



## SAFEGUARDING ADULTS

### Mid Sussex Food Partnership - Policies and Procedures: vs 1.0

#### 1 Aim of Policy

- 1.1 Having policies and procedures to safeguard adults is a legal requirement under the Care Act 2014. The policy and procedures will ensure a proportionate, timely and professional approach is taken, and that safeguarding work is co-ordinated across all relevant agencies and organisations. This is essential for the prevention of harm and abuse.
- 1.2 All adults have the right to be safe from harm and must be able to live free from fear of all forms of abuse, neglect and exploitation, financial and otherwise.
- 1.3 The purpose of this policy is to outline the duty and responsibility of staff, volunteers and directors working on behalf of Mid Sussex Voluntary Action (MSFP) in relation to safeguarding adults. The policy aims to provide staff with an overview of adult protection and provides a clear procedure that will be implemented where adult protection issues arise.

#### 2 The Role of Staff, Volunteers and Directors

- 2.1 It is the duty of everyone who works or volunteers on behalf of MSFP to promote the welfare and safety of adults and to raise any concerns. This policy will enable all staff and volunteers (including directors) to make informed and confident responses to specific adult protection issues.

#### 3 Making Safeguarding Personal

- 3.1 Making Safeguarding Personal (MSP) is the approach now taken to all safeguarding work. The key principle of MSP is to support and empower each adult to make choices and have control over how they want to live their own life. It is a shift in culture and practice in response to what is now known about what makes safeguarding more or less effective from the perspective of the adult being safeguarded.
- 3.2 MSP is about having conversations with people about how responses to safeguarding situations can be made in a way that enhances their involvement, choice and control as well as improving their quality of life, well-being and



safety. It is about seeing people as experts in their own lives, and working alongside them to identify and achieve the outcomes they want.

3.3 MSP focuses on achieving meaningful improvements to people's lives to prevent abuse and neglect occurring in the future, including ways for them to protect themselves. People are individuals with a variety of different preferences, histories, circumstances and life-styles; so safeguarding arrangements should not prescribe a process that must be followed whenever a concern is raised, but instead take a more personalised approach.

## 4 What is abuse?

4.1 The Care Act 2014 outlines the different types and patterns of abuse and neglect, and the different circumstances in which they may take place. This is not intended to be an exhaustive list but a guide as to the sort of issues or behaviour which could give rise to a safeguarding concern.

4.2 The safeguarding duties apply to an adult who:

- Has needs for care and support (whether or not the local authority is meeting any of those needs), and
- Is experiencing, or at risk of abuse, neglect or exploitation, and
- As a result of those care and support needs, is unable to protect themselves from either the risk of, or the experience of abuse, neglect or exploitation.

4.3 Abuse can include the following:

**Physical abuse** - including hitting, slapping, pushing, kicking, misuse of medication, restraint, hair pulling or inappropriate physical sanctions.

**Sexual abuse** – Direct or indirect involvement in sexual activity without valid consent (this can include when an adult has not or cannot consent, or was pressured into consenting). This includes rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts.

**Psychological abuse** - including emotional abuse, threats of harm or abandonment, deprivation of contact with others, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal from services or supportive networks.

**Financial or material abuse** - including theft, fraud, scamming, coercion in relation to an adult's financial affairs or arrangements (including in connection



with wills, property or inheritance or financial transactions), or the misuse or misappropriation of property, possessions or benefits.

**Neglect and acts of omission** - including ignoring medical emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.

**Discriminatory abuse** – Discriminatory abuse exists when values, beliefs or culture result in a misuse of power that denies mainstream opportunities to some groups or individuals. It is the exploitation of a person's characteristics, which excludes them from opportunities in society, for example, education, health, justice, civic status and protection. It includes discrimination on the basis of age, disability, gender reassignment, marriage, civil partnership, pregnancy, maternity, race, religion or belief, sex or sexual orientation and includes hate crime incidents. Discriminatory abuse includes forms of harassment and slurs or similar treatment.

