

# Safeguarding and Protecting Adults at Risk – Procedure

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# Safeguarding and Protecting Adults at Risk – Procedure

## 1. Scope

This procedure is primarily concerned with the abuse of children or vulnerable adults that can happen within the College and is perpetrated by someone entrusted with the care and support of individuals by the College within any paid or unpaid capacity i.e. full/part-time employees, agency workers and volunteers. These guidelines can also be used to report abuse that is believed to have been inflicted by others such as carers, friends, relatives and strangers.

## 2. References

- 2.1. London Multi Agency Policy – Protecting Adults at Risk (2011, reviewed 2014)
- 2.2. No Secrets, Department of Health (2000)
- 2.3. Mental Capacity Act (2005)
- 2.4. Data Protection Act, (1998)
- 2.5. The Human Rights Act, (1998)
- 2.6. Public Order Act (1986)
- 2.7. Protection from Harassment Act (1997)
- 2.8. The Sexual Offences Act (2003)
- 2.9. The Fraud Act (2006)
- 2.10. The Equality Act (2010)
- 2.11. Care Standards Act (2014)
- 2.12. Keeping Children Safe 2014
- 2.13. Children and Young Persons Act (2008)

## 3. Guidelines for Employees Receiving Disclosures of Abuse

- 3.1. Protecting vulnerable adults from abuse is everyone's responsibility.
- 3.2. Many incidents of abuse only come to light because the alleged abused individual discloses it themselves. The abused person may not realise that they are being abused and may not be aware of the significance of what they are telling you.
- 3.3. Some disclosures happen after many years. There may be a good reason for this and any delay in reporting or disclosing by an alleged abused person should not cast doubt on their truthfulness.
- 3.4. The alleged abuse may have occurred at the College, at home or within another service or setting. It may have happened recently or some years in the past. All allegations are to be taken seriously and are to be reported immediately.

## 4. Recognising the Signs of Abuse

There is no definitive way of identifying the signs of abuse. Each individual can react differently.

### Examples of Abuse and Possible Indicators

<b>1. Physical Abuse Definitions</b>	<b>Examples of Physical Abuse</b>	<b>Possible Indicators</b>
Physical abuse is the use of force that results in pain or injury or a change in the person's natural physical state or choices.	Punching, slapping, hitting, shaking, pinching, burning/scalding, enforced sedation, forced feeding the use of excessive restraint, catheterisation for "management ease," deprivation of liberty, preventing someone from leaving a setting against their will or without an 'incapacity and best interests' decision being made and appropriate legal sanction being obtained.	Fractures, sprains dislocations, lacerations, black eyes, scalds/cigarette burns, pressure sores, welt marks, unexplained injuries, bruises (especially in well protected areas), drowsiness and confusion due to over-sedation, delays in seeking medical attention, anxiety or fear evident in the presence of the abuser.
<b>2. Sexual Abuse</b>	<b>Examples</b>	<b>Possible Indicators</b>
Sexual abuse is the involvement of a vulnerable adult in sexual activities or relationships which are for the gratification of the other person and which either they do not want and have not consented to; or they cannot understand and are not able to consent to.	Masturbation, indecent exposure, attempted or actual penetration of vagina, anus, mouth, with penis, fingers, other objects, pornographic photography, enforced witnessing of sexual acts or sexual media.	Changes in behaviour (e.g., more withdrawn, depressed, confused, fearful, agitated) difficulty in walking or sitting; torn, bloody or stained underclothes, pain or itching in the genital area, bruising or bleeding in external genitalia vaginal or anal areas, venereal disease, sexualised behaviour.
<b>3. Psychological Abuse</b>	<b>Examples</b>	<b>Possible Indicators</b>
Psychological abuse is behaviour that has a harmful effect on a vulnerable adult's emotional health and development, the deprivation of the rights of a child or vulnerable adult to engage in activities or to see friends and relatives and have other social contacts.	Shouting, swearing, insulting, humiliation, threats, intimidation, ignoring, lack of stimulation, depriving an individual of the right to choice, social contact, information and privacy, confining or locking someone in one room, denying access to transport, preventing access of other people.	Fear, depression, withdrawal, passivity, confusion, low self-esteem, running away, unusual weight loss, disturbed sleep pattern. A lock on the outside of a room, a keypad door which the individual is not capable of operating, a physical environment that does not allow access to other parts of the home, loss of independence.

