



**Headway Cambridge & Peterborough: Safeguarding Vulnerable Adults
HC&P-DP-01 Version 0.1**

Controlled document:

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Policy revisions:

Page No.	Date Added/Amended	Reason for Amendment	Initials
11	11/05/2023	Guidelines to include that the Safeguarding interaction is completed on Nourish and then the Appendix A and Appendix B is password protected and placed in the care plan.	RD

Policy Reviews

Reviewer	Date
SG	09.01.25

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1. Introduction

This policy sets out the responsibilities of Headway Cambridge & Peterborough (Headway CP) to ensure vulnerable adults are kept safe from harm.

An adult at risk is 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 he or she has a mental health problem, a disability, a sensory impairment, is old and frail, or has some form of illness.

The rights of vulnerable adults to live a life free from neglect, exploitation and abuse are protected by the Human Rights Act 1998. Specifically, an adult at risk's right to life is protected (under Article 2); their right to be protected from inhuman and degrading treatment (under Article 3); and their right to liberty and security (under Article 5).

2. Aims and Our Commitment to Safeguarding

Abuse is a violation of an individual's human and civil rights; it can take many forms. The Board of Trustees, Staff and Volunteers in Headway CP are committed to a practice which promotes the welfare of adults at risk and safeguards them from harm.

The purpose of this policy and the associated procedures is to protect and promote the welfare of adults at risk using or receiving services provided by the Organisation and support the Organisation, its employees and volunteers in fulfilling their statutory responsibilities.

All employees and volunteers have a clear responsibility to take action when they suspect or recognise that a vulnerable adult may be a victim of significant harm or abuse.

Staff and volunteers in Headway CP accept and recognise our responsibilities to develop awareness of the issues that cause adults at risk harm, and to establish and maintain a safe environment for them. We will not tolerate any form of abuse wherever it occurs or whoever is responsible.

We are committed to promoting an atmosphere of inclusion, transparency and openness and are open to feedback from the people who use our services, carers, advocates, our staff and our volunteers with a view to how we may continuously improve our services / activities. We will endeavour to safeguard adults by:

- Adhering to our safeguarding policy and ensuring that it is supported by robust procedures;
- Carefully following the procedures laid down for the recruitment and selection of staff and volunteers;
- Providing effective management for staff and volunteers through supervision, support and training;
- Implementing clear procedures for raising awareness of and responding to abuse within the organisation and for reporting concerns to statutory agencies that need to know, while involving carers and vulnerable adults appropriately;
- Ensuring general safety and risk management procedures are adhered to;

- Promoting full participation and having clear procedures for dealing with concerns and complaints;
- Managing personal information, confidentiality and information sharing; and
- Safeguarding adults at risk by implementing a code of behaviour for all involved with the organisation, including visitors.
- Headway CP appoints staff and volunteers with great care to ensure as far as possible, that we do not employ anyone with improper motives for caring and working with clients.

The Organisation believes safeguarding is committed to the following principles for vulnerable adults:

- Their welfare is paramount
- Whatever their background and culture, parental or pregnancy status, age, disability, gender, racial origin, religious belief, sexual orientation and/or gender identity, they have the right to participate in society in an environment which is safe and free from violence, fear, abuse, bullying and discrimination
- They have the right to be protected from harm, exploitation, abuse, and to be provided with safe environments to live and participate
- Working in partnership with them, alongside their parents or carers and other agencies, is essential to the promotion of their welfare

We will review our policy, procedures, code of behaviour and practice at regular intervals, at least once every three years.

Headway CP strives to provide the best possible service and a high degree of security from danger for its clients. We recognise, however, that from time to time and for a variety of reasons, some failing from those high standards of service and security may occur and that serious failing may sometimes constitute abuse. Headway commits itself to tackling any such failing with due speed, adhering to legislation, government guidance and local procedures on safeguarding including sharing information.

Abuse can occur either when clients are within the Headway Day Centre setting and when they are outside of such settings, either alone or escorted by staff, volunteers and/or others. Headway CP accepts a responsibility to try to protect its clients from abuse at all times when under Headway CP's care, but recognises that it can be difficult to ensure clients' safety when they are away from the Headway Day Centre.

3. Definitions of abuse

The term 'adult at risk' is used in this policy to replace 'vulnerable adult'. This is because the term 'vulnerable adult' may wrongly imply that some of the fault for the abuse lies with the victim of abuse. We use 'adult at risk' as an exact replacement for 'vulnerable adult' as that phrase is used throughout existing guidance.