**Organisational abuse** – Repeated instances of poor or inappropriate care or support may be an indication of more serious problems and this is referred to as organisational or institutional abuse. This occurs' when an organisation's systems and processes and/or management of these fails to safeguard a number of adults leaving them at risk of, or causing them harm. It can also occur when the routines, systems and norms of an organisation overrides the needs of those it is there to support, or fail to provide those individuals with an appropriate quality of care. It can be intentional or otherwise. Organisational abuse includes neglect and poor care practice within an institution or specific care setting such as a hospital or care home. This may range from one-off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

**Modern slavery** - Modern slavery includes exploitation in the sex industry, forced labour, domestic servitude in the home and forced criminal activity. These types of crime are often called human trafficking. This crime remains largely invisible to the general public. It can include victims that have been brought from overseas and vulnerable people in the UK being forced to work illegally against their will in many different sectors including brothels, cannabis farms, nail bars and agriculture.

**Domestic abuse** – In 2013, the Home Office announced changes to the definition of domestic abuse:



- Incident or pattern of incidents of controlling, coercive or threatening behavior, violence or abuse by someone who is or has been an intimate partner or family member regardless of gender or sexuality;
- Age range extended down to 16 years and over. (Those under 16 are covered by Child Protection Procedures.)

Domestic abuse includes psychological, physical, sexual, financial, emotional abuse and so called 'honour' based violence.

## 5 What is a safeguarding concern?

5.1 A safeguarding concern is where an adult who has needs for care and support (regardless of whether those needs are being met) may experience, or be at risk of abuse, neglect or exploitation, and as a result of their care and support needs, is unable to protect themselves from either the risk of, or the experience of abuse, neglect or exploitation.

## 6 Procedure in the event of a complaint or allegation

6.1 This procedure must be followed whenever an allegation of abuse is made or when there is a suspicion that an adult has been abused. All complaints, allegations or suspicions must be taken seriously.

6.2 Any suspicion, allegation or incident of abuse must be reported to the safeguarding lead officer on that working day where possible.

6.3 There should be a conversation with the adult at the earliest opportunity to establish their views. This should include whether they see the issue as a cause for concern and also what they want to happen including actions they might want taken or want to take themselves. If the adult agrees that a safeguarding concern should be raised, what they want to be achieved from this and if they do not agree, the reasons for this.

6.4 Considerations:

DO

- Speak to the individual in a private place where they feel safe
- Assess whether emergency services are required and if needed call them
- Ask open questions
- Listen
- Get the adult's view on what has happened and what they want done about it
- Offer support and reassurance



- Ascertain and establish the basic facts
- Make careful notes and obtain agreement on them
- Ensure notation of dates, time and persons present are correct and agreed
- Take all necessary precautions to preserve forensic evidence (where appropriate) Explain issues of confidentiality and the responsibilities of people working with adults to share information where there may be concerns of abuse or neglect
- Provide information about advice, support and options that may be available to them and how safeguarding procedures could help to make them safer.
- Explain the procedure to the individual making the allegation – what will happen next and how they will be kept informed and supported

## DON'T

- Confront the alleged abuser
- Be judgmental or voice your own opinion
- Be dismissive of the concern
- Investigate or interview beyond that which is necessary to establish the basic facts and the view of the adult
- Disturb or destroy possible forensic evidence (where appropriate)
- Consult with persons not directly involved with the situation
- Ask leading questions
- Assume Information
- Make promises
- Ignore the allegation
- Elaborate in your notes
- Panic

6.5 A full record shall be made as soon as possible of the nature of the allegation and any other relevant information. This must include information in relation to the date, the time, the place where the alleged abuse happened, the names of others present, the name of the complainant and, where different, the name of the adult who has allegedly been abused, the nature of the alleged abuse, a description of any injuries observed, the account which has been given of the allegation (see Appendix 1). The views of the adult should also be recorded.

6.6 It is important to remember that the person who first encounters a case of alleged abuse is not responsible for deciding whether abuse has occurred. This is a task for the professional adult protection agencies, following a referral from the designated safeguarding lead officer.

