

Safeguarding Vulnerable Adults Policy



This policy applies to: all employed and voluntary staff

Responsibility under the Policy: Trustees have the overall responsibility for this policy but the CEO has the responsibility for the operational implementation and ensuring its review.

Date Agreed: April 2021

a) Statement of policy

- i) Folkestone Rainbow Centre recognises and respects the rights of vulnerable adults to live in safety, free from harm or exploitation.
- ii) It is committed to and will champion the protection of vulnerable adults both in society as a whole and its own operations and activities. It will set best practice standards for working with vulnerable adults within its own operations and activities and will promote best practice within both Folkestone Rainbow Centre and the wider community. It will work with statutory bodies, private and voluntary organisations, and other faith communities to promote the safety and well-being of vulnerable adults.
- iii) It will take all measures necessary to safeguard vulnerable adults from any abuse or other significant harm that may result from action(s) or inaction(s) by its employees, volunteers and others working on its behalf.
- iv) It will act promptly whenever a concern is raised about a vulnerable adult or about the behaviour of another person towards a vulnerable adult, and it will work with the appropriate statutory bodies when an investigation into adult abuse is necessary.

It is not the responsibility of staff or volunteers to determine whether abuse has taken or is taking place; our responsibility lies in reporting disclosures and concerns to the relevant and appropriate people.

b) Definitions and Descriptions

- i) The term **vulnerable adult** refers to a person over the age of 18 who is or may be in need of community care services by reason of mental or other disability, age or illness and who is or may be unable to take care of him or herself or unable to protect him or herself against significant harm or exploitation.

Vulnerable adults may:

- (i) be older people
- (ii) have mental health needs
- (iii) have a physical disability or sensory impairment
- (iv) have a learning disability
- (v) have a chronic disabling illness
- (vi) misuse substances or alcohol
- (vii) have dementia

- ii) **Harm** includes not only ill treatment (including sexual abuse and forms of ill treatment that are not physical) but also the impairment of, or an avoidable deterioration in, physical or mental health; and the impairment of physical, emotional, intellectual, social or behavioural development.
- iii) **Abuse** is any behaviour towards a person that deliberately, or unknowingly, causes him or her harm, endangers their life, or violates their rights. It may be physical, sexual, psychological, financial or material, and may include neglect and failure to provide appropriate care.

Abuse can take place in the person's home, day centre, family home, community setting and in public places (including churches and ancillary buildings). Abuse can take various forms:

iv) **Physical**

Non-accidental harm to the body caused by the use of force, which results in pain, injury or a change in the person's natural physical state. It may include:

- | | |
|------------|---------------------------------------|
| - Hitting | - Forcing |
| - Slapping | - Restraining |
| - Pushing | - Withholding or misuse of medication |
| - Kicking | - Squeezing |
| - Shaking | - Biting |

v) **Psychological/Emotional**

Behaviour that has a harmful effect on a vulnerable adult's emotional health and development. It may include:

- | | |
|--|-----------------------|
| - Lack of privacy/choice | - Humiliation |
| - Denial of dignity | - Blaming |
| - Deprivation of social contact/deliberate isolation | - Controlling |
| - Made to feel worthless | - Pressuring |
| - Lack of love or affection | - Coercion |
| - Threats | - Fear |
| - Verbal attitude | - Ignoring the person |

Financial or Material

The use of a vulnerable adult's property, assets, income without their informed consent or making financial transactions that they do not understand to the advantage of another person. It may include:

- Stealing or misappropriating money
- Taking possessions
- Using pressure to obtain rights to property
- Preventing the sale of property
- The inappropriate use of power of attorney and other financial authority given

vi) Neglect and Acts of Omission

Behaviour by another person that results in the vulnerable adult's basic needs not being met.

It may include:

- Failure to intervene in situations where there is danger to the vulnerable person or to others, particularly when a person lacks the mental capacity to assess risk
- Not giving personal care
- Depriving access to sensory or mobility aids
- Withholding food, drink, light and clothing
- Restricting access to medical services
- Failing to administer medication
- Depriving access to appropriate stimulation

v) Sexual

The involvement of a vulnerable adult in sexual activities or relationships that are for the gratification of the other person and which they have not consented to; or cannot understand and are not able to consent to; or violate sexual taboos of family custom and practice.