Headway recognises and seeks to prevent all forms of abuse including but not limited to:

- **Physical abuse:** which includes hitting, pushing, kicking, deliberate infliction of pain, rough, or inconsiderate handling, and the misuse of medication.
- **Sexual abuse:** which includes rape, sexual assault, any sexual act to which the client (if capable of doing so) did not give full informed consent, or unable to give consent, unnecessary touching of private areas of the body, failure to provide privacy for personal activities such as toileting, and laughing at a client who is displaying themselves inappropriately.

- **Inappropriate restraint:** which includes tying to a chair, wheelchair or lavatory, locking into a confined space, holding longer than is necessary for safety, and the use of medication to keep a client quiet.
- **Psychological abuse:** which includes using any form of intimidation, speaking rudely or without consideration for a client's feelings, talking disrespectfully about a client, threatening, ridiculing, deprivation of contact or isolation, shouting, talking in a way deliberately not to be heard or understood, and ignoring a client.
- **Financial or material abuse:** which includes theft, fraud, misuse or misappropriation of client's property, possessions or benefits, and exerting pressure by coercion or persuasion in connection with gifts, inheritance or financial transactions.
- **Neglect:** which includes not giving adequate and appropriate food and drink, failure to provide timely help with physical and personal care needs, denying access to health promotion advice, ignoring medication requirements, ignoring a client's social needs, and not taking action to accommodate a client's disability.
- **Discrimination:** which includes using insulting descriptions, making unfavourable remarks or jokes about a client's race, ethnic or national origins, marital status, religion or belief, sex, sexual orientation, cultural background, disability or appearance, using unwelcome nick names, failing to provide facilities for a service user to practice their religion, and a lack of respect for deeply held or spiritual beliefs.
- **Bullying and harassment:** which includes but is not limited to ageism, sexual, racial, religious banter; the display of material with ageist, sexual, racial or religious overtones; sarcastic personal remarks about others.
- **Institutional** - repeated poor practice throughout an organisation, inflexible services based on the needs of the staff/managers rather than the needs of the individuals they are supporting.
- **Human trafficking** – Which includes men, women and children being moved from one place to another for the purpose of exploitation. No border needs to be crossed and it can happen nationally or within one community.
- **Modern slavery** – Which includes people being exploited for personal gain such as, domestic servitude, forced labour, criminal activities and sexual exploitation.
- **Prevent** - Prevent works to stop individuals from getting involved or supporting terrorism or extremist activity. Radicalisation is a psychological process where vulnerable and/or susceptible individuals are groomed to engage into criminal, terrorist activity.

This list is not exhaustive and there could be other forms of abuse which staff may become aware of.

4. External signs of Abuse

Physical Abuse:

Signs may include the individual:

- Showing obvious physical signs of abuse – bruising, cuts, abrasions, restricted movement and wincing in pain
- Covering up: Long sleeves, long trousers, polo necks, long skirts, scarves, sunglasses, heavy make-up
- Giving excuses like: 'walked into a door', 'tripped over'
- Flinching: Avoidance of contact (physical) with others
- Acting withdrawn: Mood swings – could be time related i.e. pub closing time, when abuser finishes work, or is due to visit
- Having very low self-esteem, may believe they've 'asked for it'

Psychological Abuse:

Signs may include the individual:

- Acting withdrawn
- Being anxious/stressed
- Having mood swings – highs and lows/manic behaviour
- Exhibiting erratic behaviour
- Having no self-confidence/self-doubt
- Exhibiting an unwillingness to engage
- Covering up – making excuses/tall stories
- Exhibiting signs of depression
- Exhibiting signs of self-harm
- Unable to function properly in day to day life i.e. participating in activities, routines, daily structure
- Looking to abuser for praise/approval

Neglect:

Signs may include the individual:

- Having an unkempt appearance/not clean
- Being hungry on numerous occasions
- Being very quiet/withdrawn
- Having poor surroundings
- Having low self esteem
- Changing behaviour when carer, or certain other people are present
- Concerns that the person is not receiving medication when someone is reliant on others to provide this support

Discriminatory Abuse:

- Name calling
- Favouritism
- Discrimination based on an individual's religious beliefs
- Sexual abuse
- Age discrimination
- Racial discrimination
- Illness or disability discrimination
- Discrimination based on an individual's gender

Financial Abuse:

- Stealing money (carer, family member – their lifestyle improves for the better)
- Red Letters – bills not paid
- No food in cupboards and poor appearance
- Lack of basic facilities
- May occur when the individual has no understanding of their own money
- Misuse of Power of Attorney