6.7 Every effort should be made to seek the consent of the adult in raising a safeguarding concern to the local authorities, unless doing so is likely to increase the risk of harm to them or others. In raising a safeguarding concern,



the designated safeguarding lead officer at MSFP shall telephone and report the matter to West Sussex County Council's adult services department (or the police in the event of any immediate danger). A written record of the date and time of the report shall be made and the report must include the name and position of the person to whom the matter is reported. The telephone report must be confirmed in writing to West Sussex adult services within 24 hours.

## 7 Confidentiality

7.1 As part of the Making Safeguarding Personal approach, the views and wishes of the adult must be taken into account and their wishes should only be overridden if considered necessary in the interests of their own safety and/or the safety of others. The adult must be told if their wishes are overridden, and the reasons for this.

7.2 Adult protection raises issues of confidentiality which must be clearly understood by all. Staff, volunteers and directors have a professional responsibility to share relevant information with the local authority and other professional agencies where an adult may be, or is at risk of abuse, neglect or exploitation. Clear boundaries of confidentiality will be communicated to all. All personal information regarding an adult will be kept confidential. All written records will be kept in a secure area for a specific time as identified in data protection guidelines.

7.3 Where a safeguarding concern has been raised, staff must inform and involve the adult at each stage of the process. The adults' involvement in the process of sharing information must be fully considered and their wishes and feelings taken into account.

7.4 Please read the policy and procedure relating to General Data Protection Regulation (GDPR) in relation to the management of confidential information.

## 8 Role of designated safeguarding lead officer

8.1 The role of the designated safeguarding lead officer is to deal with all instances involving adult protection that arise within the organisation. They will respond to all adult safeguarding concerns and enquiries and liaise directly with West Sussex Adult Services and/or Sussex Police where appropriate. The safeguarding lead officer must ensure that all staff and volunteers are familiar with the organisation's adult protection procedures and ensure that training is provided where appropriate.

8.2 The designated safeguarding lead officer for MSFP is Patrick Mayhew, our Chair. The directors board have ultimate governance responsibility and the lead director for safeguarding is Kim Myhre. Please contact the safeguarding lead officer if you have any suspicions or concerns.



## 9 Training

9.1 MSFP will ensure that staff and volunteers are trained in recognising the signs and symptoms of abuse or neglect, how to respond and where to go for advice or assistance.

## 10 Disclosure and Barring Checks (formerly known as CRB checks)

- 10.1 The Disclosure and Barring Service (DBS) require all people that are involved in any of the following activities (known as regulated activities) to undergo an enhanced DBS check and MSFP will adhere to these requirements. Existing staff and volunteers involved in regulated activities will be re-checked every three years. Regulated Activities are:
  - Healthcare;
  - Personal care – washing and dressing, eating, drinking and toileting;
  - Social work – in connection with health or social services;
  - Assistance with household affairs – e.g. cash, bills, shopping;
  - Assistance with conduct of affairs – e.g. Power of Attorney/Deputies appointed under the Mental Capacity Act;
  - Conveying an Adult – must be for health, personal or social care due to age, illness or disability (this does not apply to taxi drivers).

## 11 Approval and Adoption

11.1 This policy was formally adopted by MSFP Executive Committee on 13 July 2016.

11.2 It is suggested that this Policy is reviewed every 2 years

11.3 Before the completion of future reviews, West Sussex Adult Services should be consulted and asked whether there have been any changes to their Safeguarding Adults Procedures which should be reflected in our current review of the past two years.

Patrick Mayhew Chair

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## Appendix 1

### Incident Report Form

Initial cause for concern form which must be discussed with Safeguarding Lead or Chair of Directors within 24 hours. If neither can be contacted, then West Sussex Adult CarePoint can be contacted on 01243 642121 for advice, signposting and raising a concern.

Time:

Place:

Name of individual cause for concern is about:

Age (if known):

Address (if known):

Name of complainant:

Record what you are told (in the adult's own words):

Observations to support cause for concern:



# MID SUSSEX FOOD PARTNERSHIP

Description and location of any visible marks, bruising etc:

Names of any witnesses (where appropriate):

Name of alleged abuser, (if known):

Record any agreed action taken:

Name of person completing form:

Signature: Date:

Name of adult that cause for concern is about:

Signature: Date:

Name of Safeguarding Lead

Signature: Date: