CL06 - Safeguarding Adults Policy & Procedure (Incl. Adults at Risk and risk of harm to self).

Wellspring Therapy & Training is committed to safeguarding all adults. Safeguarding is contextual and factors which can increase vulnerability and risk are intersectional and dynamic. It is vital to recognise every individual's unique experiences of discrimination and oppression, and this should be considered in all risk assessments.

1. Policy Statement on Safeguarding Adults

a. Wellspring provides counselling and training services to adults (including 'adults at risk'[1]) and young people. These procedures have been designed to ensure the welfare and protection of any adult who accesses the services provided. The procedures recognise that adult abuse can be a difficult subject to deal with. Safeguarding and protection for young people under the age of eighteen is dealt with in our *CL05 Safeguarding Children Policy.*
b. Wellspring is committed to preventing abuse.
c. This policy acknowledges the need to respond to allegations and suspicions of abuse, including those made against staff and volunteers. Wellspring recognises the need to build constructive links with other relevant agencies, and our policies and procedures have been prepared in accordance with the North Yorkshire's Safeguarding Adults Board guidelines.
d. This policy addresses the need to safeguard Adults at Risk as defined by the Care Act (2014) and adults at risk of experiencing, abuse or neglect. We recognise that many of our clients may be suffering from mental health issues and might come under the category of 'adult at risk' and are at more risk of harm.
e. Wellspring recognises that all people have a right to protection from abuse and takes seriously its responsibility to safeguard the welfare of all clients, workers and people connected to the charity.
f. Wellspring works with adults who may be at risk of harm to themselves. Such concerns will be managed through Wellspring's safeguarding procedures and risk management processes.
g. The risks involved in lone working, which is inevitable in a therapeutic service, are addressed separately in in *HS06 – Lone Working Policy and Procedure*.

2. Policy Principles

Wellspring's policy and procedures are based on the following principles:

a. The welfare of adults is everyone's responsibility, particularly when it comes to protecting them from abuse.
b. No form of abuse is acceptable. All allegations of abuse, misconduct or neglect will be taken seriously by Wellspring and responded to swiftly and appropriately.

[1] Previously 'vulnerable adults'

c. All personal data will be processed in accordance with the requirements of the Data Protection Act 2018 and the UK General Data Protection Regulation as per *WS13 – Data Protection Policy and Procedure.*
d. Confidentiality will be maintained within the limits of the contract Wellspring makes with clients and staff. Wellspring will safeguard adults in a way that supports them in making choices and having control about how they want to live, following the six safeguarding principles set out in the Care Act 2014: Empowerment, Prevention, Proportionality, Protection, Partnership, Accountability. See Appendix 1.

3. Responsibilities

Wellspring will:

a. Promote the health and welfare of all clients by providing therapy in accordance with the ethical framework of the governing bodies with which the therapist is registered, such as the British Association of Counselling and Psychotherapy (BACP) and the Healthcare Professions Council (HCPC).
b. Respect and promote the rights, wishes and feelings of all people in so far as is possible.
c. Promote and implement appropriate procedures to seek to safeguard the well-being of all people and protect them from abuse.
d. Recruit, train, support and supervise its staff and volunteers to adopt best practice for the safeguarding and protection of adults from abuse and to minimise risk to themselves.
e. Respond to any allegations of misconduct or abuse of adults in line with this document as well as implementing, where appropriate, Wellspring's relevant internal disciplinary and appeals procedures as set out in *HR11 Disciplinary Policy*.
f. Ensure staff and volunteers are aware of Wellspring's Safeguarding polices through induction, ongoing training opportunities and distribution of updated versions of policies and procedures.
g. Wellspring will work closely with other agencies to support people at risk. This may also include working with relatives and advocates to achieve positive outcomes.

Responsibilities of employees and volunteers include:

a. To be familiar with the Safeguarding policy and procedures
b. To follow Wellspring's Safeguarding policy and procedures immediately when they have a safeguarding concern
c. Where required, to declare any existing or subsequent convictions. Failure to do so will be regarded as gross misconduct, resulting in dismissal of staff.