<b>4. Financial Abuse</b>	<b>Examples</b>	<b>Possible Indicators</b>
Financial abuse is the use of a vulnerable adult's property, assets, income without their informed consent or making financial transactions which they do not comprehend unless this is legally sanctioned.	Taking possessions, stealing or misappropriating money, using pressure to obtain rights to property, pressure to give money away.	Inadequate money to pay bills etc. Insufficient clothing or money to purchase basic necessities, a 'disappearing pension, sudden and/or large withdrawal from bank, legal documents requiring signature.
<b>5. Neglect and Acts of Omission</b>	<b>Examples</b>	<b>Possible Indicators</b>
Neglect is behaviour that results in the vulnerable adult's basic needs not being met	Failure to provide adequate food/drink, failure to administer prescribed medication, inappropriate administering of medicine, failure to secure a safe and adequately heated environment, failure to assist with securing appropriate levels of hygiene	Dehydration, malnutrition, unexplained failure to respond to prescribed medication, infections, pressure sores, inadequate clothing, and hypothermia.
<b>6. Institutional Abuse</b>	<b>Examples</b>	<b>Possible Indicators</b>
Institutional abuse, neglect and poor professional practice may take the form of isolated incidents of poor practice or unsatisfactory professional practice, at one end of the spectrum, through to pervasive ill-treatment or gross misconduct at the other. It may also take the form of ignorance of the legal framework regarding statutory duties towards those with assessed eligible needs or the Mental Capacity Act 2005.	No flexibility in bed time and/or deliberate waking, inappropriate medical or nursing procedures, lack of personal clothing and possessions, lack of individual, person centred care, unhomely or stark living or day care areas, inappropriate confinement or restriction, lack of stimulation and choice, failure to offer services to meet assessed eligible need appropriately. Treating capacitated people as incapacitated, treating incapacitated people as capacitated, e.g. in relation to direct payments, individual budgets, self-directed support, or the ability to contract for tenancies.	Rigid routines, inadequate personal care plans. People with severe mental impairment being 'placed' in settings where there is a direct contractual right of occupation, or being assumed to be consenting to direct payments, without a proper decision on capacity on the specific issue in question.
<b>7. Discriminatory Abuse</b>	<b>Examples</b>	<b>Possible Indicators</b>

Discriminatory abuse is where the vulnerable adult is harassed, shunned or receives inappropriate treatment because of his/her race, disability, gender, age or sexual orientation.	Physical intimidation, humiliation, denials of religious, cultural needs.	Alteration in psychological state, e.g. withdrawn and fearful, denial of access to appropriate care or support. One or more of the indicators associated with the other types of abuse.
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<b>Form of abuse</b>	<b>Detail</b>
<b>Child Sexual Exploitation (CSE) –</b>	Situations or relationships where vulnerable people receive something (eg drugs, alcohol, food) in return for/as a result of engaging in sexual activities. It may range from what appears to be consensual sex to serious crime by gangs and groups.
<b>Bullying including cyberbullying</b>	Bullying can be physical or psychological and can be in person or via text messages or the internet (cyberbullying and virtual bullying) and involves the threat of violence or isolation either physically or online
<b>Domestic Violence</b>	An incident or series of incidents involving violence, verbal, physical, psychological, sexual, financial or emotional abuse including controlling, coercive, threatening behaviour
<b>Drugs</b>	the use of alcohol, illegal and prescription drugs and other medicines, volatile substances and psychoactive substances (sometimes referred to as “legal highs”)
<b>Fabricated or induced illness</b>	This can include inventing symptoms and signs as well as medical histories, the falsification of symptoms, letters and documents, hospital records and charts and bodily fluid specimens.
<b>Faith abuse</b>	This includes witchcraft and spirit possession, leading vulnerable people astray, references to demons, devils, evil eye, djinns, dakini as well as ritual or mudi killings and the use of witchcraft or magic to produce fear or compliance
<b>Female Genital Mutilation (GFM) -</b>	This involves the removal (partial or total) of external female genitalia or other deliberate injury to the female genital organs for non-medically related reasons and is usually cultural in origin.
<b>Forced Marriage</b>	This is when one or both people to be married do not or cannot consent to a marriage and are forced to do so by physical, psychological, financial, sexual or emotional pressure.
<b>Gangs and Youth Violence</b>	In some areas, crime and violence are an integral part of youth identity and lead to increased antisocial behaviour and levels of

