


FOLD HOUSING ASSOCIATION <i>Housing Department</i> 	DOCUMENT NO: HPO008	
	Prepared by:	AHM's
	Authorised by:	Housing SC 16/11/10
TITLE: Adult Safeguarding Policy & Procedure	Version No:	4
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INTRODUCTION

Health and Social Services Trusts have established an Adult Safeguarding Team with the primary aim of assisting in the implementation of the Regional "Safeguarding Vulnerable Adults" procedures September 2006 and the Protocol for Joint Investigation July 2009.

In 2002 the Department of Health, Social Services and Public Safety (The Department) supported the establishment of the Regional Adult Protection Forum (The Forum) to promote, develop and improve arrangements for the protection of vulnerable adults.

Further information and guidance can be obtained by referring to the "Safeguarding Vulnerable Adults" 2006 and Protocol for Joint Investigation 2009 documents.


The purpose of this document is to:

- Set out the values, principles and policies underpinning all work with abused or vulnerable adults;
- Define who has roles and responsibilities for investigation and protection of vulnerable adults;
- Define the procedure to be followed if abuse is suspected;
- Define the term 'Vulnerable Adult' and different types and signs of abuse of vulnerable adults and indicate their possible causes and associations;
- Indicate the legal framework within which abuse can be tackled.

SCOPE

This guidance is for all staff within the Housing Services Directorate who provide services to vulnerable adults which includes older people in any FOLD accommodation. It covers all types of abuse, including neglect and recognises that vulnerable people cannot always protect themselves.

The procedures do not operate independently of other arrangements such as complaints and disciplinary procedures, and should be implemented concurrently in order to ensure the protection of the vulnerable adult.

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DEFINITION OF VULNERABLE ADULT

The Regional Vulnerable Adult Protection Forum has adopted the Law Commission for England and Wales (1995) definition of a “vulnerable adult” as:

‘a person aged 18 years or over who is, or may be, in need of community care services **or** is resident in a continuing care facility by reason of mental or other disability, age or illness **or** 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’.

FOLD have also adopted this same definition to be used to define a ‘vulnerable adult’.

Many vulnerable adults may not realise that they are being abused or indeed are tolerant of their situation because of relationships within the family. E.g. an older person who is dependant on their family may accept the loss of control of their finances or physical environment. It may be the case tht the individual does not wish to upset their carer or get them into trouble or make the situation worse.


In cases of non-criminal matters it may not be in the persons’ best interests to pursue an investigation if they have requested no investigation. However capacity and public interests must be considered at this point.

It is important that the concept of significant harm is applied to determine appropriate interventions by the multiagency team.

The Law Commission (1995) suggested that “harm should be taken to include not only ill treatment (including sexual ause and forms of ill treatment which are not physical), but also the impairment of physical, intellectual, emotional, social or behavioural development”

Significant harm may include the degree, extent, duration and frequency of harm.

Where there is a suspicion that a crime may have been committed the PSNI have a duty to investigate under Article 3 Human Rights Action 1998. Liaison between Social Services and PSNI designated officers should determine appropriate further action.

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DEFINITION OF ABUSE

The current definition of abuse is derived from regional guidance issued by the Management Executive, Department of Health and Social Services in 1996, which states that abuse is:

'the physical, psychological, emotional, financial or sexual maltreatment, or neglect of a vulnerable adult by another person. The abuse may be a single act or repeated over a period of time. It may take one form or a multiple of forms. The lack of appropriate action can also be a form of abuse. Abuse can occur in a relationship where there is an expectation of trust and can be perpetrated by a person/persons, in breach of that trust, who have influence over the life of a dependant, whether they be formal or informal carers, staff or family members or others. It can also occur outside such a relationship'.


TYPES OF ABUSE

Forms of abuse can be categorised as follows:-

- Physical abuse (including inappropriate restraint or use of medication);
- Sexual abuse;
- Psychological abuse;
- Financial or material abuse;
- Neglect and acts of omission;
- Institutional abuse; and
- Discriminatory abuse.

Physical Abuse

Physical injuries which are unsatisfactorily explained, or where there is a definite knowledge or a reasonable suspicion that the injury was inflicted with definite intent, or through deliberate lack of care by another having care of the person. This includes physical abuse such as pushing, pinching, slapping, punching, force feeding and improper administration of medicine. Also, obvious, for example, the positioning of a zimmer frame in front of a person's chair thus preventing them from moving.

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Neglect

The failure to identify and provide for basic physical, emotional or social needs, so that the person's health or well-being is impaired. This could include inadequate food and warmth, safety and security, privacy, social contact, medical care, mental stimulation or failure to listen.