4. . Definitions

What is abuse? "Abuse is a violation of an individual's human and civil rights by any other person or persons" - No Secrets: Department of Health, March 2000

a. Abuse can take many forms, and the circumstances should always be considered. It may consist of a single act or repeated acts.
b. Abuse may be carried out deliberately or unknowingly.
c. Abuse may be a single act or repeated acts. Multiple forms of abuse may occur in an on-going relationship or abusive service setting to one person, or to more than one person at a

time, making it important to look beyond single incidents or breaches in standards, to underlying dynamics and patterns of harm.

d. People who behave abusively come from all backgrounds and walks of life. They may be doctors, nurses, social workers, advocates, staff members, volunteers or others in a position of trust. They may also be relatives, children, friends, neighbours or people who use the same services as the person experiencing abuse. See appendix 4 for types of abuse.

Who is an adult?

In England, an adult is anyone aged 18 or over.

Who is an 'adult at risk'?

a. The Care Act (2014) defines an *adult at risk* as:
   i. An adult who has needs for care and support (whether or not the local authority is meeting any of those needs for care and support)
   ii. And is experiencing, or is at risk of, abuse or neglect
   iii. And as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect[2]

b. Such a definition includes adults with physical, sensory and mental impairments and learning disabilities, howsoever those impairments have arisen (e.g. whether present from birth or due to advancing age, chronic illness or injury).

c. Also included are people with a mental illness, dementia or other memory impairments, people who misuse substances or alcohol and unpaid carers.

5. Preventing Abuse

Wellspring is committed to preventing abuse. We are committed to putting in place safeguards and measures to reduce the likelihood of abuse taking place within the services we offer and ensure that all those involved within the organisation will be treated with respect.
Staff and volunteers must ensure they report any concerns immediately to the Designated Safeguarding Person (DSP) or Designated Safeguarding Lead (DSL).

Recruitment

Wellspring is committed to safe recruitment policies and practices for paid staff and for volunteers. This includes:

a. Application and interview using standard application forms and questions

b. Appropriate DBS checks for staff and volunteers renewed every 3 years or annual checks against the update service.

c. Ensuring references are taken up.

Training

a. Adequate training on Safeguarding Adults is provided for staff and volunteers.

For staff, we ensure that they are fully trained, appropriately supervised and monitored against good practice standards. Free Safeguarding training is available through the Local Authority (NYSAB (safeguardingadults.co.uk) and staff must access this and refresh it at least every two

[2] http://www.nypartnerships.org.uk/sab, accessed September 2017

years. Other training opportunities should be provided in response to any safeguarding trends or concerns highlighted.

Discipline

The organisation works within the current legal framework for reporting staff and volunteers responsible for hurting or harming people in their care.
For staff, and volunteers where applicable, disciplinary procedures are followed.

6. Named Person(s) for Safeguarding Adults

Wellspring has a Designated Safeguarding Lead (DSL), Deputy DSL and Designated Safeguarding Persons (DSP) who are responsible for dealing with any Safeguarding Adults concerns. *Refer to Appendix 2 for contact details.*

The responsibilities of the above are:

a. To provide guidance on wellspring safeguarding policies and procedures.
b. To ensure that concerns are suitably categorised, acted on, clearly recorded and appropriate signposting given and referrals made using the safeguarding adults flowchart.
c. To reinforce the need for confidentiality, data protection and to ensure that staff and volunteers are adhering to good practice with regard to confidentiality and safety.
d. To offer staff and volunteers information on local partnership working processes and appropriate contacts, e.g. urgent help cards.

In addition, the responsibilities of the DSL and deputy DSL are:

a. To ensure that all staff are aware of what they should do and who they should go to if they have concerns that someone they know or are working with may be experiencing or has experienced abuse or neglect.
b. To make and follow up any referrals and ensure the issues have been addressed.
c. To ensure that staff and volunteers working directly with clients who have experienced abuse, or who are experiencing abuse, are well supported and receive appropriate supervision.
d. To offer staff and volunteers information on local partnership working processes and appropriate contacts.
e. To ensure that Wellspring's policies and procedures are updated with new guidance and legislation

7. Procedure: What you should do if you suspect abuse or harm is happening

Wellspring recognises that it has a duty to act on reports, or suspicions of abuse or neglect. Anyone who has contact with adults at risk and hears disclosures or allegations or has concerns about potential abuse or neglect has a duty to pass them on appropriately.

Some of Wellspring's adult clients do not meet the Care Act definition of an Adult at Risk at the point of referral, but they may still be at risk in some way and temporarily meet the criteria for an adult at risk. The most common scenarios involve current or recent suicidal thinking, self-harming behaviour or risk of harm to another person. In this situation follow the safeguarding adults flow chart in appendix 2, which says concerns should be discussed with the DSP/DSL who will work collaboratively to agree an appropriate course of action and ensure all reports of abuse and harm are responded to within an appropriate timescale:

a. Life threatening reports will be responded to immediately
b. All other disclosures will be responded to within 2 working days.