It may include:

- Indecent assault
- Touch
- Sexual intercourse
- Being forced to touch another person
- Indecent exposure
- Being forced to participate in or watch activity of a sexual nature
- Exposure to pornographic material

vi) Discriminatory

This is behaviour that makes or sees a distinction between people as a basis for prejudice or unfair treatment.

It may include:

- Harassment
- Verbal abuse
- Failure to provide appropriate care, or similar unfair treatment, based on a person's race, gender, age, culture, sexual orientation or disability

vii) Institutional

Not strictly a separate category of abuse in itself, it may include incidents of abuse as previously defined. It may occur in any residential setting, nursing or day care setting, supported or sheltered housing. It may be generalised pervasive ill treatment affecting large numbers of vulnerable adults, which arises when care standards and practices fall below the required levels and thresholds, or it may be specific incidents of abuse of one or more vulnerable adults within an institution.

Key risk factors are:

- Poor management
- Rigid routines in waking, bedtimes, etc.
- Lack of positive responses to complex needs
- Lack of knowledge and understanding by staff
- Lack of training
- Lack of supervision and professional support

- Uncertainty about boundaries between personal and professional relationships
- Fear of reprisal if issues of concern are raised.

c) Recognising abuse

The following information is designed as a guide to help staff and volunteers become more alert to, and aware of, signs of possible abuse.

Recognising possible abuse is a complex and complicated procedure. It is not the responsibility of staff or volunteers to decide whether a vulnerable adult has been abused or is at significant risk. There is however a responsibility to act on any concerns and report them in accordance with the reporting procedures.

The lists below are purely indicators. The presence of one or more does not necessarily confirm abuse.

Physical

- (1) A history of unexplained falls or minor injuries
- (2) Bruising or burns of unusual location or type
- (3) Finger marks
- (4) Being excessively withdrawn and or compliant
- (5) Appearing frightened of / avoiding physical contact

b) Psychological/emotional

- i) Inability to sleep or excessive need of sleep
- ii) Changes in appetite
- iii) Low self esteem
- iv) Tearfulness and agitation
- v) Excessive fear or defensiveness
- vi) Self-harm
- vii) Aggressive or challenging behaviour.

c) Financial or Material

- i) Unexplained or sudden refusal to pay bills
- ii) Unexplained or sudden withdrawal of money from accounts
- iii) Unexplained disappearance of personal possessions from home
- iv) Extraordinary interest by family members and other people in the vulnerable person's assets
- v) Evasiveness or lack of co-operation by person managing financial affairs.

d) Neglect

- i) Poor physical state of person and/or their home
- ii) Fainting/collapse due to dehydration/malnutrition
- iii) Inappropriate clothing for time of year
- iv) No means of calling for assistance
- v) Failure to respond to prescribed medication.

e) Sexual

- i) Withdrawal, choosing to spend the majority of time alone

- ii) Explicit or untypical sexual behaviour / language by the vulnerable person
- iii) Self-inflicted injury
- iv) Disturbed sleep patterns
- v) Torn, stained, or bloody underclothes
- vi) Bruising to thighs and arms
- vii) Reluctance to be bathed or accept personal care
- viii) Obsession with washing
- ix) Untypical urinary or faecal incontinence

f) Institutional

In residential and nursing homes

- i) Lack of flexibility and choice for residents in waking/bedtimes
- ii) Lack of opportunity to obtain drinks and snacks
- iii) Lack of choice over meals
- iv) Lack of appropriate bedding or heating
- v) Lack of personal possessions
- vi) Lack of procedures in financial management, medical matters and other care issues
- vii) Denial of privacy in personal care, such as toileting, bathing, dressing; editing mail; restricting visits
- viii) Use of other residents' or 'pooled' clothing
- ix) Breaches of residents' confidentiality
- x) Unjustified restraint
- xi) Lack of action to deal with abuse

In supported or sheltered housing

- xii) Staff using master keys without due cause
- xiii) Staff entering rooms/flats without permission or not waiting for a reply after knocking
- xiv) Breaches of residents'/tenants' confidentiality
- xv) Restrictive practices in the use of communal facilities