Sexual Abuse:

Individual may:

- Become withdrawn
- Not want physical contact
- Be uncomfortable being near to people
- Use inappropriate behaviour towards others
- Become pregnant
- Contract a sexually transmitted infection
- Change his/her behaviour when certain people are present

Institutional Abuse:

Examples include:

- Where there are policies or practices which are introduced that take away people's rights (e.g. refusing toilet requests)
- Inadequate facilities – e.g. toilets being inaccessible
- Unacceptable behaviour –e.g. clients left unattended, welfare ignored
- Internal cultures – employer bullying, taking jokes too far
- Double funding – charity grant and then make extra claims
- Separation of spouses when they can reasonably be kept together
- Not booking interpreters when appropriate
- Correct processes not being adhered to, e.g. moving and handling

Human Trafficking and Modern Slavery

Examples include:

- Appearing malnourished
- Showing signs of physical injuries and abuse
- Seeming to adhere to scripted or rehearsed responses in social interaction
- Lacking official identification documents
- Appearing destitute/lacking personal possessions
- Working excessively long hours
- Living at place of employment
- Checking into hotels/motels with older males, and referring to those males as boyfriend or “daddy,” which is often street slang for pimp
- Poor physical or mental health
- Tattoos/ branding on the neck and/or lower back
- Untreated sexually transmitted diseases
- Small children serving in a family restaurant
- Security measures that appear to keep people inside an establishment - barbed wire inside of a fence, bars covering the insides of windows
- Not allowing people to go into public alone, or speak for themselves

Prevent

Signs include:

- Isolating themselves from family and friends
- Talking as if from a scripted speech
- Unwillingness or inability to discuss their views
- A sudden disrespectful attitude towards others
- Increased levels of anger
- Increased secretiveness, especially around internet use.

This list is by no means exhaustive.

5. General principles

Headway CP appoints staff and volunteers with great care to ensure as far as possible, that we do not employ anyone with improper motives for caring and working with clients.

Headway selects staff fairly but rigorously, requiring two references and a 'Disclosure and Barring Service' check.

Our induction and training include material intended to alert staff to the possibility of abuse by themselves or others and to guide them in anti-abuse practice.

Our complaints procedure, which is contained within Headway CP's 'Comments, compliments and complaints Policy and Procedure' and Disciplinary Policy is designed to make it easy for clients, relatives, advocates and others to bring to the attention of management any feelings of concerns or unease they have about the treatment of clients, to investigate all criticisms or suggestions for changes in practice speedily, thoroughly, and to take appropriate corrective and disciplinary action.

We will welcome the involvement of a representative in cases where a client feels the need for such support in putting their point of view, and of the relevant authority responsible for inspecting the service in any situation where it is thought that investigating alleged abuse would be better carried out by someone independent of the service.

Headway CP hopes to maintain an atmosphere of openness in its centres and within the service generally, which enables anyone to express concerns and for them to be taken and investigated seriously. We intend in this way to identify and deal with any possible abuse or shortfall from our standard of excellence at an early stage.

In particular, we aim to encourage staff and volunteers to observe and bring to the attention of management anything in the running of the service or the conduct of colleagues, which causes them concern.

We regard this sort of mutual criticism not as disloyalty or malicious whistle blowing but as a healthy defence against poor practice and occasionally against serious abuse. Management undertakes to take such criticism seriously, to investigate all of the points made and to protect staff and volunteers who speak out in this way.

If however, you make a malicious allegation which is found later to be untrue, we may decide to take disciplinary action against you.

It is important that staff and volunteers explain clearly to clients that if they divulge any information that relates to suspected abuse that they have a duty to report this to their senior manager, as there may be other issues relating to this client that are known to other agencies or there may be others at risk. It is important to make it clear that in these circumstances, confidentiality or keeping secrets must be overridden when abuse concerns are revealed.

We will work in full cooperation with Local Authority and Regional Constabulary. Where we are uncertain if the issue is a safeguarding situation or not, we will always exercise caution and discuss concerns with the Multi Agency Safeguarding Hub (MASH) to reach a decision on the best course of action.