Responding to a disclosure of abuse:

a. Reassure the person concerned that you are taking them seriously
b. Do not be judgemental and jump to conclusions
c. Listen to what they are saying and remain calm
d. Use open-ended questions to ascertain a clear factual picture of the disclosure
e. Record what you have been told/witnessed as soon as possible on Lamplight
f. Tell them that the information will be treated seriously and explain what will happen next
g. Reassure the person that they will be involved in the decisions made about them
h. Update them regularly

Witnessing abuse or harm, or where abuse has just taken place

The priorities will be:

a. Call an ambulance if required
b. Call the police if a crime has been committed
c. Preserve evidence
d. Keep yourself, staff and clients safe
e. Inform the DSP and DSL as soon as possible
f. Record what happened
g. Consider onward referral or signposting

Responding to a disclosure of risk of harm to self:

a) remind clients of the contract; disclose concerns to DSP/DSL;
b) take immediate action for life-threatening risk. See SG adults flowchart.
c) use Exploring Safety Questionnaire, consider Keep Safe Plan (appendix 2)
d) encourage contact with GP/crisis services;
e) record safeguarding concerns on Lamplight;
f) review risk regularly.
g) Take the client to supervision
h) Practice self-care.

8. Allegations Against Staff, Volunteers or Trustees

Wellspring will ensure that any allegations made against members of staff, volunteers and Trustees will be dealt with swiftly:

a. If a crime has been witnessed the police should be contacted immediately.
b. Where a member of Wellspring is suspected to have committed a criminal offence the police will be informed.
c. The safety of the individual(s) concerned is paramount - ensure they are safe and separated.
d. The DSL will liaise with the LA Adult Social Care team to discuss the best course of action and to ensure that the organisation's Disciplinary Procedures are coordinated with any

other enquiries taking place as part of the ongoing management of the allegation. Inform their supervisor and university, if they are training.

e. Staff/Volunteers are encouraged to report any suspicions or incidents of abuse taking place or as per *WS14 - Whistleblowing Policy and Procedure*.
f. Staff who have concerns about any working practices making them more vulnerable to claims of abuse should raise this with their manager during supervision, ensuring their concerns are recorded and responded to.
g. Consider a partial or full suspension of client work, and if they are a trainee inform their university and supervisor.

9. Recording and Managing Confidential Information

Wellspring is committed to maintaining confidentiality wherever possible and information around Safeguarding Adults issues should be shared only with those who need to know. There may be occasions when confidentiality cannot be guaranteed. For further information, see *CL04 - Confidentiality Policy & Statement*.

a. All allegations/disclosures/concerns should be recorded in detail. Concerns about clients are to be recorded on Lamplight. Concerns about staff and volunteers should be recorded on the HR database.
b. The information should be factual and not based on opinions.
c. Recording should clearly identify:
    i. what the person tells you,
    ii. what you have seen
    iii. what any witnesses have seen,
    iv. contact details of all witnesses accurately recorded.
d. The information that is recorded will be kept secure and will comply with data protection requirements.

Where an adult has capacity and no other person is at risk, then if they do not want to take the matter further it will remain confidential. The person will be reassured and provided with information about possible sources of help, should they decide to do something at a later date.

10. Policy Review

a. This policy will be reviewed annually in line with any changes in legislation or best practice.
b. All staff will be aware of this policy through the recruitment and training policies within Wellspring.

11. Related Policies

There are a series of organisational policies, which in conjunction with this one, enforce the commitment of the organisation in the protection of adults, these include:

- HR01 – Recruitment and Selection Policy
- HR11 – Disciplinary Policy
- HR13 – Equality, Diversity and Inclusivity Policy
- HR14 – Grievance Policy
- HS06 – Lone Working Policy
- HS13 – Risk Assessment Policy
- WS01 – Complaints Policy

- WS13 – Data Protection Policy
- WS18 – DBS policy
- WS14 – Whistle Blowing Policy
- CL04 – Confidentiality Policy

Appendix 1: The Six principles of the Care Act 2014.