The above lists are not definitive. They are a guide to assist staff and volunteers in becoming more aware. Vulnerable adults may show some of these indicators at some time; however, the presence of one or more should not be taken as proof that abuse is occurring or has occurred.

d) Dealing with disclosures of abuse

- i) In the event of a worker (staff-member or volunteer) receiving a disclosure of abuse, the worker will:
 - (1) listen carefully to what the vulnerable adult is saying without interrupting;
 - (2) reassure the vulnerable adult that s/he is right to tell someone;
 - (3) make clear that s/he is taking the vulnerable adult seriously and acknowledge how difficult it must be for the vulnerable adult;
 - (4) explain, at an appropriate time as early as possible, that because of the seriousness of the matter and our concern for the person's health, safety and well-being, the

- information provided by the vulnerable adult will need to be shared with others who need to know;
- (5) ask questions only for clarification and avoid asking questions that suggest particular answers or are in any way probing;
 - (6) let the vulnerable adult know what will happen next, to whom the information is to be passed on, and what will happen once it has been passed on;
 - (7) undertake to keep the vulnerable adult informed as to any action that is proposed and to offer support through that process, if that is requested.
 - (8) as soon as possible, record all the details of what was said, using the exact words that the vulnerable adult has used and not interpreting any of the information.
- ii) The worker will inform his/her line manager of the situation immediately. The worker will also make direct contact with one of the department's designated safeguarding co-ordinators, at the earliest opportunity. Contact with the safeguarding co-ordinator must not be delayed because the line manager is not available. The safeguarding co-ordinator will decide whether to make a referral to either the social services duty team or the police. All serious allegations of abuse will be referred.
 - iii) A departmental safeguarding report form will be completed and will be signed and dated by the worker and the safeguarding co-ordinator.

e) Reporting concerns

Concern about the possibility of abuse or significant harm must be reported to the worker's line manager and to a designated safeguarding co-ordinator at the earliest opportunity. The safeguarding co-ordinator will determine with the worker the appropriate course of action:

- i) further clarification is needed;
- ii) there is no cause for concern and no further action is necessary;
- iii) there is no cause for immediate concern but the situation should be monitored and recorded;
- iv) consultation with social services is required within a defined timescale;
- v) there is immediate cause for concern and the matter will be referred to social services or the police by the Safeguarding Co-ordinator.

f) Recording

- i) Disclosures and concerns must be recorded as soon as possible and, at the latest, within 24 hours of the situation arising, using the safeguarding report form in the appendix.
- ii) Recording will include:
 - (1) date and time of disclosure or concern being raised;
 - (2) details of the incident(s) of abuse disclosed or giving rise to concern (e.g. any relevant conversations that took place, details of any injury, etc);
 - (3) any action taken by the worker/safeguarding co-ordinator.
- iii) All records of disclosures or concerns must be signed and dated by the worker and the safeguarding co-ordinator. All records will be kept securely at Folkestone Rainbow Centre.

g) Recruitment to posts involving contact with vulnerable adults

- i) **Advertising:** All advertisements will include a statement that appointment to the post(s) is subject to a satisfactory Enhanced Disclosure through the Disclosure and Barring Service.
- ii) **Salaried posts:** All applicants will be required to:
 - (1) complete an application form, giving a full employment history and accounting for any breaks in employment;
 - (2) provide the names and contact details for two referees, one of whom must be the current or most recent employer;
 - (3) give consent to the department to carry out checks on all information provided, including obtaining an Enhanced Disclosure through the Disclosure and Barring Service.
- iii) **The application form** will be explicitly worded to gain information from applicants about paid or voluntary work with vulnerable adults.
- iv) **References** will be taken up and made available to the panel. A standard template for references will be used. Referees should:
 - (1) be reminded that references should contain no material mis-statement or omission relevant to the suitability of the candidate;
 - (2) be advised that they can be held liable if the reference is defamatory or conceals information which should be known to the prospective employer who suffers damage as a result;
 - (3) have direct experience of the candidate;
 - (4) be encouraged to comment frankly on the candidate's strengths and weaknesses in relation to the post they have applied for;
 - (5) be asked about previous disciplinary offences;
 - (6) be followed up by telephone when necessary.
- v) **Interviews** for short-listed applicants will be conducted by a panel comprising at least two people. Those attending for interview will be asked to provide documentary evidence relating to qualifications and other learning and two means of personal identification (one of which must include a photograph, e.g. passport or new-style driving licence; the other proof of address, e.g. utility bill, bank statement).
- vi) **Any offer of appointment** will be subject to the required level of disclosure from the Disclosure and Barring Service.
- vii) All appointments will be subject to a **3-month probationary period**.

