



HYDE PARK SOURCE

Safeguarding Adults Policy

Safeguarding children, young people and adults at risk is the responsibility of us all.

Hyde Park Source (HPS) recognises its responsibility to safeguard and promote the welfare of children, young people, and adults at risk. This policy covers safeguarding for adults. Please see the safeguarding for children and young people alongside this policy for specific information about this group.

All staff, volunteers and beneficiaries need to be aware of the possibility of abuse occurring. It is the responsibility of us all to put the welfare of others first and to recognise behaviours that can put them at risk.

We aim to create a safe and respectful environment for learning and play within which people can thrive, be free of neglect and abuse and HPS can practice with the help and security of clear guidance.

This policy applies to adults at risk that we work with and is relevant to all members of HPS. It draws upon the [Care Act 2014](#) and [Mental Capacity Act 2005](#).

The Care Act 2014 states that organisations should work in partnership.. This included HPS, therefore, we must cooperate with the relevant local authority to protect children, young people and adults at risk.

This policy should be read alongside and applied in conjunction with the following HPS policies:

- Recruitment [add online]
- Lone Worker [not required online – Volunteers not required -HPS Staff Only]
- Volunteer (available online)
- Data Protection [add online]
- Staff Behaviour (available online)

These guidelines are for the use of all paid staff, volunteers, beneficiaries and visitors. We will make the policies accessible to all via our website or upon request. Through the guidelines we will endeavour to ensure that:

- People are listened to, valued and respected.
- All members of HPS are aware of the need to be alert to the signs of abuse and know what to do with their concerns.
- All paid staff and support volunteers are subject to rigorous recruitment procedures.
- All paid staff and support volunteers are given appropriate support and training.

An adult at risk is, but not limited to:

- someone who is aged 18 years or more
- has needs for care and support
- an older person who is frail due to ill health, physical disability of cognitive impairment
- someone who has a learning and/or physical disability and/or sensory impairment
- someone with a long term illness and/or condition
- someone who abuses substances and alcohol
- is experiencing, or is at risk, of abuse or neglect, and
- as a result of their need for care and support is unable to protect him or herself against the abuse or neglect or the risk of it

Named person(s) for Safeguarding

Name of Safeguarding Lead: Kelly Ramsden
Name of Deputy Safeguarding lead: Peter Tatham
Telephone number: 0113 245 8863
Mobile Number: 07599298747

You can also contact the Chair of the Management Committee at chair@hydeparksource.org should you feel unable to speak to staff.

Telephone number of [Adult's Social Care](#) Service

- Monday to Friday 9-5pm: 0113 222 4401
- Out of hours: 07712 106 378

Six safeguarding principles

HPSs approach to safeguarding adults is underpinned by the following six principles of the Care Act 2014:

Empowerment - People being supported and encouraged to make their own decisions and informed consent.

Prevention - It is better to take action before harm occurs.

Proportionality -The least intrusive response appropriate to the risk presented.

Protection - Support and representation for those in greatest need.

Partnership - Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.

Accountability - Accountability and transparency in safeguarding practice.

Making safeguarding personal

Making safeguarding personal is a key safeguarding aim. H S's safeguarding practice must promote a person's wellbeing. Staff need to consider the person's perception of what is happening, what safety means to them, their priorities and their desired outcomes regarding what needs to change. Staff must approach safeguarding in a person-centred way that draws on the individual's strengths, self-knowledge and networks, with a view to having a long-lasting and sustainable impact so that the person can remain safe, happy and independent.

Mental Capacity Act 2005

The law presumes that adults have mental capacity to make their own decisions. Staff must always assume a person has capacity unless it is proved otherwise. However, there will be times and situations in which an individual lacks mental capacity in relation to particular decisions. The Mental Capacity Act, 2005 provides a statutory framework to empower and protect people who may lack mental capacity to make decisions and provides a framework for making decisions on their behalf. A person is not able to make a decision if they are unable to:

- Understand information given to them
- Retain that information long enough to be able to make a decision
- Weigh up the information available to make a decision
- Communicate their decision.

