



VULNERABLE ADULTS PROTECTION POLICY

DEFINITION OF VULNERABLE:

The Police Act 1997 (Enhanced Criminal Record Certificates) (Protection of Vulnerable Adults) Regulations 2000 defines vulnerable adult as a person aged 18 or over who is in need of community care services because of a e.g. learning or physical disability, a physical or mental illness, including an addiction to alcohol or drugs, a reduction in physical and mental capacity, and is unable to take care of themselves or to protect themselves against significant harm, abuse, neglect or exploitation.

DEFINITION OF ABUSE:

e.g. "Abuse is the harming of another individual usually by someone who is in a position of power, trust or authority over that individual. The harm may be physical, psychological or emotional or it may be directed at exploiting the vulnerability of the victim in more subtle ways (*for example, through denying access to people who can come to the aid of the victim, or through misuse or misappropriation of his or her financial resources*).

The threat or use of punishment is also a form of abuse.

In many cases it is a criminal offence." *Centre for Policy on Ageing (1996)*

Types of Abuse e.g. Physical abuse, sexual abuse, spiritual abuse, psychological/emotional abuse, neglect, financial or material abuse, discriminatory abuse.

No abuse is acceptable and some abuse is a criminal offence and must be reported to the police as soon as possible.

RESPONSIBILITIES OF THE PROJECT:

- To ensure employees and volunteers are aware of the adult protection policy and are adequately trained.
- To notify the appropriate agencies if abuse is identified or suspected.
- To support and where possible secure the safety of individuals and ensure that all referrals to services have full information in relation to identified risk and vulnerability.
- To CRB check volunteers and employees that have access to or work with Vulnerable Adults.

RESPONSIBILITIES OF EMPLOYEES AND VOLUNTEERS:

- To be familiar with the adult protection policy and procedures.
- To take appropriate action in line with the policies of the project.
- To declare any existing or subsequent criminal convictions. Failure to do so will be regarded as gross misconduct, possibly resulting in terminating their involvement.

SUPPORT FOR THOSE WHO REPORT ABUSE:

All those making a complaint or allegation or expressing concern, whether they be employees, volunteers or service users should be reassured that:

- They will be taken seriously.
- Their comments will usually be treated confidentially, but their concerns may be shared if they or others are at significant risk.
- If a service user, will be given immediate protection if possible from the risk of reprisals or intimidation.
- If employees or volunteers they will be given support and afforded protection if necessary in line with the Public Interest Disclosure Act 1998.

THE VULNERABLE ADULT HAS THE RIGHT:

- To be made aware of this policy.
- To have alleged incidents recognised and taken seriously.
- To receive fair and respectful treatment throughout.
- To be involved in any process as appropriate.
- To receive information about the outcome.

RECRUITMENT OF EMPLOYEES AND VOLUNTEERS:

- Recruitment procedures and policies include:
 - Completion of an application form
 - References
 - All employees and volunteers have a duty to declare any existing or subsequent criminal convictions.
 - Full CRB check
 - Interview

TRAINING OF EMPLOYEES AND VOLUNTEERS:

- Familiarisation with all policies and procedures during induction
- Further training, dependent on nature of role, e.g.
 - Risk assessment and management
 - Types of abuse and recognising signs of abuse
 - Keeping appropriate records
 - Listening skills

MANAGEMENT AND SUPERVISION:

- It is the team leader's responsibility to clarify with the worker or volunteer their roles and responsibilities regarding their relationships with vulnerable adults with whom they may be in contact. Regular supervision for employees and volunteers will monitor the work and offer the opportunity to raise any issues.

RECORD KEEPING:

- There should be a written record of any concerns. This confidential information will be kept in a locked drawer by the appropriate person, and will be kept for as long as deemed necessary, in line with Data Protection principles. (please refer to Confidentiality & Data Protection Policy)
- All incidents should be discussed with Team Leaders and Project Director.
- Records kept by employees about vulnerable adults should only include:
 - Contacts made
 - Referrals made, including date, time, reason and referral agency.

PLANNING:

Wherever possible employees and volunteers should avoid lone working with a vulnerable adult. But if unavoidable, one to one contact should ideally take place in an environment where other employees or

volunteers are present or within sight. If this is not possible, one to one contact should take place where the employee or volunteer has experience working with vulnerable adults.

ACCESS TO AN INDEPENDENT PERSON:

Any vulnerable adult who comes into contact with employees or volunteers regularly, should be given information on their right to talk with an independent person, and their name and contact arrangements. This could form part of the normal registration process.

The independent person for the project is: **Dr Sharron Frood Ph.D.**

IDENTIFICATION OF ABUSE

PHYSICAL ABUSE SIGNS:

Note. Some ageing processes can cause changes which are hard to distinguish from some aspects of physical assault e.g. skin bruising can occur very easily due to blood vessels becoming fragile.