h) Volunteers

- i) Prospective volunteers who will be working with vulnerable adults will be required to:
 - (1) complete an application form
 - (2) provide the names and contact details for two referees, one of whom should be the current or most recent employer and one of whom should have knowledge of any previous volunteering with vulnerable adults or other service-users;
 - (3) give consent to the department to carry out checks on all information provided, including obtaining an Enhanced Disclosure through the Disclosure and Barring Service.

- ii) Interviews for volunteer posts will be conducted by a panel comprising at least two people. The panel will address issues relating to adult protection and will ask specific questions about the candidate's criminal record, if they have one. Those attending for interview will be asked to provide documentary evidence relating to relevant qualifications and other learning and two means of identification (one of which must include a photograph, e.g. passport or new-style driving licence; the other proof of address, e.g. utility bill, bank statement).

i) Disclosure and Barring Service

- i) All staff and volunteers where relevant, will be checked with the Disclosure and Barring Service prior to appointment and at three-year intervals thereafter.

- ii) A Disclosure and Barring Service check from an applicant's current employer will be acceptable only if:
 - (1) it is less than 12 months old
 - (2) it is at the required level
 - (3) it applies to working with vulnerable adults
 - (4) it is 'clear' it is supported by a positive reference from the employer

j) Staff and volunteer management

- i) Newly-appointed staff will receive a copy of the safeguarding policy and procedures in their induction pack and will receive a briefing from their line manager. It is the responsibility of the line manager to ensure that the staff-member fully understands the policy and procedures and how these govern the work s/he is doing.

- ii) All staff working with vulnerable adults will receive regular one-to-one management supervision (at least monthly). Those working in teams will also receive supervision through regular team meetings. All staff will be made aware that they can access support and additional supervision from managers on request, and that managers operate an 'open door' policy. Staff will also be made aware that managers are available out of hours, should any situation arise in which staff require guidance or support.

- iii) All volunteers working with vulnerable adults will receive information on the policy and procedures, as relevant to their role and activity, and will be inducted into those procedures by their manager and the volunteer co-ordinator. It is the responsibility of the manager to ensure that the volunteer fully understands the policy and procedures and how these govern the work s/he is doing.

- iv) All volunteers will receive supervision and support appropriate to their role and level of activity with vulnerable adults.
- v) All relevant staff and volunteers will receive training in abuse awareness and protection procedures to the level appropriate for their role.

k) Complaints and Representations

- i) All service-users will be given accessible information on complaints and representations procedures, as will carers, social workers and others concerned with the welfare of vulnerable adults with whom we work.
- ii) Service-users and their carers, social workers, etc will be encouraged and enabled to let us know their views on the services we provide through regular feedback opportunities.
- iii) Reports on complaints and representations and their outcomes will be presented to the relevant departmental committee on a regular basis.

l) Dealing with allegations

- i) In the event of an allegation being made against a paid worker or volunteer, that person will be suspended from post pending the outcome of an internal inquiry. The matter may also be referred to the police or social services.
- ii) A paid worker who is shown to have breached codes of practice or displayed improper conduct will be subject to the employer's disciplinary procedures (which are not dependent on the outcome of any criminal investigation). Disciplinary procedures will be pursued to a final conclusion even if the suspended worker resigns from post. Where appropriate, details will be submitted to the relevant government department for possible inclusion on the Protection of Vulnerable Adults List.
- iii) A volunteer who is shown to have breached codes of practice or displayed improper conduct will be dismissed and, where appropriate, details submitted to the relevant government department.
- iv) If the paid worker or volunteer holds a Bishop's Licence or is an authorised minister within any denomination or faith community, the details of the allegation and subsequent action will be passed to the relevant authorities within that denomination or faith community.
- v) In the event that an allegation is not proven to be true, managers will arrange to meet with the paid worker or volunteer to agree the arrangements for his/her return to work/activity.
- vi) If another worker is concerned that a colleague may be breaching a Code of Practice/Conduct, s/he must report that concern to their line manager at the earliest opportunity. If it appears to the worker that the manager has not taken any action in

respect of their concern, the worker should refer the matter to a designated safeguarding co-ordinator.

m) Overseeing safeguarding procedures

The responsibility for overseeing the effective operation of these procedures lies with Folkestone Rainbow Centre's designated safeguarding coordinators and the Chair of Trustees.

