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*TQ6 Community Partnership*

**Safeguarding Policy – vulnerable adults.**

Through their day-to-day contact with clients, volunteers and committee members have a crucial role to play in noticing indicators of possible abuse or neglect at an early stage.

1. **Principles**

We recognise that, because of their day-to-day contact with clients and volunteers volunteers and partners are in a position to notice cases of abuse and neglect. So, TQ6 Community Partnership will

* establish and maintain an environment where clients and volunteers feel secure, are encouraged to talk, and are listened to
* ensure clients and volunteers and family members/carers know that there are people they can approach if they are worried
* include opportunities in the interactions we have with clients and volunteers to develop the skills they need to recognise and stay safe from abuse

We will:

* ensure we have a **nominated member of the committee** responsible for safeguarding
* ensure every volunteer and partner and every committee member knows the name of the designated trustee
* Ensure volunteers understand their responsibilities in being alert to the signs of abuse and responsibility for referring any concerns to the designated safeguarding lead
* Set out these responsibilities on the Partnership
* develop effective links with relevant agencies and cooperate as required with their enquiries regarding safeguarding matters
* develop and then follow procedures where an allegation is made against a volunteer or partner
* ensure safe recruitment practices are always followed
* ensure that DBS processes are applied consistently and that secure records are kept that are consistent with the provision of the Data Protection Act 1998

The four key elements to our policy are:

* **Building resilience** - raising awareness of safeguarding issues and equipping clients and volunteers with the language and skills needed to keep themselves safe. Establishing a safe environment in which clients and volunteers can learn and develop within an ethos of openness
* **Procedures** - developing and implementing clear procedures for identifying, monitoring and reporting cases, or suspected cases, of abuse
* **Supporting vulnerable clients** - supporting clients who have been abused, have witnessed violence towards others or may be vulnerable to abuse
* **Preventing unsuitable people from working with clients and volunteers** - ensuring we practice safe recruitment in checking the suitability of staff and trustees and volunteers to work with clients and volunteers.

**KEY CONTACTS**

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| --- | --- | --- |
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| Designated Safeguarding Lead | |  |
| Deputy Safeguarding Lead | |  |
|  | |  |
|  | |  |
| **LOCAL AUTHORITY CONTACTS** | | |
| Local Authority Designated Officer and reporting abuse to DCC | Care Direct on 0345 155 1007  https://new.devon.gov.uk/devonsafeguardingadultsboard/reporting-concerns | |
| Devon Safeguarding Adults Board | https://new.devon.gov.uk/devonsafeguardingadultsboard/ | |

We will ensure that all volunteers, paid and unpaid recognise their duty and feel able to raise concerns about poor or unsafe practice in regard to clients and volunteers and that such concerns are addressed sensitively and effectively in a timely manner in accordance with agreed whistle-blowing policies.

**4 Liaison with Other Agencies**

The charity will:

* ensure that the designated safeguarding leads take advice from a safeguarding specialist when managing complex cases with access to Care Direct and their out-of-hours duty team.
* work to develop effective links with relevant services to promote the safety and welfare of all clients and volunteers.
* co-operate as required, with key agencies in their enquiries regarding safeguarding matters including providing written reports at safeguarding conferences and core groups.

**5 Record Keeping**

The Partnership will

* keep clear, detailed, accurate, written records of concerns about clients and volunteers (noting the date, event and action taken), even where there is no need to refer the matter to clients and volunteers’ social care immediately.
* ensure all records are kept securely, separate from the main client file, and in a locked location.

**6 Confidentiality and information sharing**

Client safeguarding information will be stored and handled in line with the data protection act 1998 principles. The data protection act does not prevent us from sharing information with relevant agencies, where that information may help to protect a client.

Client safeguarding records are normally exempt from the disclosure provisions of the data protection act (and now GDPR), which means that clients and volunteers and family members do not have an automatic right to see them. If any member of staff and trustees receives a request from a client or family member to see safeguarding records, they will refer the request to the designated safeguarding leads.

The Partnership will:

* ensure confidentiality protocols are adhered to and information is shared appropriately. If in any doubt about confidentiality, we will seek advice from the designated safeguarding leads or clients social care as required.
* ensure that the designated safeguarding leads will only disclose any information about a client to other members of staff and trustees on a ‘need to know’ basis, including domestic violence notifications.
* make all volunteers aware that they have a professional responsibility to share information with other agencies in order to safeguard clients and volunteers.
* ensure that statutory guidance on recording allegations against adults are followed.

**Procedures where there are concerns about a client, volunteer, or committee member**

These safeguarding procedures **must** be followed where there are any concerns that may fit into the 6 categories of abuse or if a client discloses information of concern.

**Types of abuse and neglect**

The following descriptions of types of abuse and neglect can help decide whether someone is at risk:

Physical abuse

Domestic violence

Sexual abuse

Psychological abuse

Financial or material abuse

Modern slavery

Discriminatory abuse

Organisational abuse

Neglect and acts of omission

Self-neglect

(People who neglect themselves can often be at risk of other forms of abuse and exploitation.)

1. Pass on your concern to the designated safeguarding lead as soon as possible. Safeguarding must take precedence above all else and can initially be passed on verbally.

