



Survivors'
Network

Survivors' Network Safeguarding Vulnerable Adults Policy

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Safeguarding Vulnerable Adults Policy

Survivors of childhood sexual abuse and sexual violence can, as a result of their abuse, develop behaviours or characteristics or find themselves in situations that may make them additionally vulnerable to further abuse. Following the implementation of the Safeguarding Adults Act (2006) Survivors' Network has made an additional commitment to keeping our service users safe.

Aim of Policy:

The aim of this policy is to ensure the safety of vulnerable adults by outlining clear procedures and ensuring that all staff members are clear about their responsibilities.

Definition:

A vulnerable adult is a person aged 16 years or over who may be unable to take care of themselves or protect themselves from harm or from being exploited. For the purposes of this policy, the vulnerable adult is a person aged 18 years or over. For any person aged under 18 years, please refer to our Child Protection and Safeguarding Policy.

A vulnerable adult may include a person who:

- Is elderly or frail
- Has a severe mental illness
- Has a physical or sensory disability
- Has a learning disability
- Has a severe physical illness
- Is a substance (mis)user
- Is homeless

What is abuse?

Abuse is a violation of an individual's human and civil rights by any other person or persons. It can take a number of forms, for example:

- Physical abuse e.g. hitting, pushing, shaking, inappropriate restraint, neglect or abandonment
- Sexual abuse e.g. involvement in any sexual activity against their will, exposure to pornography, voyeurism and exhibitionism
- Emotional/psychological abuse e.g. intimidation or humiliation, emotional neglect and not taking due care of an individual's emotional well being
- Financial abuse e.g. theft or exerting improper pressure to sign over money from pensions or savings etc.
- Neglect or acts of omission e.g. being placed in situations which will cause emotional or physical harm
- Discriminatory abuse e.g. racial, sexual or religious harassment
- Personal exploitation – involves denying an individual their rights or forcing them to perform tasks that are against their will

- Violation of rights e.g. preventing an individual from speaking their thoughts or opinions
- Institutional abuse e.g. failure to ensure privacy or dignity

Abuse may take more than one form, or involve more than one person at any time. This makes it important to look beyond single incidences and look at any patterns of harm. Any or all types of abuse may be perpetrated as the result of deliberate intent or targeting of older/vulnerable people.

No abuse is acceptable and some is a criminal offence. If you suspect a vulnerable adult is being abused, it must be reported to a member of staff at the Survivors' Network, police or social services as soon as possible.

Reporting Procedures

Directions for staff on handling disclosures of abuse and concerns about other worker's conduct in relation to children can be found in the Child Protection and Safeguarding Policy.

If the allegation or suspicion of abuse is suspected by a volunteer then they should inform a member of staff as soon as possible. The member of staff will then inform the CEO (or in her absence, a member of the trustee board). If the alleged abuse concerns the CEO, the Chair of Trustees should be informed as soon as possible. A member of staff discovering an allegation or suspicion of abuse will, similarly, report it to the CEO.

In line with the Survivors' Network Data Protection Policy any allegations of abuse will be kept as confidential as possible. Concerns must be logged following the agreed Incident Reporting Procedure, and after processing, all incident forms will be securely stored in the Survivors' Network Human Resources cabinet. Recorded incidents and concerns must be signed and dated by the member of staff, volunteer or trustee that lodged the concern, who will be kept informed of the follow up by internal and external procedures and the resolution of any concerns.

The member of staff should make a written record of the allegation or suspicion of abuse (see appendix A) and discuss the situation with the CEO. The CEO should carry out a risk assessment and contact the local Social Services Team but only after serious consideration has been given to the confidentiality of current clients and the safety of future service users, as detailed below.

The CEO will take adequate care to ensure confidentiality with matters regarding the protection of vulnerable adults, especially with regard to the transfer of information, electronically, verbally and via the postal system.

If a volunteer has been told about the allegation of abuse in confidence, they should attempt to gain the consent of the service user to make a referral to another agency. However, in the case of a vulnerable adult, the gaining of the consent is not essential in order for information to be passed on.

Consideration needs to be given to:

1. The scale of the abuse
2. The risk of harm to others
3. The capacity of the service user to understand the issues of abuse and consent

If there is any doubt about whether or not to report an issue to Social Services then it should be reported.

In emergency situations (e.g. where there is a risk or occurrence or severe physical injury), where immediate action is needed to safeguard the health or safety of the individual or anyone else who may be at risk, the emergency services should be contacted.

Where a crime is taking place, has just occurred or is suspected, the police must be contacted immediately. Failure to do so may constitute a criminal offence.