Key Contact Personnel at the Rainbow Centre

Designated Safeguarding Lead (DSL)

CEO: Mary Stredwick – 01303 850733; 07979323260;
mary@rainbow-centre.org

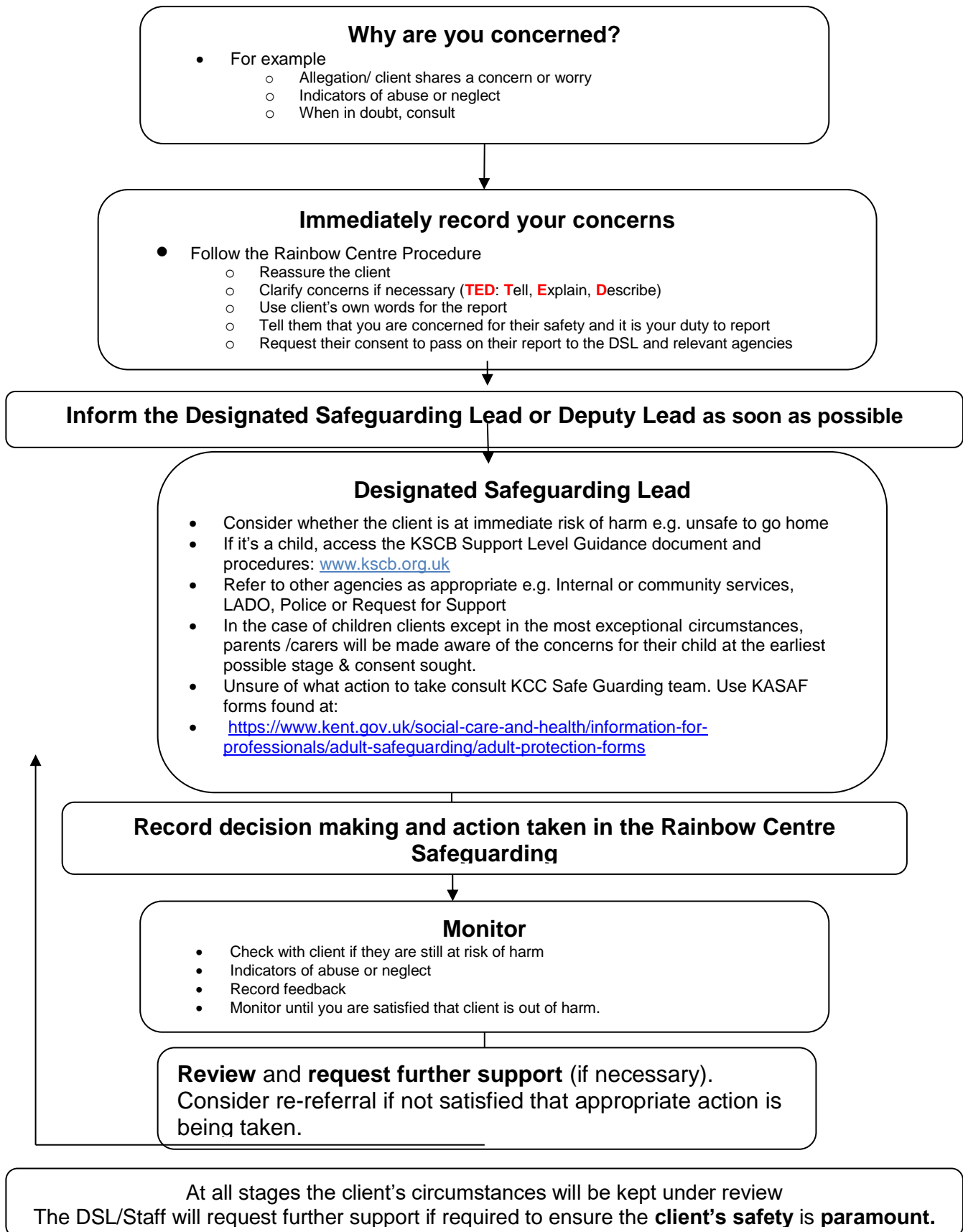
Deputy Designated Safeguarding Leads

- Office Manager: pending training
- HSS Manager: pending appointment & training

Named Safeguarding Trustee: Liz Pettersen

At induction all staff, Trustees and Volunteers are required to read the appropriate Safeguarding Policy & Procedures and sign to say they have read and understood its contents.

What to do if you have a safeguarding concern (Procedure)



The role of the Rainbow Centre in situations where there are client safe guarding concerns is NOT to investigate but to recognise and refer.

Designated Safeguarding Lead (DSL)

- The Designated Safeguarding Lead (DSL) has the overall responsibility for the day to day oversight of safeguarding in the Rainbow Centre and its community outreach venues.
- The DSL will undergo appropriate and specific training to provide them with the knowledge and skills required to carry out their role. The DSL and any deputy DSL's training will be updated formally every two years but their knowledge and skills will be updated through a variety of methods at regular intervals and at least annually.
- Deputy DSLs are trained to the same standard as the DSL as they are the senior managers at community venues. Whilst the activities of the DSL may be delegated to the deputy and other managers, the ultimate lead responsibility for safeguarding and client protection remains with the DSL and this responsibility will not be delegated.
- **It is the role of the DSL to:**
 - Act as the central contact point for all staff to discuss any safeguarding concerns
 - Maintain a confidential recording system for safeguarding and client protection concerns and keep all cases under constant review until resolved.
 - Coordinate safeguarding action for individual clients.
 - Seek advice or guidance from relevant Kent County Council Social Services, and/or the police before making a decision regarding next steps.
 - Represent, if requested the Rainbow Centre at multi-agency safeguarding meetings.
