

Safeguarding of Vulnerable Adults Policy



Category	Policy
Summary	This policy outlines BAPAM's principles and procedures relating to safeguarding vulnerable adults. It is applicable to all BAPAM (staff, clinicians, volunteers) who work with or encounter vulnerable adults in their clinical work for BAPAM.
Valid from	15 March 2016
Version	2.1
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Approval date/ via	BAPAM Medical Committee
Distribution	BAPAM clinicians e-mail list & online forum Staff meetings Public website
Related documents	<i>Incidents Policy; DBS Checks and Employing Ex-offenders Policy; Safeguarding of Vulnerable Adults policy</i>
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Further information	<i>'Keeping Adults Safe from Abuse is everyone's business' – Camden Safeguarding Adults Partnership Board, leaflet published April 2015</i> <i>No secrets: Guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse – DOH</i> <i>Protecting adults at risk in London: Good practice resource. October 2012</i> http://www.scie.org.uk/publications/adultsafeguardinglondon/

1. Policy aim:

This document outlines BAPAM's principles and procedures relating to vulnerable adults. This guidance should be referred to by all BAPAM personnel – staff, clinicians and volunteers, who work with vulnerable adults in the course of their clinical work for BAPAM.

This policy adheres to the following key principles:-

- *Vulnerable adults* are entitled to have their civil and human rights upheld and to live a life free from abuse.
- they should be treated with respect and dignity, afforded the opportunity to choose how they wish to live independently and participate in their community, fulfil personal aspirations and realise potential in all aspects of their daily lives.
- the above includes having access to advocacy or support services and having their voice heard in decisions that affect their lives
- if abuse does occur, vulnerable adults need to be assured they will be protected by the law and have their civil human rights upheld in the course of any investigation that takes place.

1. Responsibilities

The BAPAM Chief Executive is responsible for overall development and implementation of this policy, in consultation with the Honorary Medical Director and Clinics manager.

It is the responsibility of all of BAPAM staff and clinicians to become familiar with this policy in order that they can work together to help vulnerable adults to stay safe, to prevent abuse happening and to reduce the harm when it does occur.

2. Definitions:-

Vulnerable Adult – Any person aged 18 years or over who is, or may be, unable to take care of him or herself or who is unable to protect him or herself against significant harm or exploitation.

This may be because of a disability, sensory impairment, mental health problem, age/fragility or some form of illness. Vulnerable adults may be living in residential or institutional care, but may also be residing within the community.

Safeguarding:-

Safeguarding refers to ways of working together to stop abuse or neglect happening and to prevent it happening in the future.

Abuse:- Abuse and neglect are generic terms encompassing all forms of maltreatment of a vulnerable adult.

There are different types of abuse:-

Physical: -any act that causes physical harm or injury to a person. This may include hitting, smacking, pushing, shaking, spitting, scalding, misusing medication, using illegal restraint, or other ways of hurting such as exposing to extreme heat or cold.

Psychological and Emotional:-Any act that causes emotional harm to a person. This may include verbal abuse, threatening, bullying or forcing someone to do something, shouting or swearing at or ignoring someone or saying things to embarrass them or hurt their feelings such as name-calling. It can also include cyber bullying, or taking away their privacy, dignity or free speech.

Sexual: -any sexual activity that a person has not agreed to or has been coerced into

Financial or material:- taking or misusing a person's money or property without their permission, including theft and fraud, internet and telephone scamming, pressure over property and inheritance, or misusing powers of attorney.

Neglect:- a failure to meet an individual's basic physical, emotional, health or care needs. This includes withdrawing or not providing help that a vulnerable adult needs such as medication, adequate nutrition and access to health and social care. Neglect can be intentional or non-intentional, when someone doesn't understand their care and support needs.

Discriminatory:-any form of abuse that is done because of a person's race, religion, culture, age, disability, gender or sexual orientation.

Domestic Abuse: controlling, coercive, threatening or violence between two people who are or have been intimate partners or family members. It can include psychological, physical, sexual, financial and emotional abuse and so called 'honour' based violence or forced marriage.