Responsibilities:

All members of staff and volunteers have a responsibility to be aware of this policy and to report any suspicions that they might have concerning adult abuse. The Safeguarding Flow Chart is displayed in the Survivors' Network administrative office, and has the most up to date contact information for the staff members who can be contacted with any concerns.

Survivors' Network has a responsibility to:

- Ensure that all staff and volunteers are aware of their responsibilities to vulnerable service users
- DBS check all staff and volunteers and ensure suitability for working with potentially vulnerable service users
- Inform the appropriate agencies in a timely and appropriate manner if there are suspicions of adult abuse

DBS Checks:

All newly recruited staff and volunteers who have contact with service users are DBS checked. Survivors' Network recognises that many of our volunteers and trustees work in sectors where they will be provided with DBS disclosure as part of that employment. Survivors' Network will accept DBS disclosure from other organisations so long as this has been undertaken within the last six months and that the volunteer or trustee resides at the address listed on the disclosure.

Survivors' Network will undertake new DBS checks on all staff, volunteers and trustees every three years.

Appendix A:

**Survivors' Network Protection of Vulnerable Adults
Incident Report Form**

Name:

Service:

Address:

Telephone:

Briefly describe what happened (include times and dates):

Names and contacts of witnesses:

Name of person completing form:

Date:

Name of person responsible for investigation:

Date:

Action taken:

Appendix B:

Definition of Reduced Mental Capacity and Two-Stage Mental Capacity Test

The Mental Capacity Act 2005 (“the Act”) provides a framework to empower and protect people who may lack capacity to make some decisions for themselves. Within the Act mental capacity is defined as ‘the ability to make a decision’.

The five key principles in the Act are:

1. Every adult has the right to make his or her own decisions and must be assumed to have capacity to make them unless it is proved otherwise
2. A person must be given all practicable help before anyone treats them as not being able to make their own decisions
3. Just because an individual makes what might be seen as an unwise decision, they should not be treated as lacking capacity to make that decision
4. Anything done or any decision made on behalf of a person who lacks capacity must be done in their best interests
5. Anything done for or on behalf of a person who lacks capacity should be the least restrictive of their basic rights and freedoms

Whether or not a person has capacity to make a decision must be based solely on their ability to make **that particular decision at the time it needs to be made**. That is, their ability to make other decisions, or their previous ability to make this decision, are not to be taken into account. In addition, an assessment of capacity must not be made on the basis of age, appearance or an aspect of the person’s behaviour and they should be given all available support to enable them to make the decision at hand for themselves.

A person lacks capacity if:

- They have an impairment or disturbance (for example, a disability, condition or trauma) that affects the way their mind or brain works, and
- The impairment or disturbance means that they are unable to make a specific decision at the time that it needs to be made

Under the Act, the ‘impairment or disturbance’ does not have to be permanent, unchanging or complete. That is, it can be temporary, partial and may change over time.

Assessing whether a person lacks capacity should take the form of a two-stage test, as set out in the Act.

Stage 1 – Does the person have an impairment of, or a disturbance in the function of, their mind or brain?

Examples of an ‘impairment or disturbance’ may include:

- Conditions associated with some forms of mental illness
- Dementia
- Significant learning disabilities
- The long-term effects of brain damage
- Physical or mental conditions that cause confusion, drowsiness or loss of consciousness
- Delirium
- Concussion following a head injury
- The symptoms of alcohol or drug use

In the time available after a client has disclosed taking action to end their life, it may not always be possible to assess whether they are suffering from mental illness, have a learning disability, or other of the above 'impairments or disturbances'. Where the staff member or volunteer does not have information relating to their status with regards to mental health, learning disability, dementia, or a long-term brain injury, the assessment should be made on their ability to make and understand a decision, as described below.

Where the staff member or volunteer knows from their previous work with a client that they have any of the above 'impairments or disturbances', this alone does not necessarily point to a lack of mental capacity. A Stage 2 assessment must be carried out, as outlined below.

Stage 2 – Does the impairment or disturbance mean the person is unable to make a specific decision at the time they need to make it?

For a person to be assessed as lacking capacity to make a decision, the impairment or disturbance must affect their ability to make that specific decision at the time they need to make it, provided they are given all practical and appropriate support to help them make the decision for themselves.

The Act defines a person as unable to make a decision if they cannot:

- Understand information about the decision to be made
- Retain that information in their mind
- Use that information as part of their decision-making
- Communicate their decision (by any means, both verbal and non-verbal)