6. Staff Responsibilities

Safeguarding Officer- Chloe Woods

Community and Day Services Manager: Suzy Barker

Hospital Services Manager: Emilie Witt

6.1 CEO

- To ensure that this policy and related procedures are implemented, monitored and consistently reviewed.
- To ensure that reports or concerns about the protection of adults at risk are dealt with appropriately and in accordance with the procedures that underpin this policy.
- To ensure that all staff, volunteers and service users have access to this policy and therefore know what to do in the event of a breach of this policy.
- To ensure that safeguards are in place to protect the interests of the clients.
- To ensure that the relevant Safeguarding Team is informed if there are any concerns about a member of staff/volunteer regarding adults at risk.

6.2 Admin and Operations Officer and Service Managers

- To ensure that all staff, volunteers and service users have access to this policy and therefore know what to do in the event of a breach of this policy.
- To ensure that safeguards are in place to protect the interests of the clients.
- To ensure that the Local Authority Safeguarding Team is informed if there are any concerns about a member of staff/volunteer regarding adults at risk.

6.2 All staff / volunteers

- To read, be aware of and understand the contents of and adhere to this policy at all times.
- To attend and complete available training.
- Carry out their duties in a way that actively safeguards and promotes the welfare of vulnerable adults. They must also act in a way that protects them from wrongful allegations of abuse as far as possible. They must bring safeguarding concerns to the attention of a Manager or Director.

A failure to comply with this policy may be deemed as a disciplinary offence.

7. Audit Plan

CEO – will:

- Monitor adherence of the policy and report findings to the Board
- Report any concerns as required under the Disclosure and Barring Service.
- Review this policy and ensure that it is updated as required from time to time

8. Scope of Policy

This policy applies within all Headway CP services and to all members of staff and/or volunteers.

While employees, volunteers and contracted services providers are likely to have varied levels of contact with adults at risk as part of their duties and responsibilities, everyone should be aware of the potential indicators of abuse and neglect and be clear about what to do if they have concerns. Responsibilities are limited and it is important to remember the following:

IT IS NOT THE RESPONSIBILITY OF ANY EMPLOYEE, VOLUNTEER OR CONTRACTED SERVICE PROVIDER TO DETERMINE WHETHER ABUSE IS ACTUALLY TAKING PLACE

HOWEVER:

IT IS THE RESPONSIBILITY OF EMPLOYEE, VOLUNTEER OR CONTRACTED SERVICE PROVIDER TO TAKE THE ACTIONS SET OUT IN THE PROCEDURE, IF THEY ARE CONCERNED ABUSE IS TAKING PLACE

9. Guidelines for dealing with concerns about suspected abuse, abuse reported to Headway staff, or where abuse might be happening outside the service.

Headway CP has a duty to ensure that our clients are protected and we need to ensure that we respond in the best interest of our clients. Such action will be taken as outlined in the Headway Recording, Reporting Concerns, Disclosures and Allegations or Suspicions of Abuse Procedure.

Staff who suspect abuse should be aware of the need to collect and report information given, but they are not investigating officers. This must be left to the Multi Agency Safeguarding Hub (MASH) team who are trained in this work. If abuse is suspected, detailed evidence can only be obtained by investigating officers, e.g., police, otherwise reporting can be contaminated and affect a legal case.

All staff are to familiarise and refer to the following aspects of Headway CP's Safeguarding Policy for reference:

- Recording, Reporting Concerns, Disclosures and Allegations or Suspicions of Abuse Procedure

Depending on the circumstance, reporting safeguarding concerns might or might not be with the consent of the client. Guidance should be sought from the senior manager. Staff should ensure that all concerns are dealt with sensitively and in the strictest confidence.

Where a client may lack capacity to make decisions, action should be taken in the best interests of the client and advice sought from Adult Social Services. A general rule is that all adults are assumed to have capacity to make decisions unless proven to the contrary.

Staff should be aware it might not always be appropriate to take concerns forward formally and therefore all suspected concerns of abuse should be reported to the Manager or senior person. It is the responsibility of the Manager or another senior person to decide the course of action to be taken.

All relevant documentation i.e. personal files and Headway Incident Form should be completed. Confidentiality should be respected at all times and information should only be shared with those 'on a need to know' basis.

The severity of the suspected abuse may require the matter to be referred to appropriate agencies e.g. care/ case manager, social services, or the police.

Before making a referral, we may consult Adult Social Services or Clinicians, if appropriate.

