



Wells Health Centre

## Policy for Safeguarding Adults

<b>Owner:</b>	<b>Dr Helen Crawley</b>
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**You can report adult safeguarding concerns to  
Adult Social Care on 0300 123 2224  
(01823 368 244 out of hours)  
'Doing nothing is not an option'**

**Introduction**

The purpose of this policy is to highlight the responsibilities and roles of staff to help protect vulnerable adults at risk of abuse and mistreatment. It is designed to provide a framework to support all staff in contact with patients to recognise, report and prevent the abuse of vulnerable adults, by raising awareness.

Wells Health Centre also intends that its practices and procedures follow the principles as set out by the Somerset Safeguarding Adults Board (SSAB):

Empowerment	Adults are encouraged to make their own decisions and are provided with support and information	I am consulted about the outcomes I want from the safeguarding process and these directly inform what happens
Prevention	Strategies are developed to prevent abuse and neglect that promote resilience a self-determination	I am provided with easily understood information about what abuse is, how to recognise the signs and what I can do to seek help
Proportionate	A proportionate and least intrusive response is made balanced with the level of risk	I am confident that the professionals will work in my interest and only get involved as much as needed
Protection	Adults are offered ways to protect themselves, and there is a coordinated response to adult safeguarding	I am provided with help and support to report abuse. I am supported to take part in the safeguarding process to the extent to which I want and to which I am able
Partnerships	Local solutions through services working together within their communities	I am confident that information will be appropriately shared in a way that takes into account its personal and sensitive nature. I am confident that agencies will work together to find the most effective responses for my own situation
Accountable	Accountability and transparency in delivering a safeguarding response	I am clear about the roles and responsibilities of all those involved in the solution to the problem

More information about the SSAB can found on their website:  
[www.ssab.safeguardingsomerset.org.uk](http://www.ssab.safeguardingsomerset.org.uk)

## **Definition of a Vulnerable Adult**

Every adult has a right to respect, dignity, privacy, equity and a life free from abuse. A vulnerable adult is defined in No Secrets (DOH 2000) as:-

“A person aged 18 years or over who is in receipt of or may be in need of community care services by reason of mental or other disability, age or illness and 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.”

## **Types of Abuse**

Abuse refers to various forms of force, threats and fraud against someone. Abuse is any behaviour towards a person that deliberately or unknowingly causes them harm, endangers their life or violates their life.

Abuse could occur as a single or repeated act. It can happen in any relationship and may result in significant harm to, or exploitation of, the individual.

- **Physical abuse** - physical ill treatment of an adult, which may or may not cause physical injury, including hitting, slapping, pushing, pinching, kicking, misuse of medication, restraint, force feeding or appropriate sanctions
- **Sexual abuse** - any form of sexual activity the adult does not want and to which they have not consented to or have the capacity to consent to. This includes rape and sexual assault or sexual acts to which the vulnerable adult has not consented, or could not consent, or was pressurised into consenting
- **Psychological abuse** - the use of intimidation, indifference, hostility, rejection, humiliation, shouting, swearing or the use of discriminatory and/or oppressive language. This includes threats of harm or abandonment, deprivation of contact, isolation or withdrawal from services or supportive networks. This can result in the adult's choices, opinions and wishes being negated.
- **Financial or Economic abuse** - including theft, fraud, exploitation pressure 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 or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating. Neglect also includes failure to intervene in situations that are dangerous to the person concerned or to others, particularly when the person lacks the mental capacity to assess risk.
- **Racial/Discriminatory abuse** directed at someone because of their race, skin colour, nationality (including citizenship), ethnic or national origin, religious beliefs, language or cultural differences

An individual, group or organisation may perpetrate abuse

### **Common indications**

- Bruising
- Burns
- Falls
- Apparent lack of personal care
- Nervousness or withdrawn
- Avoidance of topics of discussion
- Inadequate living conditions or confinement to one room in their own home
- Inappropriate controlling by carers or family members
- Obstacles preventing personal visitors or one-to-one personal discussion
- Sudden changes in personality
- Lack of freedom to move outside the home, or to be on their own
- Refusal by carers to allow the patient into further care or to change environs
- Lack of access to own money
- Lack of mobility aids when needed

### **Who could be an Abuser?**

Anyone could be an abuser. They may be a:

- Relative
- Friend or neighbour
- Service user or patient
- Professional or volunteer worker
- Stranger who takes advantage of a person's vulnerability?