Sexual Abuse

The suspicion of, or disclosure that a person is involved in sexual activities that cause distress and/or to which informed consent has not been given and/or which violate the sexual taboos of family roles.

Emotional Abuse

Persistent or severe emotional or psychological ill-treatment of a vulnerable adult which has a significant effect on their emotional well-being or self esteem. This would include:

- Harassment;
- Intimidation;
- Deliberate isolation;
- Failure to meet cultural and religious requirements;
- Failure to treat people appropriately for their age;
- Preventing appropriate expression of sexuality;
- Any form of stereotyping;
- Discriminatory verbal abuse;
- Belittling or personally undermining statements;
- A lack of respect;
- Ignoring.

Financial Abuse

The misuse or misappropriation of a person's material or financial resources, without their informed or freely given consent, which may lead to other forms of abuse.

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Consent and Capacity

As outlined in "Safeguarding Vulnerable Adults" 2006 determining an individual's capacity to consent is key to ensuring the safety and well-being of vulnerable adults.

A decision on whether the person is deemed to have capacity or not will be made by the designated officer or investigating officer in accordance with the Protocol for Joint Investigation July 2009 which includes a template to record decisions evidencing human rights (in accordance with The Human Rights Act 1998 effective from 2nd Oct 2000) considerations.

ALERTING SIGNS AND SYMPTOMS

A person may become alert to the possibility of adult abuse by:-

- Allegations made by another person;
- A person telling them or showing them that they have been mistreated;
- An admission from someone who says they are harming an adult, or
- Noticing signs and symptoms of abuse themselves.

It must be acknowledged that no single sign or symptom is evidence of abuse on its own and needs to be seen in context of other presenting injuries, medical conditions, indicators of abuse and risk factors.

Incidents of abuse may be multiple, either to one person in a continuing relationship or service or to more than one person at a time.

Any or all types of abuse may be perpetrated as the result of deliberate intent and targeting of vulnerable people, negligence or ignorance.

VULNERABLE ADULT TO VULNERABLE ADULT ABUSE

It is important to recognise that another vulnerable adult may abuse a vulnerable adult. The issue of intention may demand a different response, however research has shown that where this kind of abuse is not addressed properly the victim can suffer mental health problems and low self-esteem (Action for Elder Abuse 2). Consideration should be given in consultation with PSNI to the possibility of a criminal offence being committed.

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Therefore in settings where this may occur it is important that the appropriate supports are offered to victims and that a culture of protection and safeguarding is promoted.

INFORMATION REQUIRED FOR A REFERRAL ONTO SOCIAL SERVICES

1) The referral to Social Services should include:

- personal details of the resident (name, address, age, ethnic origin, gender, religion, type of accommodation, family circumstances, support networks, physical and mental health, any communication difficulties);
- the referrer's job title and involvement;
- substance of the allegation;
- details of care givers;
- details of alleged abuser and current whereabouts and likely movements within the next 24 hours;
- specific details of any specific incidents eg dates, times, injuries, witnesses, evidence such as bruising;
- background of any previous concerns;
- awareness or not/consent or not by the abused, carers, alleged abusers of the referral.

In situations where there is obvious evidence of a criminal offence a simultaneous referral to the police may be made – guidance may be sought from the person taking the referral in Social Services.

2) Once a referral has been made to Social Services that department should then work within their own inter-agency guidelines on abuse of vulnerable adults. Staff should co-operate with Social Services and, if they are involved, the police and/or doctors, in accordance with these guidelines. These guidelines may include the referrer's continued involvement through:

- assistance with any communication difficulties (eg sensory impairment, language or speech problems);
- verbal or written clarification and amplification of initial referral details;
- request for further monitoring;
- attendance at a case conference;
- discussions with police.

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- 3) Staff should agree a framework for working with the vulnerable adult with their line manager, whether or not the referral to Social Services has been made or accepted. Within this framework, staff should continue to support and ensure the safety of the vulnerable adult as well as work with other agencies towards the elimination of the abuse.

GUIDING PRINCIPLES

A set of commonly agreed principles underpins the Regional “Safeguarding Vulnerable Adults” procedures 2006. Such principles flow from respect for the rights of vulnerable adults who are entitled to:-

- privacy;
- be treated with respect and dignity;
- lead an independent life and be enabled to do so;
- be able to choose how to lead their lives;
- the protection of the law;
- have their rights upheld regardless of ethnic origin, gender, sexuality, impairment of disability, age and religious or cultural background; and
- have the opportunity to fulfil personal aspirations and realise potential in all aspects of daily life.

This includes Human Rights considerations, particularly in relation to Article 2 “the Right to Life”, Article 3 “Freedom from torture” (including humiliating and degrading treatment), and Article 8 “Right to Family Life” (one that sustains the individual).