There are five statutory principles set out in the act:

- An adult at risk has the right to make their own decisions and is assumed to have mental capacity.
- Adults at risk must receive appropriate help and support to make decisions, e.g. accessible information.
- The adult at risk can make unwise decisions and cannot be deemed to lack capacity solely for that reason.
- Any decision made about the person who lacks mental capacity must be done in their best interests and should be the least restrictive of their rights.
- Before any decision is made on someone's behalf, consideration must be given that the same outcomes can be achieved in a way that is least restrictive on the person's rights and freedoms.
- It is important to emphasise the two-stage diagnostic test as part of this approach in order to decide whether or not the person has the capacity to make a particular decision and that the principle that capacity is time and decision specific.

The two-stage test must be applied:

1. Is there an impairment of, or disturbance in the functioning of a person's mind or brain? If so:
2. Is the impairment or disturbance sufficient that the person lacks the capacity to make a particular decision?

If the first stage is met, the second test requires the individual to show that the impairment or disturbance to the brain or mind prevents them to make the decision in question at that time.

In the event that a person lacks mental capacity to consent about decisions relevant to their own welfare a best interest assessment would be required, and the [Mental Capacity Code of Practice](#) should be followed. A referral to [adult social care](#) or the relevant Community Mental Health Team must be made to assess the person.

Recognising signs of abuse in adults

It can often be difficult to recognise abuse. The signs listed in these guidelines are only indicators and may have reasonable explanations. People may behave strangely or seem unhappy for many reasons, as they move through the stages of life and experience changes. It is nevertheless important to know what could indicate that abuse is taking place to be alert to the need to consult further.

Someone can abuse a person by actively inflicting harm or by failing to act to prevent harm. Abuse can take place within a family, in an institutional or community setting, by telephone or on the Internet. Abuse can be carried out by someone known to the person or by a complete stranger

Different kinds of abuse can take many forms. It might include, but is not limited to:

Physical abuse such as being hit, kicked, locked in a room or inappropriate restraint.

Sexual abuse such as being made to take part in any sexual activity when under 16 or when the over 16-year-old has not given or is not able to give their consent.

Psychological abuse such as being shouted at, ridiculed or bullied, as well as being made to feel frightened.

Financial or material abuse such as theft, fraud, exploitation, pressure in connection with financial matters or misuse of someone else's finances.

Neglect involves the failure to provide care or support and ~~this results~~[this results](#) in someone being harmed.

Discriminatory abuse involves treatment or harassment based on age, gender, sexuality, disability, race or religious belief.

Modern slavery includes human trafficking and forced labour.

If these forms of abuse are caused by an organisation, it is sometimes called **organisational abuse**.

When abuse occurs between partners or by a family member, it is often called **domestic violence** and abuse.

If you are worried about ~~someone~~someone, it is important that you keep a written record of any physical or behavioural signs and symptoms. In this wayway, you can monitor whether or not a pattern emerges and provide evidence to any investigation if required.

Self-neglect is when an adult declines essential support with their care and support needs, and this is having a substantial impact on their overall wellbeing.

Becoming aware of a safeguarding issue

We may become aware of a Safeguarding concern in a number of different ways:

- a third party or anonymous allegation is received;
- an adult at risk's appearance, behaviour, artistic expression or statements cause suspicion of abuse and/or neglect;
- an adult at risk reports an incident(s) of alleged abuse which occurred some time ago;
- a written report is made regarding the serious misconduct of a worker towards an adult at risk.

All must be treated seriously and the HPS Report Form must be filled out. See details in following sections.

What to do with your concerns?

Stage 1

- If an adult at risk discloses, listen carefully to what they have to say and take it seriously. Act at all times as if you believe what they are saying.
- Always explain to them that any information they have shared with you will have to be shared with others, if this indicates they and or other vulnerable people are at risk of harm.
- Assess whether there is immediate danger and if necessary, take immediate action to ensure the safety of the adult at risk (e.g. call the emergency services).
- If there is no immediate danger, the safeguarding concern must be raised with the safeguarding lead (named above)
 - Immediately, where the concern is urgent and serious
 - Within the same working day for any other concerns
- Record what was said as soon as possible after any disclosure. The person who receives the allegation or has the concern, should complete safeguarding report form and ensure it is signed and dated. The contents of the safeguarding report should include:
 - Date and time of notification
 - Person's name
 - What was said
 - Actions to be taken (both internal and external actions - based on the issues raised in the allegation. [E.g.;E.g.](#) Notify the HPS Project Officer or Safeguarding lead, and/or Local Adult Social Care Team.
 - Respect confidentiality and file documents securely
- **Do not investigate** incidences of suspected abuse. Your safeguarding responsibility is to gather information and make an appropriate referral **only**.