- A history of unexplained falls or minor injuries
- Bruising in well protected areas, or clustered from repeated striking
- Finger marks
- Burns of unusual location or type
- Injuries found at different stages of healing
- Injury shape similar to an object
- Injuries to head/face/scalp
- History of GP or agency hopping, or reluctance to seek help
- Accounts which vary with time or are inconsistent with physical evidence
- Weight loss due to malnutrition, or rapid weight gain
- Ulcers, bed sores and being left in wet clothing
- Drowsiness due to too much medication, or lack of medication causing recurring crises/hospital admissions

SEXUAL ABUSE SIGNS:

- Disclosure or partial disclosure (use of phrases such as 'It's a secret')
- Medical problems, e.g. genital infections, pregnancy, difficulty walking or sitting
- Disturbed behaviour e.g. depression, sudden withdrawal from activities, loss of previous skills, sleeplessness or nightmares, self-injury, showing fear or aggression to one particular person, inappropriately seductive behaviour, loss of appetite or difficulty in keeping food down.
- Behaviour of others towards the vulnerable adult
- Circumstances - e.g. two service users found in a toilet area, one in a distressed state.

PSYCHOLOGICAL/EMOTIONAL SIGNS:

- Isolation
- Unkempt, unwashed, smell
- Over meticulous
- Inappropriately dressed
- Withdrawn, agitated, anxious not wanting to be touched
- Change in appetite
- Insomnia, or need for excessive sleep
- Tearfulness
- Unexplained paranoia, or excessive fears
- Low self esteem
- Confusion

NEGLECT SIGNS:

- Physical condition poor
- Clothing in poor condition
- Inadequate diet
- Untreated injuries or medical problems
- Failure to be given prescribed medication
- Poor personal hygiene

FINANCIAL OR MATERIAL SIGNS:

- Unexplained or sudden inability to pay bills
- Unexplained or sudden withdrawal of money from accounts
- Disparity between assets and satisfactory living conditions
- Extraordinary interest by family members and other people in the vulnerable person's assets

DISCRIMINATORY SIGNS:

- Lack of respect shown to an individual
- Signs of substandard service offered to an individual
- Exclusion from rights afforded to others, such as health, education, criminal justice.

SPIRITUAL ABUSE:

Spiritual abuse is linked to emotional abuse, and could be defined as an abuse of power, often done in the name of God or religion, which involves manipulating or coercing someone into thinking, saying or doing things without respecting an individual's right to choose for themselves. Some indicators of spiritual abuse might be a leader who is intimidating and imposes his/her will on other people, perhaps threatening dire consequences or the wrath of God if disobeyed. He or she may say that God has revealed certain things to them and so they know what is right. Those under their leadership are fearful to challenge or disagree, believing they will lose the leader's (or more seriously God's) acceptance and approval.

OTHER SIGNS OF ABUSE:

- Inappropriate use of restraints
- Sensory deprivation e.g. spectacles or hearing aid
- Denial of visitors or phone calls
- Failure to ensure privacy or personal dignity
- Lack of flexibility of choice e.g. bedtimes, choice of food
- Restricted access to toilet or bathing facilities
- Lack of personal clothing or possessions
- Controlling relationships between care employees and service users.

WHAT TO DO

TO ACT OR NOT TO ACT:

All allegations or suspicions are to be treated seriously.

No abuse is acceptable and some abuse is a criminal offence and must be reported to the Police as soon as possible. To determine the appropriate action it is important to consider:

- **Risk** - does the vulnerable adult, employee or volunteer understand the nature and consequences of any risk they may be subject to, and do they willingly accept such a risk?
- **Self-determination** - is the vulnerable adult able to make their own decisions and choices, and do they wish to do so?

- **Seriousness** - A number of factors will determine whether intervention is required. The perception of the victim must be the starting point. Factors informing assessment of seriousness will include:
 - The perception by the individual and their vulnerability
 - The extent of the abuse
 - The length of time it has been going on
 - The impact on the individual
 - The risk of repetition or escalation involving this or other vulnerable adults
 - Is a criminal offence being committed?

ACTIONS AND CONSIDERATIONS:

The first priority should always be to ensure the safety and protection of vulnerable adults. To this end it is the responsibility of all employees to act on any suspicion or evidence of abuse or neglect and to pass on their concerns to a responsible person or agency.