### **Where Can Abuse Happen?**

Abuse can happen anywhere:

- When a person lives alone or with a relative
- In nursing, residential or day care settings
- In hospital
- While in police custody or prison
- In a person's own home by people coming in to provide care services

- In a public place

## **Basic Principles**

- Abuse is unacceptable, and should not be condoned in any circumstance
- Staff need to consider their own personal safety and must not expose themselves to unnecessary risk. Line Managers should be kept informed.
- Consideration should be given to the clients' psychological as well as physical health
- Advice and support should be offered, if appropriate and safe to do so. Victims should be given time and space to make choices and be supported, whatever decision they make
- Consideration should be given to people who may have communication difficulties e.g. learning disabilities, cultural barriers, speech, language or hearing problems
- Any response must ensure that the safety of victims and children is the first priority
- Do not blame the victim for the abuse. Responsibility for the abuse lies with the perpetrators
- Always believe a victim who discloses abuse
- Treat them with respect and dignity

## **Procedure**

If any of the team at the Wells Health Centre suspect that a person is being abused, they have a duty of care to report it in the first instance to the Lead for Safeguarding Adults, Dr Helen Crawley. In her absence please discuss with either Karen Polly (Practice Manager) or Craig Massey (IT, IG and Operations Lead). Concerns could also be discussed with the Adult Social Care on 0300 123 2224 in the absence of the Safeguarding Lead. You can be given informal advice over concerns without naming the person in first instance.

### **IF YOU SUSPECT ABUSE, REPORT IT**

Staff need to be aware that it is NOT their responsibility to investigate cases of abuse or mistreatment of vulnerable adults.

The person being abused may not wish to take action. If this is the case it is still important to report it so that the incident can be recorded. Reporting abuse will provide information that can be used as part of a future investigation. Without this information, abuse may continue and previous evidence will not exist.

## **Confidentiality**

The practice has a confidentiality policy. Staffs have a duty to protect privacy and not disclose inappropriately. Health information should be shared with doctors and nurses and other health staff on a need to know basis to provide safe and effective health care.

There are occasions when information needs to be shared to protect the best interests of the patient and those most vulnerable in society. There is legislation which supports this, for example The Crime and Disorder Act 1998, which aims to protect public interests:

- Information will be shared on a 'need to know' basis when it is in the best interest of the service user.
- Informed consent should be obtained, but if this is not possible and others are at risk, it may necessary to override this requirement.
- Decisions about who needs to know and what needs to be known, should be taken case-by-case in discussion with line managers.

### **Domestic Violence/Abuse**

In cases of domestic violence/abuse where the definition of a 'vulnerable adult' as defined in this policy, is not clear, discuss further with your line manager or Safeguarding Lead.

### **Record Keeping**

Health records play an important role in responding to domestic abuse – and not just in a health setting.

The records you keep can be used in:

- Criminal proceedings if a perpetrator faces charges
- Obtaining an injunction or court order against a perpetrator
- Housing provision
- Civil procedures in family courts to assess the risks associated with granting abusive parent contact with children

The British Medical Association for medical practitioners and Crown Prosecution Service have stressed the need for evidence that is beyond reasonable doubt i.e. reliable, available and cogent, particularly in the event of the perpetrator of violence being charged with assault.

### **Training**

It is the responsibility of the practice Safeguarding Lead to ensure staffs are competent to comply with this Policy and its contents. Learning needs to be appropriate to skills and knowledge with recorded evidence as to how staffs have gained the knowledge and skills to follow the principles of this policy e.g. team meeting minutes, staff forums, training sessions.

Training that relates to this policy will be available to staff are:

- Adult Safeguarding Training
- Safeguarding Children Training
- Equality and Diversity
- Conflict Resolution Training

## Contact and Reporting

**You can report adult safeguarding concerns to:  
Adult Social Care Tel 0300 123 2224  
Out of Hours – 01823 368 244**

<b>Contact list</b>	
<b>Service</b>	<b>Contact number</b>
Police (Local)	101
Community Mental Health	01749 836 722
Adult Support services (Somerset Direct)	0845 345 9133
Adult Support services (Out of Hours)	01458 253 241
Age Concern	0845 643 4709
Somerset Domestic Abuse helpline	0800 69 49 999
Social Services	0300 123 2224
Social services (Out of Hours)	01823 368 244
Drug Misuse	01373 475560
Medical Defence Organisation	0800 716 646