2. As soon as possible, complete a written note of the facts and give this to the designated safeguarding lead or the deputy designated safeguarding lead. Opinions, assumptions and interpretations **should not** be recorded, as they are clearly separate from the facts. If you do not feel confident to do this yourself, please ask for help.

3. Remember confidentiality, and do not discuss your concern with others unnecessarily.

4. Do not discuss your concerns with parents or carers unless this has been specifically agreed and authorised

**What to do if a client discloses something to you**

When a client makes a disclosure (tells you something of concern), always follow the four Rs – Receive, Reassure, React and Record.

**Receive**

* Listen to the client/young person. If you are shocked at what the client/young person says to you try not to show it. Take what the client/young person says to you seriously - if they are not believed it adds to the traumatic nature of disclosing. If they meet with shock or disbelief, clients and volunteers and young people may retract what they have said.
* Accept what the client/young person says. Be careful not to burden the client/young person with guilt by asking, “Why didn’t you tell me before?”

**Reassure**

* Stay calm. Reassure the client/young person that they have done the right thing in talking to you. Be honest with the client/young person. Do not make any promises that you are unable to keep, like “I’ll stay with you”, or “Everything will be all right now”.
* Do not promise confidentiality.
* Try to alleviate any feelings of guilt that the client/young person displays, e.g. “You are not alone - you are not the only one this sort of thing has happened to”.
* Acknowledge how hard it must have been for the client/young person to tell you what has happened.

**React**

* React to the client/young person only as far as is necessary for you to establish whether or not you need to refer the matter.
* Do not interrogate the client or make investigations with third parties to establish any of the facts.
* Avoid asking leading questions, for example “Did s/he .......?’
* Be careful about what you ask the client; you may taint any evidence being put before a court. Use open questions, such as, “Is there anything else you would like to tell me?” or “When did it happen?”
* Do not criticise the perpetrator. The client/young person may love him/her and reconciliation may be possible.
* Do not ask the client to repeat what has been said to another member of staff and trustees.
* Explain what you have to do next and to whom you have to talk to.
* Inform the designated safeguarding lead.

**Record**

* As soon as is reasonably practicable make written notes on what has happened
* Do not destroy these notes; they will be retained in a safe place. The court in any legal process may require them.
* Record; place, date, time and details of the client/young person involved. Record any noticeable nonverbal behaviour of the client/young person. If the client/young person uses their own words to describe sexual organs/acts, record the words spoken. Do not translate them into proper words.
* Note positioning, size and location of any injuries you have identified/observed.
* Be objective in your recording. Include statements made and what you have seen, rather than assumptions or interpretations. Rely on FACT.
* Hand the record to the designated safeguarding lead.

**Supporting the client**

Give the client time and a safe place. Stay with them and be aware that they may fear reprisals for having told somebody. They may feel confusing emotions. Telling is an act of courage as well as an act of desperation.

Identify the support network available to yourself, as certain disclosures can be emotive. This may include staff and trustees counselling services.

**Action to be taken by the Designated Safeguarding lead**

**Sexual abuse**

Any suspicion of sexual abuse or actual disclosure by anyone that he or she has been sexually abused must be referred immediately to the DCC Care Direct team, who will contact the appropriate investigative agencies.

Family members/carers should not normally be informed at this stage as this may jeopardise the investigation and the safety of the client. Where there is an allegation of, or concern about, sexual abuse a strategy meeting will be held in order to decide on the most appropriate way to proceed. The referrer will normally be invited to the strategy meeting.

If there is a concern that clients and volunteers under the age of 13 are involved in a sexual relationship this must be referred to the DCC Care Direct team who will contact appropriate agencies.

**Domestic Abuse**

Where there is domestic abuse in a family, the clients and volunteers/young people will always be affected; the longer the violence continues, the greater the risk of significant and enduring harm, which they may carry with them into their adult life and relationships.

The designated safeguarding lead will take appropriate action to ensure clients and volunteers and young people are kept safe and will seek advice from the safeguarding advisers where necessary.

**What happens after any concern is reported?**

When the designated safeguarding lead receives any concern, they can talk it through with the DCC Care Direct team. The duty officer will then discuss the concern and assist in deciding whether a formal safeguarding referral is appropriate and facilitate the reporting of that formal safeguarding referral.

If the concern arises outside of the hours operated by the advice Line and it is believed the client may be at immediate risk the clients and volunteers’ social care out of hours team or the police will be contacted without delay. If there are any concerns that a client may be at risk of immediate harm, the police will be contacted by dialling 999.

If the designated safeguarding lead decides that it is not a safeguarding referral matter, a record will still be made of the incident and kept in the safeguarding files, so that patterns of concern can be seen.

If a client makes a direct allegation of abuse or has a distinct injury and/or is experiencing pain and/or discomfort and for which no reasonable and consistent explanation is available this will not be discussed with family members/carers in the first instance.

If a less distinct injury is noticed or if the client makes a reference to having been physically punished but no injury is evident and no pain/discomfort is reported, the designated safeguarding lead will raise this with family members/carers where possible. If there is a reasonable explanation and there is no pattern of unexplained injuries, or any other concerns before these injuries are noticed; the incident will still be recorded and kept in the safeguarding file in case similar issues are raised again in the future.

Clients and volunteers are encouraged to be familiar with this policy via the charitTQ6 Community Partnership website.