INTER-AGENCY WORKING

The overall aim of the established ‘Protocol for Joint Investigation’ 2009 is to ‘prevent abuse by promoting a multi-agency approach to the protection of vulnerable adults, and to ensure that they receive equitable access to justice in a way that promotes their rights and wellbeing’.

The most appropriate agency to lead the investigation will be the Health and Social Services Trust. Where another possible lead agency, such as the PSNI, is involved the

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host Trust should take a lead in ensuring that a strategy discussion takes place and in co-ordinating the arrangements for this.

The PSNI has a legal duty to investigate alleged criminal abuse. Where there is a possibility of a criminal prosecution, the Protocol for the Joint Investigation of Alleged and Suspected Cases of Abuse of Vulnerable Adults **MUST** be followed.

In any circumstances where it has been established that there is possible abuse of a vulnerable person, FOLD would aim to ensure effective communication and collaboration with one or more of the primary agencies, either local Health & Social Services, RQIA or PSNI.

FOLD Housing Association aims to ensure that protective measures are paramount and run in parallel with the criminal inquiry or any other lines of enquiry, such as civil action or disciplinary proceedings.

FOLD is committed to ensuring the rights of vulnerable adults are upheld in the belief that every vulnerable adult residing in FOLD property has the right to live free from abuse.

CONFIDENTIALITY

In normal circumstances observing the principle of confidentiality will mean that information is only passed on to others with the consent of the service user. However, it should be recognised that in order to protect the vulnerable adults, it may be necessary, in some circumstances, to share information that might normally be regarded as confidential.

All vulnerable adults and, where appropriate, their carers or representatives need to be aware that the operation of multi-disciplinary and inter-agency procedures will, on occasion, require the sharing of information in order to protect a vulnerable adult or others, or to investigate an alleged or suspected criminal offence.

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PROCEDURE

Guiding Principles

The following principles should guide any course of action in responding to a case of abuse of a vulnerable adult:

Any staff member with concerns about abuse should make a report immediately to their line manager or to a senior manager if consultation with their line manager would involve undue delay. Everyone working with vulnerable adults has a duty to report suspected, alleged or confirmed incidents of abuse.

Safety of abused person

In an urgent life threatening situation, the involvement of emergency services should be automatic.


Dignity, respect and individual rights

The abused person should at all times be treated with dignity, respect and kept fully informed. The person who has been abused has the right to be given full information about the options and to have their wishes regarding future action respected. Exceptions would be where the person is unable to make an informed choice, or where a statutory responsibility to intervene exists.

Confidentiality

All staff and agencies receiving information in the course of an investigation must treat this information as confidential. Principles which should be followed are:-

- Information should only be shared on a “needs to know” basis when it is in the best interests of the vulnerable adult;
- Confidentiality must not be confused with secrecy;
- Informed consent should be obtained but if this is not possible and other persons are/may be at risk, it may be necessary to override this requirement;

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- It is inappropriate for staff or agencies to give assurances of absolute confidentiality in cases where there are concerns about abuse particularly in those situations when other vulnerable people may be at risk.

Equal Opportunities & Cultural Sensitivity

Discrimination and oppression may be the underlying cause of the presenting abuse and may be identified during the course of the investigation.

An investigation should take into account and respond to any needs arising from the person's race, religion, disability, gender, sexuality and any communication needs. Advocacy/interpreting should be made available if required.

Confronting Suspected Abuser

Under no circumstances must the suspected abuser be approached in the initial stages. Staff should not confront a suspected abuser unless they have to do so to protect the abused person.

Support for an Abuser who is a relative/carer

If the abuser is the person's relative or carer, his/her needs should also be considered. However, any contact with the abuser should only be done in consultation with those carrying out the investigation.

Recording Incidents

FOLD requires all staff to report suspected, alleged or confirmed instances of abuse. FOLD is committed to assisting in inter-disciplinary working with the primary agencies responsible for the investigation of abuse.

If in any doubt, a staff member should report their suspicions to their line Manager or Area Housing Manager as soon as they become aware of possible abuse.