Organisational:- Repeated poor care of an adult at risk through neglect or poor professional practice in a paid or regulated care setting such as a hospital, a care home, or an organisation paid to support the adult in their own home.

Abusers may be:- A partner, relative, child, friend, a paid or volunteer carer, a health, social care or other worker, an employer or a stranger.

Abuse may occur in:-own home, relative's or carer's home, work or educational settings, day care, residential or institutional setting or public places.

Potential signs of abuse:-multiple bruising or finger marks; injuries that the adult cannot give an explanation for; worsening health or weight loss for no apparent reason; inappropriate or dirty clothing; mood changes; a carer who is unwilling to let others have contact with the person they care for; shortage of money for no apparent reason; neediness; tearfulness and crying for no obvious reason and not saying why.

3. Identifying abuse:-

Abuse may be revealed to BAPAM personnel under the following circumstances:-

Disclosure –direct disclosure from the vulnerable adult during contact with clinics staff or a clinician during a consultation.

Disclosure from a third party e.g. colleague or relative

Observation – evidence of physical or psychological signs or symptoms during contact with BAPAM clinic staff and clinicians

Colleague conduct – there may be concern about the conduct of a colleague when working with vulnerable adults

4. How do I respond to someone making an allegations or abuse?

- Stay calm and listen carefully
- Reassure the person that they are doing the right thing but do not promise to keep secrets
- Elicit enough information to know what to do next – no more than this
- Allow the vulnerable person to use his/her own words and go at his/her own pace
- Find an opportunity to explain that the information will have to be shared with others but only with other people who need to know it keep the adult safe
- Offer reassurance that they will be kept safe and explain the actions to be taken
- Make a full record at the earliest opportunity

What do I do next?

Refer to the BAPAM flowchart:-What to do if you suspect a vulnerable adult is being abused or neglected (appendix 1) and contact the relevant organisation to report your concerns.

Inform the BAPAM CEO or Clinics Manager. If the Incident involves a patient from another organisation (eg at shared/hosted premises), staff must also inform the relevant Safeguarding lead. In the BAPAM London clinic, this is the Operational manager or Senior Administrator.

Make a written report within 24 hours whilst the incident / suspicions are still fresh in the mind

5. Staff checks and training in Safeguarding

Recruitment:-

It is the responsibility of the CEO and Board to make sure all BAPAM staff adhere to a 'safer recruitment' process - including DBS checks - and professional registration where appropriate.

Whilst personnel are under contract, the DBS checks should be carried out every 3 years. On joining BAPAM, clinicians should be encouraged to join the DBS update service and this will facilitate BAPAM checking their DBS status online.

However, should a member of BAPAM staff be involved in a 'prosecution or conviction' during their contract with BAPAM they have a duty to inform the BAPAM CEO.

Please see BAPAM '*DBS Checks and Employing Ex-Offenders*' policy for further information.

Training:

All staff and clinicians will have an introduction to the policy at start of their employment and thereafter at 3 yearly intervals.

The CEO and Clinics Manager should attain Level 2 Adult Safeguarding. All other clinic staff must achieve a minimum of Level 1. Training will be provided by BAPAM as part of staff induction and development. All clinicians must provide evidence of Level 2 Adult Safeguarding. All training must be updated every 3 years.

NHS employees can access this training free registering at the NHS England e-learning hub:- <http://www.e-lfh.org.uk/home/> Non NHS-employed BAPAM staff will have advice on training programmes via BAPAM.

In addition BAPAM staff should read the documents listed in the 'further information' section above.

6. Breach of Policy:

All personnel will receive a copy of this policy and training, and will be required to comply with it as a condition of working at BAPAM.

Breaches of the policy may constitute professional misconduct and could lead to disciplinary action.

Version 1.0 = September 2013 (D Charnock)

Version 2.0 = September 2015; Version 2.1 = March 2016 (Updated by D Charnock)

Review = September 2018.