10. Guidelines for dealing with concerns about allegations of abuse concerning Headway CP staff, or Volunteers

Managing Allegations

- **Our Safeguarding officer is Chloe Woods**

When allegations or concerns are expressed about an employee or volunteer:

- Take the allegation or concern seriously
- Immediately inform the Safeguarding Officer

- If the Safeguarding Officer feel a safeguarding referral is appropriate- CEO to be informed
- The Senior Lead at the earliest opportunity, provides a report of the incident, the intended action and investigates the allegations.
- If the Senior lead believes a adult is 'at risk' of immediate significant harm, which includes situations which they would reasonably believe requires the emergency services, then they will contact the relevant emergency services
- Managers / Senior person should ensure that all reports are accurate and written only by the relevant members of staff involved.
- It is a requirement to contact the Multi Agency Safeguarding Hub (MASH) if there are any concerns about any member of staff/volunteer working with adults at risk and therefore you must speak to your manager or senior person if you have any concerns about any member of staff/volunteer, who will decide on the appropriate course of action to take.

This procedure will be used when allegations, from whatever source, are made that the person has:

- Behaved in a way that has harmed or may have harmed a child, young person or adult at risk
- Possibly committed a criminal offence against or related to a child, young person or adult at risk
- Behaved towards a child, young person or adult at risk in a way that indicates he or she will pose a risk of harm if they work regularly or closely with children, young persons or adults at risk.

In addition, these procedures will be used:

- If there are concerns about the person's behaviour towards their own children, or children unrelated to their employment or voluntary work, and there has been a recommendation from a strategy discussion that consideration should be given to the risk posed to children, young persons or adult at risk they work with
- When an allegation is made about abuse that took place some time ago and the accused person may still be working or having contact with children, young persons or adults at risk.

Recording, Reporting Concerns, Disclosures and Allegations or Suspicions of abuse procedure when a staff member or volunteer has a concern

(see flowchart in Appendix C)

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APPENDIX A

Recording and Reporting Concerns, Disclosures and Allegation or Suspicions of Abuse Form (All Staff and Volunteers)

Please answer all relevant questions as fully as you can.

Work location	
Name of Vulnerable Adult	
Age/Date of Birth	
Gender	
Name of key contact (family member, paid carer or key informal carers if known)	
Home Address (if known)	

Please complete those sections below that are relevant

1). Disclosure by a Vulnerable Adult
Who did the vulnerable adult make the disclosure to?
What did the vulnerable adult actually say?

2). Indicators	
Describe any signs or indicators of abuse (with times and dates)	
	Has the vulnerable adult alleged that any particular person is the abuser (if so, please record details and the relationship, if any, to the vulnerable adult below)
3). Concerns expressed by another person about a vulnerable adult	
	Record the concerns that were passed to you (with dates and times) and if possible ask the person who expressed the concerns to confirm that the details as written are correct.

	4). Details of any immediate action taken e.g. first aid
	5). Has the vulnerable adult expressed any reservations about you talking to the line manager or nominated manager about the matter?
	6). Does the vulnerable adult have any particular needs, e.g. communication, etc?
	Signatures
	<p>To be signed by the person reporting the concern</p> <p>Name _____</p> <p>Job title _____</p> <p>Signed _____ Date _____</p>
	<p>Date received and actioned by Line Manager</p> <p>Name _____</p> <p>_____</p> <p>Signed _____</p> <p>Date _____</p>

APPENDIX B

Reporting of Concerns to the Multi Agency Safeguarding Hub (MASH) Team (CONFIDENTIAL)

This form should be completed by the **Safeguarding Officer** and the information provided to the MASH Safeguarding Team as requested when there is a concern of abuse or suspected abuse of a vulnerable adult that has been drawn to your attention. You should provide as much detail as possible but **do not** investigate the abuse/ suspected abuse as this can only be done by trained people or it could adversely affect a legal case.

Organisation Information <i>(this section can be completed in advance)</i>	
Name	
Address	
	Postcode
Tel No	Email Address

Vulnerable Adult Information			
Full Name		Known as	
Age/DOB			
Address			
	Postcode		
Tel No			
Gender	Male p Female p	Current Location	
GP Name			
Address:			
	Postcode:		
Tel No			

Key contact: Family member, paid carer or key informal carers	
Address	

	Postcode
Telephone	
Is the vulnerable adult aware that the abuse/suspected abuse has been reported: Yes p	
No p	

Abuse/Suspected Abuse Information
Describe the nature of the harm and the reasons for your suspicions of abuse, providing as much information as possible (<i>e.g. dates, times, locations</i>)
Any known previous concerns or evidence of abuse? Yes p No p If yes, please provide details
Was medical attention necessary? Yes p No p If yes, please provide details
Briefly describe any other action taken

Appendix C