Stage 2

- The Named person(s) should take immediate action if there is a suspicion that an adult at risk has been abused or likely to be abused. In this [situation](#), the Named Person should contact the police and/or the Local Adult Social Care Team. If a referral is made direct to the Duty and Advice team this should be followed up in writing within 24 hrs.
- NB Parents / carers will need to be informed about any referral to Children & Young people's Social Care or Adult Social Care unless to do so would place the person at an increased risk of harm.

Sometimes you may just feel concerned about an adult at risk but do not know whether to share your concerns or not. In this [situation](#), you should always raise your concerns with your designated safeguarding lead and/or Adult Social Care.

The responsibility for investigating allegations of abuse, whether they result from the disclosure of an adult at risk or the concerns of an adult, lies with social workers and the police.

Allegations against staff

Any allegations made against a member of staff (including the lead) should be discussed with the

The worker must ensure that the individual is safe and away from the person against whom the allegation is made.

Regardless of whether a police and/or an Adult Social Care investigation follows, an internal investigation should take place and consideration is given to the operation of disciplinary procedures. This may involve an immediate suspension and/or ultimate dismissal dependant on the nature of the incident

Safe recruitment

We are aware that there are people who work/volunteer, or seek to work/volunteer with vulnerable adults who may pose a risk to them. We will ensure through our recruitment process for staff and volunteers, this risk will be reduced.

- We will always use application forms to assess the candidate's suitability for the role.
- We will make it clear that you have a commitment to safeguarding and protecting children and adults at risk.

- We will always aim to have a face-to-face interview/induction with pre-planned, clear questions.
 - Including a question about whether they have any criminal convictions, cautions, other legal restrictions or pending cases that might affect their suitability to work with children or adults at risk.
- We will always ensure any staff or volunteers who carry out regulated activity, apply for an enhanced [DBS check](#) or allow us to access their information via the auto update service.
 - There may be occasions where you wish to appoint a worker from abroad. This will mean that DBS check will only check the length of time they have been residing in the UK. ~~Nevertheless~~Nevertheless, a “fit person” check may be available from the country the person is moving from. You should ensure that additional references are undertaken on any worker from abroad.
- We will always carry out [2two](#) references for Support ~~Roles which~~[Roles, which](#) ask specifically about an individual’s suitability to work with children, and vulnerable adults and receive replies before they commence working/volunteering.
 - Even if you know ~~someone~~someone, very well you must ensure that they go through the same recruitment and selection process as a paid worker.
- Provide all staff and volunteers access to this policy.

Management and supervision of staff/volunteers

~~We meet~~We meet frequently as a staff team and this is a safe space to air any concerns, we also have a delivery team (community gardening group) meeting which is another space created to be able to discuss any concerns arising.

We use a peer-supervision method and also staff receive an annual Appraisal.

Support Volunteers have a de-brief weekly to feedback after each session, and each year a more formal 1-1 supervision is offered (and can be requested at any time).

Recording and managing confidential information

- Staff should record any concerns/allegations of abuse, harm or neglect on the HPS Report Form on the same working day and inform the Lead.
- All information will be processed in line with our Data Protection Policy.
 - This policy aims to protect the rights of vulnerable adults to confidentiality unless the organisation considers they could be at risk of abuse and/or harm.

Good practice

- All staff are responsible for the safety of adults at risk when they are engaged in HP activities and must make sure that health and safety guidelines are followed. Except for volunteers who attend activities with a support worker due to their high needs, in which case the support worker is primarily responsible for their safety.
- All adults at risk attending groups must have completed a registration form prior to attending.
- All staff working with vulnerable adults should receive regular supervision and be encouraged to attend basic Safeguarding training.
- No member of staff should be left alone with a vulnerable adult where they cannot be observed by others.
- Staff should be alert to strangers frequently waiting outside a venue with no apparent purpose.