The following six principles apply to all sectors and settings including care and support services, further education colleges, commissioning, regulation and provision of health and care services, social work, healthcare, welfare benefits, housing, wider local authority functions and the criminal justice system. The principles should inform the ways in which professionals and other staff work with adults. The principles can also help SABs, and organisations more widely, by using them to examine and improve their local arrangements.

Six key principles underpin all adult safeguarding work

• Empowerment – People being supported and encouraged to make their own decisions and informed consent. “I am asked what I want as the outcomes from the safeguarding process and these directly inform what happens.”

• Prevention – It is better to take action before harm occurs. “I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help.”

• Proportionality – The least intrusive response appropriate to the risk presented. “I am sure that the professionals will work in my interest, as I see them and they will only get involved as much as needed.”

• Protection – Support and representation for those in greatest need. “I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want.”

• Partnership – Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse. “I know that staff treat any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me.”

• Accountability – Accountability and transparency in delivering safeguarding. “I understand the role of everyone involved in my life and so do they.”

Appendix 2: Safeguarding Adults flowchart, keep safe plan and exploring safety questionnaire.

Exploring Safety Questionnaire

Client Identifier	Date
Counsellor	Session Number

Tell me more about your thoughts about ending your life / harming yourself
Have you made a specific plan to end your life? How would you do it, where, when, any preparations made? Do you have the resources to do it?
What has happened in the past? How have you coped with thoughts like this before?
How likely is it that you will act on these thoughts or plans in the next week? 0 1 2 3 4 5 6 7 8 9 10 No, Not at all Yes, I probably will
Are there any triggers or things going on in your life that make you feel worse at the moment?
What has stopped you from acting on your thoughts or plans so far?

What makes you feel better and takes your mind off things?
Who can support you? Encourage the person to contact: GP/ Support Worker/ Friend
Are you able to come to our session next week?
Do you know who you can contact if you feel in crisis? Give your client one of our “need urgent help cards”
Therapist: There may be times when working towards safety with a client is not possible. This might be if they are going to immediately act on their thoughts of suicide or have already taken steps to end their life. In these circumstances - remind the client of our contract and seek emergency help. Call GP, 111, or 999. If time allows complete Keep Safe Plan or agree to do this next week. See Safeguarding Adults policy and procedure. Complete concerns notification form/discuss with Wellspring safeguarding person/ contact supervisor.

Keep Safe Plan

If you have made specific plans and think you may act on them imminently then it is vital that you get help now:

Ring 111 or get yourself quickly to your local hospital's A&E,

and tell them clearly that you are at risk to yourself.

If you experiencing suicidal ideation and/ or engaging in self harm you could use this tool to help keep you safe.	
1. **warning signs**: thoughts, emotions, or situations that signal a potential crisis (for example, anniversaries, separation, or increased hopelessness)	
2.**coping strategies**: identify self-management techniques that have worked before or could be effective in the future	
3. **engaging support from others**: identify personal contacts (for example, family, carers, trusted adults) to approach when coping strategies aren't enough. ***professional support**: include contact details for crisis lines, mental health professionals, or local services.*	Supportive person: (Number) _____ Supportive person: (Number) _____ Doctor: (Number) _____ _____ Samaritans: 116 123 or jo@samaritans.org Other: (Number) _____
5. Other people can help me by: *(Write down reminders of the kind of help you can ask other people for eg. keeping me*	

company or letting me come over, being in touch with me online.)	
***distraction through connection**: plan activities or interactions that help distract from distress, such as visiting a favourite place, engaging in hobbies, or connecting in person or digitally with friends.*	
environment safety. Where do I feel safe, and how do I make my current environment feel safer. What can I have near me that help me feel calm? What do I need to take out of my environment?	
8. If I still feel suicidal and at risk a safe place I can go to is: *(Write down places you may be able to go if you still feel at risk eg. Friend who has agreed to be available – check limits to this; nearest A&E remembering to tell them you feel you are a danger to yourself.)*	
Other recourses that might be helpful: such as apps, books, drop in centers.	

Appendix 3: Contact details

NYSCP (safeguardingchildren.co.uk) for more information regarding keeping children and young people safe.

NYSAB (safeguardingadults.co.uk) for more information regarding keeping Adults at risk safe.