 - Ensure all staff and volunteers access appropriate safeguarding training and relevant updates and are aware of help support services. The DSL and the Lead Safeguarding Trustees will provide an annual report to the Governing Body detailing safeguarding training undertaken by all staff and volunteers and will maintain up to date register of who has been trained.

Members of Staff and Volunteers

All members of staff have a responsibility to:

- All new staff (including temporary staff and volunteers receive safe guarding training and understand Rainbow Centre's internal safeguarding policies and processes.
 - All staff members (including temporary staff) will receive regular safeguarding and client protection updates, and training every three years or sooner if certificate expires.
 - All staff members (including temporary staff) will be asked to read and sign that they have understood both the Safeguarding Policy & Procedures as well as the code of conduct in the staff and volunteer handbooks.
 - All staff will be supported by the DSL in their safeguarding role through regular reviews of their own practice to ensure they improve over time.
 - All staff to provide a safe environment for the clients they are helping and the volunteers they are working with.
- Be aware of the indicators of abuse and neglect so that they are able to identify cases of clients who may be in need of help or protection.
- Be alert to behaviours, which could indicate that a client is at risk of harm and safe guarding concerns.

- Know what to do if a client tells them that he or she is being abused or neglected. In the absence of the availability of the DSL to discuss an immediate and urgent concern, staff can seek advice from the Deputy DSL.
- If anyone other than the DSL makes a referral to external services, then they will inform the DSL as soon as possible.
- Know how to maintain an appropriate level of confidentiality.
- On occasion, staff may pass information about a client to the DSL but remain anxious about action subsequently taken. Staff should feel able to check the progress of a case with the DSL so that they can reassure themselves the client is safe and their welfare is being considered.
- Any member of staff affected by issues arising from concerns for client's welfare or safety can seek support from the DSL. The DSL will also put staff in touch with outside agencies for professional support if they so wish.

