

The aim of this policy is to outline the practice and procedures for all members of the ADAPT Group (Audlem and District Acting Positively for Transition) to contribute to the prevention of abuse of vulnerable adults through raising awareness and providing a clear framework for action when abuse is suspected. It is aimed at protecting the vulnerable adult and the ADAPT member, recognising the risks involved in lone working.

Definition of a 'vulnerable adult'

A person aged 18 or over who is 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 / herself; or
- Unable to protect him / herself from significant harm or serious exploitation

Definition of Abuse

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.

Types of Abuse

- Can be a violation on individuals' human or civil rights by another person or persons;
- May consist of a single act or repeated acts;
- Can occur in any relationship or setting;
- May result in harm to, or serious exploitation of, the person subjected to it;
- Physical, including hitting, slapping, punching, kicking, misuse of medication, restraint, or inappropriate sanctions;
- Sexual, including rape and sexual assault or sexual acts to which the person has not consented or was pressured into consenting;
- Psychological, including emotional abuse, threats, humiliation, intimidation, verbal abuse;
- Financial or material, including theft, fraud, exploitation, the misuse or misappropriation of property, possessions or benefits;

- Neglect, including ignoring medical or physical care needs, the withholding of adequate food, heat, clothing and medication;
- Discriminatory, including racist, sexist, that are based on a person's disability, and other forms of similar treatment;
- Institutional abuse or mistreatment by a regime or by any individual within any building where care is provided.
- Hate crime

Although the above list is fairly comprehensive it is not exhaustive

Signs 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 states 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, repeated or excessive masturbation, inappropriately seductive behaviour, loss of appetite or difficulty in keeping food down.
- Behaviour of others towards the vulnerable adult

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

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 staff and service users

Rights and responsibilities

Responsibilities of the ADAPT Group

- To ensure members are aware of the adult protection policy and that they fully understand it.
- 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 DBS check all members that have access to or interact with Vulnerable Adults in the course of ADAPT activities

Responsibilities of ADAPT members

- To be familiar with the adult protection policy and procedures
- To take appropriate action in line with the policies of ADAPT
- To declare any existing or subsequent convictions. Failure to do so will be regarded as gross misconduct, possible resulting in being asked to leave the group.

Support for those who report abuse

All those making a complaint or allegation or expressing concern, 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
- Whether ADAPT project users or ADAPT members, they will be given immediate protection from the risk of reprisals or intimidation

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

GOOD PRACTICE

New members

Carry out risk assessment of role to assess need for DBS Disclosures. Check references thoroughly including appropriate Disclosure. All members have a duty to declare any existing or subsequent convictions. Failure to do so will be regarded as gross misconduct, possibly resulting in being asked to leave the group.

Awareness

All members interacting with vulnerable adults for ADAPT activities will be made aware of the vulnerable adult policy and be issued a copy prior to the activity beginning. Assessments will also be carried out to ensure: Further training needs, dependent on nature of role, e.g.

- Risk assessment & management
- Types of abuse and recognising signs of abuse
- Keeping appropriate records
- Listening skills

Management and Supervision

It is the Designated Person's responsibility to clarify with the member their roles and responsibilities regarding their relationships with vulnerable adults with whom they may be in contact. Regular supervision for members will monitor the activity and offer the opportunity to raise any issues. The ADAPT Designated Person is identified in the ADAPT Safeguarding Child Protection Policy.

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.
- All incidents should be discussed in supervision with the Designated Person.
- Records kept by the Designated Person about vulnerable adults should only include: Contacts made, referrals made, including date, time, reason and referral agency.

Planning ahead

Wherever possible members should avoid lone working with a vulnerable adult. But if unavoidable, one to one contact should take place in an environment where other members are present or within sight.

Access to an independent person

Any vulnerable adult who comes into contact with ADAPT members regularly should be given information on their right to talk with an independent person, and their name and contact arrangements.

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 or ADAPT member 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

SUMMARY

The members' primary responsibility is to protect the vulnerable adult if they are at risk. Each member has a duty to take action. Members should not have to cope alone.

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 MEMBERS 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, offer necessary support and reassurance.
- Issues of confidentiality must be clarified early on. For example members must make it clear that they will have to discuss the concerns with the Designated Person.
- 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 vulnerable adult'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 the Designated Person.
- Note your concerns and any information given to you or witnessed by you.
- Report concerns to the Designated Person.
- 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 THE DESIGNATED PERSON, WHO MUST APPROVE ANY ACTIONS TO BE TAKEN AND ANY DOCUMENTATION OR CORRESPONDENCE BEING SENT OUT.

Members with concerns should discuss them with the Designated Person on the same day.

To refer or not to refer

THE DECISION TO REFER OR NOT TO REFER SHOULD BE MADE BY THE TEAM LEADER (person in authority). When considering the decision as to whether to refer elsewhere (e.g. to Police, Social Services, 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

ISSUES OF MENTAL CAPACITY & 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

Social Care Team - 0300 123 5010 during normal office hours - Quote your address and postcode and you will be put through to the correct locality team

Emergency Duty Team - Tel: 0300 123 5022 Fax: 01606 275776 EDT@cheshireeast.gov.uk This service operates between 16.30 (16.00 Fri) and 09.00, and 24 hours at the weekends and bank holidays. An experienced duty social worker will answer the phone; they will listen and take details of the problem. The duty Social Worker will give advice and guidance over the phone on how to deal with the problem, or they will either: Recommend that contact is made with another more appropriate agency. They will supply the contact details. Refer the matter on to another Social Services team the next working day, and/or arrange for a visit by an appropriately qualified or experienced worker to assess and respond to the problem.

DOs and DON'Ts

Members 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 the Designated Person
- Write a factual account of what you have seen, immediately.

Members 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

Discuss with the Designated Person 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 personnel policies and procedures
- Where abuse is suspected conclude that a referral be made to the appropriate agency