- In situations of immediate danger, take urgent action by calling the relevant emergency services (e.g. Police, ambulance, GP)
- Remember to have regard to your own safety. Leave the situation if it is not safe for you.
- Listen to the vulnerable adult and offer necessary support and reassurance.
- Issues of confidentiality must be clarified early on. For example employees or volunteers must make it clear that they will have to discuss the concerns with their Team Leader.
- Where a vulnerable adult expresses a wish for concerns not to be pursued then this should be respected wherever possible. However, decisions about whether to respect the service user's wishes must have regard to the level of risk to the individual and others, and their capacity to understand the decision in question. In some circumstances the vulnerable adult's wishes may be overridden in favour of considerations of safety.
- Decisions to override the vulnerable adult's wish not to take the matter further should if possible be the product of discussion with appropriate line management.
- Note your concerns and any information given to you or witnessed by you.
- Report concerns to the appropriate Team Leader.
- Remember it is not necessary or advisable for you to seek evidence. By supporting the vulnerable adult and carefully logging any information given to you at this stage, you will lay the foundations for an effective formal investigation.
- Understand the need not to contaminate, or to preserve evidence if a crime may have been committed.

Discussion and decision-making information should be shared with your team leader, who must approve with the StreetlightUK Project Director any actions to be taken and any documentation or correspondence being sent out.

Employees with concerns should discuss them with the Project Director as soon as is practicably possible, preferably on the same day.

If the Team Leader is not available, then any concerns should be discussed with the Project Director.

Volunteers with concerns should discuss these discreetly with their Team Leader or Project Director as soon as possible after the abuse or suspicions of abuse are observed.

CONCERNS ABOUT COLLEAGUES:

These should be addressed initially with the Team Leader but if this is not possible or the concern is about the Team Leader or another volunteer or employee, then any concerns should be discussed with the Project Director.

TO REFER OR NOT TO REFER

The decision to refer or not to refer should be made by the Team Leader and the Project Director. When considering the decision as to whether to refer elsewhere (e.g. to Police, Social Services, and National Care Standards Commission) the following should be taken into account:

- The wishes of the vulnerable adult and their right to self-determination
- The mental capacity of the vulnerable adult
- Known indicators of abuse
- Definitions of abuse
- Level of risk to this individual
- The seriousness of the abuse
- The effect of the abuse on the individual
- Level of risk to others
- The effect of the abuse on others
- Whether a criminal offence has been committed
- Whether other statutory obligations have been breached (e.g. NCSC)
- The need for others to know
- The ability of others (e.g. Police, Social Services) to make a positive contribution to the situation.

ISSUE OF MENTAL CAPACITY AND CONSENT:

The consent of the vulnerable adult must be obtained except where:

- The vulnerable adult lacks the mental capacity to make a decision, and a risk assessment indicates that referral would be in their best interests
- Others may be at risk
- A crime has been committed.

WHO TO REFER TO OR REPORT CONCERNS TO:

- Emergency Social Services
- Relevant hospital Social Services team if vulnerable adult is in hospital
- Community Mental Health Team where the vulnerable adult has an ongoing mental health need.
- Hospital Trusts/Primary Care Trusts where there is a complaint of abuse by an employee.
- The Police, if there is an emergency where delay may result in serious harm to the vulnerable adult or if the abuse may constitute a crime.

INFORMATION, IF KNOWN, WHICH WILL BE REQUIRED WHEN YOU MAKE A REFERRAL OR REPORT YOUR CONCERNS:

- Details of alleged victim - name, address, age, gender, ethnic background including principal language spoken and details of any disability
- Details of GP and any known medication
- Whether the individual is aware of and has consented to the referral/report.
- The mental capacity of the individual (are there any concerns/doubts about this?)
- If appropriate advice agency on preferred/advised method or environment when approaching the alleged victim or perpetrator.

ALSO, ANY RELEVANT INFORMATION, FOR EXAMPLE:

- Reasons for concerns and therefore this referral
- Details of how these concerns came to light
- Specific information relating to these concerns
- Details of any arrangements which have already been made for the protection of the vulnerable adult or any immediate action taken

- Details of anyone else to whom this referral has also been made
- Details of the alleged perpetrator and if they are a vulnerable adult
- Details of alleged abuse and information about suspicions
- Details of any other background information
- An impression of how serious the situation might be
- Details of any other professional involved
- Details of carers and any significant family members, neighbours, friends.

DOS AND DON'TS

EMPLOYEE OR VOLUNTEER SHOULD NOT:

- Appear shocked, horrified, disgusted or angry
- Press the individual for details (unless requested to do so)
- Make comments or judgements other than to show concern
- Promise to keep secrets
- Confront the abuser
- Risk contaminating evidence

EMPLOYEE OR VOLUNTEER SHOULD:

- Stay calm
- Listen patiently
- Reassure the person they are doing the right thing by telling you
- Explain what you are going to do
- Report to Team Leader who will report to Project Director.
- Immediately write a factual account of what you have seen.

DISCUSS WITH THE PROJECT DIRECTOR WHO WILL:

- Ascertain whether the situation might fall within the definitions of abuse outlined in this policy
- Consider the vulnerable adult's capacity to make decisions
- Ascertain whether an advocate or appropriate adult might be necessary
- Ascertain any immediate action required
- Ascertain whether an investigation is necessary in accordance with internal policies and procedures
- Where abuse is suspected conclude that a referral be made to the appropriate agency.