Record Keeping

- Staff and volunteers will record any welfare concern that they have about a client on the Rainbow Centre safeguarding incident/concern form (with a body map if injuries have been observed) and pass them without delay to the DSL. Records will be completed as soon as possible after the incident/event, using the client's words and will be signed and dated by the member of staff.
- All safeguarding concerns, discussions and decisions (and justifications for those decisions) will be recorded in writing. If members of staff are in any doubt about recording requirements, they should discuss their concerns with DSL.
- Safeguarding records are kept for individual clients and are maintained separately from all other records relating to the client and in accordance with data protection legislation and are retained centrally and securely by the DSL. Safeguarding records are shared with staff on a 'need to know' basis only.
- The Trustees will be kept informed of any significant issues by the DSL and the Lead Safeguarding Trustee.

Confidentiality and Information Sharing

- The Rainbow Centre recognises that all matters relating to client protection are confidential. The DSL will only disclose information about a client to staff or any external agency on a 'need to know' basis.
- All members of staff must be aware that whilst they have duties to keep any information confidential, they also have a professional responsibility to share information with other agencies to safeguard clients.

The Use of the Rainbow Centre Premises by Other Organisations

- Where services or activities are provided separately by another body using the Rainbow Centre premises, the CEO will seek written assurance that the organisation concerned has appropriate policies and procedures in place with regard to client protection and that relevant safeguarding checks have been made in respect of staff and volunteers.
- If this assurance is not achieved then an application to use premises will be refused.

1. Local Support

- **Adult Social Services**
 - Social.services@kent.gov.uk
 - Adult Social services: **03000 416161**
 - Out of Hours Number: **03000 419191**
- **Kent Police**
 - 101 (or 999 if there is an immediate risk of harm)
 - Folkestone Police 01622 690690

2. National Support

Support for adults

- Crime Stoppers: www.crimestoppers-uk.org
- Victim Support: www.victimsupport.org.uk
- The Samaritans: www.samaritans.org
- Mind: www.mind.org.uk
- NAPAC (National Association for People Abused in Childhood): napac.org.uk
- MOSAC: www.mosac.org.uk
- Action Fraud: www.actionfraud.police.uk

Support for Learning Disabilities

- Respond: www.respond.org.uk
- Mencap: www.mencap.org.uk

Domestic Abuse

- Refuge: www.refuge.org.uk
- Women's Aid: www.womensaid.org.uk
- Men's Advice Line: www.mensadviceline.org.uk
- Mankind: www.mankindcounselling.org.uk

Honour based Violence

- Forced Marriage Unit: <https://www.gov.uk/guidance/forced-marriage>

Online Safety

- Internet Matters: www.internetmatters.org
- Net Aware: www.net-aware.org.uk
- Get safe Online: www.getsafeonline.org

Radicalisation and hate

- Counter Terrorism Internet Referral Unit: www.gov.uk/report-terrorism
- True Vision: www.report-it.org.uk

Adult safeguarding forms

Kent Adult Safeguarding Alert Form (KASAF)

Details of where to send and how to send securely are available on the last page of the form.

- [Guidance to complete the Kent Adult Safeguarding Alert Form \(KASAF\) Stage 1 \(PDF, 221.9 KB\)](#)
- [Kent Adult Safeguarding Alert Form \(KASAF\) \(DOCX, 172.9 KB\)](#)
- [Kent Adult Safeguarding Alert Form Appendices A-C \(KASAF\) \(DOCX, 39.6 KB\)](#)
- [KASAF Appendix 1 - body map \(DOCX, 85.3 KB\)](#)
- [KASAF Appendix 2 - persons alleged to be responsible \(DOCX, 150.0 KB\)](#)

If you are having trouble using the form above, please use this version:

- [Kent Adult Safeguarding Alert Form \(KASAF\) for older versions of Word \(DOC, 362.0 KB\)](#)
- [Kent Adult Safeguarding Alert Form Appendices A-C \(KASAF\) for older versions of Word \(DOC, 81.5 KB\)](#)
- [KASAF Appendix 2 - persons alleged to be responsible \(DOC, 201.5 KB\)](#)

Learning Resources

How you can prevent abuse

- [Stop adult abuse - how to protect yourself and others \(PDF, 460.1 KB\)](#)
This leaflet is also available in [easy read format \(PDF, 832.9 KB\)](#)

How our professionals prevent abuse

- [Adult safeguarding: working to protect adults from abuse](#)