearful of telling others about their situation; Be unaware they have been trafficked and believe they are simply in a bad job; Have limited freedom of movement; Be unpaid or paid very little</p> <p>Have limited access to medical care; Seem to be in debt to someone; Have no passport or mention that someone else is holding their passport; Be regularly moved to avoid detection. Be controlled by use of witchcraft e.g., Ju Ju</p>

Mate Crime	Befriending a vulnerable person in order to take advantage of them by asking for money, asking the vulnerable person to pay for lots of things, steal from them or hurt them.	Suddenly appearing to have a new friend, or a much later friendship group or a more active social life. These new people seem to have an undue influence. They may be visiting the vulnerable person at home for social. The vulnerable person may comment that his friends will be disappointed if a certain activity doesn't take place, they may express worry that they will lose their friends, they may appear uneasy about the friendship. The vulnerable person may be spending his own money to pay for concert tickets for others or taxi fares or rounds of drinks. They may be buying gifts for other people or giving away precious possessions
Modern Slavery	Commercial exploitation, e.g., working long hours, disproportionately low/no income	Movements are restricted, not being allowed to leave house on own, having to follow strict instructions about where you are allowed to go or who you can talk to. Collected or dropped off for work at unusual hours to avoid being seen by members of the public, looking injured or malnourished, living in dirty or overcrowded accommodation, a lack of belongings, passports and ID taken from them, avoiding eye contact and a reluctance to talk to strangers.