In circumstances when any information or report is received on cases of alleged abuse of vulnerable adults including anonymous phone calls, the following action must be taken:-

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1. The Line Manager/Area Housing Manager must be informed and a written report of the alleged abuse must be completed within 24 hours (**Form F110 or Form 33 Coord. Manual**). On receipt of the report of the alleged abuse the Line Manger or Area Housing Manager must liaise with the relevant Health and Social Services Board or Trust.
2. Upon receipt of a referral, Social Services will convene a strategy discussion and appoint an Investigating Officer.
3. The Investigating Officer will take the lead role in undertaking the investigation.
4. All relevant professionals and agencies should be involved in the strategy discussion.
5. Depending on the decisions reached at the strategy discussion, the investigation may proceed through a:-
 - single agency investigation – where intervention rests solely with one agency e.g. Trust, PSNI;
 - joint agency investigation – which involve more than one agency or organisation but which lie outset the joint protocol for investigation, or
 - joint investigations with the PSNI – will be triggered when there is an allegation or suspicion that a criminal offence has been committed.
6. A decision will be reached by the investigating officer whether to proceed to an investigation based on information and factual collation taking account of the ACT, INTENT and IMPACT.
7. The purpose of the investigation is to:
 - Establish the facts about the circumstances giving rise to the concern about the abuse or neglect;
 - Decide if there are grounds for concern;
 - Identify the sources and levels of risk;
 - Determine who is responsible and recommend what action or support may be necessary in relation to them

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- Decide protective or other actions in relation to the persons concerned or any other vulnerable adult.
8. If a decision is made not to proceed with the investigation; the Line Manager/Area Housing Manager should complete a report containing the reasons for this decision, the personnel involved and any contrary advice should be noted. The file note should be countersigned by the FOLD personnel involved and be placed on the resident's file.
 9. If a decision is made to proceed with the investigation, FOLD's abuse of vulnerable adult's procedure must be fully invoked. A strategy should be agreed with the relevant Trust's Investigating Officer and a decision made on FOLD's involvement and any appropriate action required to be taken.
 10. A report on the alleged abuse (**Form F110 or Form 33 Coord. Manual**) must be completed and the police informed if a criminal act has taken place. In the case of a criminal matter – the decision whether to investigate or not will be decided by one of the primary agencies involved in the case (e.g. social services or PSNI). The decision could depend on the victim's choice, consent and their competence – but not in every case.
 11. All relevant parties should also be informed, family members, G.P. etc. This should be co-ordinated and agreed through the Investigating Officer appointed.
 12. The Line Manager/Area Housing Manager should ensure for an accurate minute of the proceedings to be made, which clearly identifies decisions made, by whom actions are to be taken, and the agreed timescales for action and review.

Risk and Protection

We acknowledge the individuals' rights to independent lives sometimes involving a degree of risk. Where an individual chooses to accept this risk, their wishes should be respected within the context of their capacity to anticipate and understand risk. We will work with other agencies to uphold the rights of vulnerable adults. These include the right to:

- receive protection for themselves and their property under the law;
- be supported in reporting the circumstances of any abuse;

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- have alleged, suspected or confirmed cases of abuse thoroughly investigated as a matter of urgency;
- have options for resolution and the appropriate processes explained to them;
- be supported in making decisions about how they wish to proceed in the event of abuse and to be kept informed of progress;
- have issues of consent and capacity considered;
- be given information in accessible formats on how to protect themselves;
- be given practical help in protecting themselves;
- be supported when deciding whether to pursue a formal complaint;
- be subjected to the minimum degree of disruption;
- receive support on a longer-term basis, following the abuse.

Training

All staff working with vulnerable adults will receive the appropriate training on FOLD's Policy and Procedure.

Whistleblowing

The Public Interest Disclosure (Northern Ireland) Order 1998 provides for the active safeguarding and protection of what are commonly known as 'whistle blowers'.


Staff are encouraged to take action when suspicious that abuse is occurring at work, no matter what the setting, who the perpetrator is or who the victim is. FOLD will respect and not penalise those who stand up for anyone who is suspected of being abused.

Referrals outside normal working hours

Where you have concerns and feel the matter requires urgent attention you should contact the out of hour's duty Social Worker.

The Social Worker will be responsible for taking any necessary action to ensure protection of the vulnerable adult.

Consideration for the need to have a joint investigation between the PSNI and Health and Social Services will be triggered when there is an allegation or suspicion that one of the criminal offences described below has been committed against a vulnerable adult:-

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1. a sexual offence committed against a vulnerable adult;
2. physical abuse or ill treatment amounting to a criminal offence;
3. financial abuse involving a criminal offence – e.g. fraud;
4. abuse, which involves a criminal offence – e.g. blackmail.

Investigation of an incident

Interviews with vulnerable adults will be conducted by the primary agencies involved in accordance with the guidelines contained within 'Achieving Best Evidence in Criminal Proceedings'.

Normally no-one else should be in the interview apart from the vulnerable adult and the interviewers. However, if it is the vulnerable adult's wish to have a supportive person present in the interview room it will be made clear to that person they must take NO part in the interview.

A suspected offender should never be present in an interview.