Designated Safeguarding Lead:

Jude Crook	01423 881881	jude@wellspringtherapy.co.uk

Deputy Designated Safeguarding Lead:

Jo Hart	01423 881881	Jo@wellspringtherapy.co.uk

Designated Safeguarding Persons:

Nick Garrett	01423 881881	nick.garrett@wellspringtherapy.co.uk
Katy Walters	01423 881881	Katy@wellspringtherapy.co.uk
Margaret Castro		Margarettrustee@wellspringtherapy.co.uk
Lisa Burnham	01423 881881	office@wellspringtherapy.co.uk
Liz Kanabar	01423 881881	training@wellspringtherapy.co.uk
John Wood		johnwtrustee@wellspringtherapy.co.uk

North Yorkshire Social Services Duty Team	0300 1312131
MAST **Professionals Consultation Line**	01609 535070
NSPCC HELPLINE	0808 800 5000
Police (N. Yorkshire)	999 or 101 (press 1)

Appendix 4: Types of Abuse.

This list is not exhaustive.

Physical Abuse

Physical abuse may involve hitting, shaking, throwing, poisoning (including misuse of medications), burning or scalding, drowning, suffocating, use of inappropriate sanctions, or otherwise causing physical harm to a person. Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes, ill health to the person in their care.

Emotional Abuse

Emotional abuse is the persistent emotional ill treatment of a person such as to cause severe and persistent adverse effects on their emotional well-being. It may involve conveying to a person that they are worthless or unloved, inadequate, or valued only insofar as they meet the need of another person, threats of abandonment or harm, or causing a person to frequently feel frightened or in danger; limiting access to other people; limiting choice; disrespecting dignity and privacy. Some level of emotional abuse is involved in all types of ill treatment of a person, though it may occur alone.

Sexual Abuse

Sexual abuse involves forcing or enticing a person to take part in sexual activities, whether or not they are aware of what is happening. The activities may involve physical contact, including penetrative (oral, anal or vaginal rape) or non-penetrative acts. They may include non-contact activities such as involving a person in looking at, or in the production of, pornographic material or watching sexual activities, or encouraging them to behave in sexually inappropriate ways.

Ritual Abuse

Ritual abuse refers to practices and patterns of harming behaviours through which persons or groups seek to exert power over others. It can involve extreme forms of physical, sexual, emotional, mental and spiritual abuse and is sometimes ceremonial.

Neglect

Neglect is the persistent failure to meet a physical and/or psychological need, likely to result in the serious impairment of their health or development. It may involve failing to provide adequate food, shelter and clothing, failing to protect a person from physical harm or danger, or the failure to ensure appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to a person's basic emotional, social, religious or cultural needs.

Domestic Abuse

Women's Aid defines domestic abuse as: "An incident or pattern of incidents of controlling, coercive, threatening, degrading and violent behaviour, including sexual violence, in the majority of cases by a partner or ex-partner, but also by a family member or carer." It includes verbal abuse, threats and intimidation, manipulative behaviour, physical and sexual assault, financial abuse, coercion, 'honour-based' violence, and forced marriage (which is different from arranged marriage as the person cannot or does not consent to marry). Prolonged and/or regular exposure to domestic violence can have a serious impact on a person's development and emotional wellbeing, despite the best efforts of the victim parent to protect other members of the family.

Financial or Material abuse

The Care Act 2014 describes 'financial abuse' as 'a type of abuse which includes having money or other property stolen, being defrauded, being put under pressure in relation to money or other property and having money or other property misused.' This may include theft, fraud or exploitation, exerting pressure in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

Discrimination

This may include racist, sexist comments or behaviour, or negative or aggressive comments or behaviour based on a difference, perceived difference or protected characteristic (as defined by the Equalities Act 2010).

Modern slavery

Human trafficking and forced labour including domestic servitude and county lines.

Organisational abuse

Institutions which have a culture of neglect and poor practice with inflexible systems and routines in place that stop people making their own choices about their lifestyle; misuse of power e.g. physical restraint, disrespectful forms of address. The Care Quality Commission has advice on how to report or address organisational abuse.

Self-neglect

This is also a form of abuse. This is when someone chooses not to look after themselves. It might include not eating, or refusing help for their health or care needs and this has a significant effect on their wellbeing.

Cyber-bullying

The use of internet and/or mobile technology to harass, intimidate, or cause harm to another.

Mate crime

Befriending a vulnerable person in order to exploit or take advantage of them.

Radicalisation

Persuading someone to take on extreme views and believe in the legitimacy of a cause using the internet or in-person relationship. This may progress to acting on extreme views and perpetuating violence or terrorism.