	criminality/youth offending.
<b>Gender-based violence/violence against women and girls (VAWG)</b>	This is a general term covering violence (physical, sexual or otherwise) together with female genital mutilation, harassment and stalking.
<b>Mental Health</b>	Good mental health is vital to the wellbeing and everyday lives of individual and their communities and so it is important that any issues are reported and managed as appropriate
<b>Radicalisation</b>	This is the process which leads to an individual deciding to support terrorism and forms of extremism which lead to terrorism
<b>Sexting</b>	This is when individuals create sexually explicit images which are then sent via the internet or through mobile phone messages
<b>Teenage Relationship Abuse</b>	This can be divided into 4 main areas of Financial Abuse, Sexual Abuse, Physical Abuse and Emotional Abuse. Financial abuse may include having undue control over a person's finances, forcing them to buy items or forcing them to work or not to work. Sexual abuse may include forcing someone to have sex against their will, rape, unwanted attention (eg kissing or touching), being made to watch pornography against their will or pressure not to use contraception. Physical abuse may include using weapons, physical hitting, scratching, punching, pushing, biting, kicking. Emotional abuse may include isolating individuals from friends and family, controlling what they wear, where they go, who they are friends with, checking their emails, texts, social networking sites, the constant use of insults and name calling. It may also include making the individual feel responsible for the abuse they are suffering
<b>Trafficking</b>	As defined in Article 3 of the <i>Palermo Protocol to Prevent, Suppress and Punish Trafficking in Persons, especially Women and Children, Supplementing the UN Convention against Transnational Organised Crime</i> in the UN Convention 2000, trafficking is "the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the prostitution of others or other forms of sexual exploitation, force labour or services, slavery or practices similar to slavery, servitude or the removal of organs"

It is important that an employee uses the above information as a guide only, and continues to use his/her own professional judgement in reaching decisions. It must be stressed that all concerns must be reported.

## 5. How to React to a Disclosure of Abuse

- 5.1. Receivers of Alerts or Referrals should do the following:
  - 5.1.1. Listen carefully and ensure that the person knows that s/he is being taken seriously;
  - 5.1.2. Remain calm and not show shock or disbelief;
  - 5.1.3. Reassure the person that they are doing the right thing by making a disclosure;
  - 5.1.4. Show sympathy and concern but not make comments or judgements;
  - 5.1.5. Explain what will happen next and that the information will be passed on, stating to whom and why;
  - 5.1.6. Inform the person that s/he will receive feedback as to the result of her/his concerns and from whom;
  - 5.1.7. Give the person contact details so that s/he can report further issues or ask questions.
  
- 5.2. Receivers of Alerts or Referrals should not:
  - 5.2.1. Appear shocked, horrified, disgusted or angry;
  - 5.2.2. Give sweeping reassurances;
  - 5.2.3. Contact the alleged abuser;
  - 5.2.4. Press the individual for details;
  - 5.2.5. Gossip about the abuse;
  - 5.2.6. Contaminate or remove possible forensic evidence. Consideration should be given to this requirement in the event that First Aid is needed.
  
- 5.3. On the same day that a disclosure is made, the employee making the alert and the Safeguarding Officer will carry out the functions below.
  - 5.3.1. Write a factual and chronological account of what they have heard and learnt (use Safeguarding Record of Concern - SG1);
  - 5.3.2. Record the actual words and phrases made by the person making the disclosure;
  - 5.3.3. Describe the circumstances in which the disclosure came about;
  - 5.3.4. Note the setting and anyone else who was there at the time;
  - 5.3.5. Ensure information is factual. Any third party opinions or information should be clearly identified as such;
  - 5.3.6. Print their name and sign and date the report, noting the time and location.
  
- 5.4. The employee to whom the disclosure was made must be aware that the report may be required later as part of a legal or disciplinary action.

## 6. How to Contact a Safeguarding Officer

- 6.1. The College Safeguarding Officers can be contacted at any time throughout the College working day. The contact details for the safeguarding team are displayed at Reception at the administration office on the Unit 4, Westmoreland House, Cumberland Park, White City, London NW10 6RE. The office is open at all times during classes and College hours.
- 6.2. Designated safeguarding officers can be contacted to seek advice and discuss concerns. The anonymity of anyone making an alert cannot be guaranteed as the information may be needed as part of a disciplinary or criminal investigation.

## **7. Guidelines for Investigating Officers**

- 7.1. The investigation should ideally be concluded within five days where employees are under suspension. The Safeguarding Officer will make a full written report (Safeguarding Officers Report – SG2) to the Principal (Teaching and Learning). However, in situations where a police investigation is involved, it may not be possible to complete disciplinary procedures until the police investigation has concluded.

### **7.2. Conducting Interviews**

- 7.2.1. The alleged victim, perpetrator and witnesses should be interviewed as appropriate to the situation.
- 7.2.2. A note taker should be used to minute the interviews. Individuals should be asked to check and sign written records of their interview.

### **7.3. Investigation Methodology**

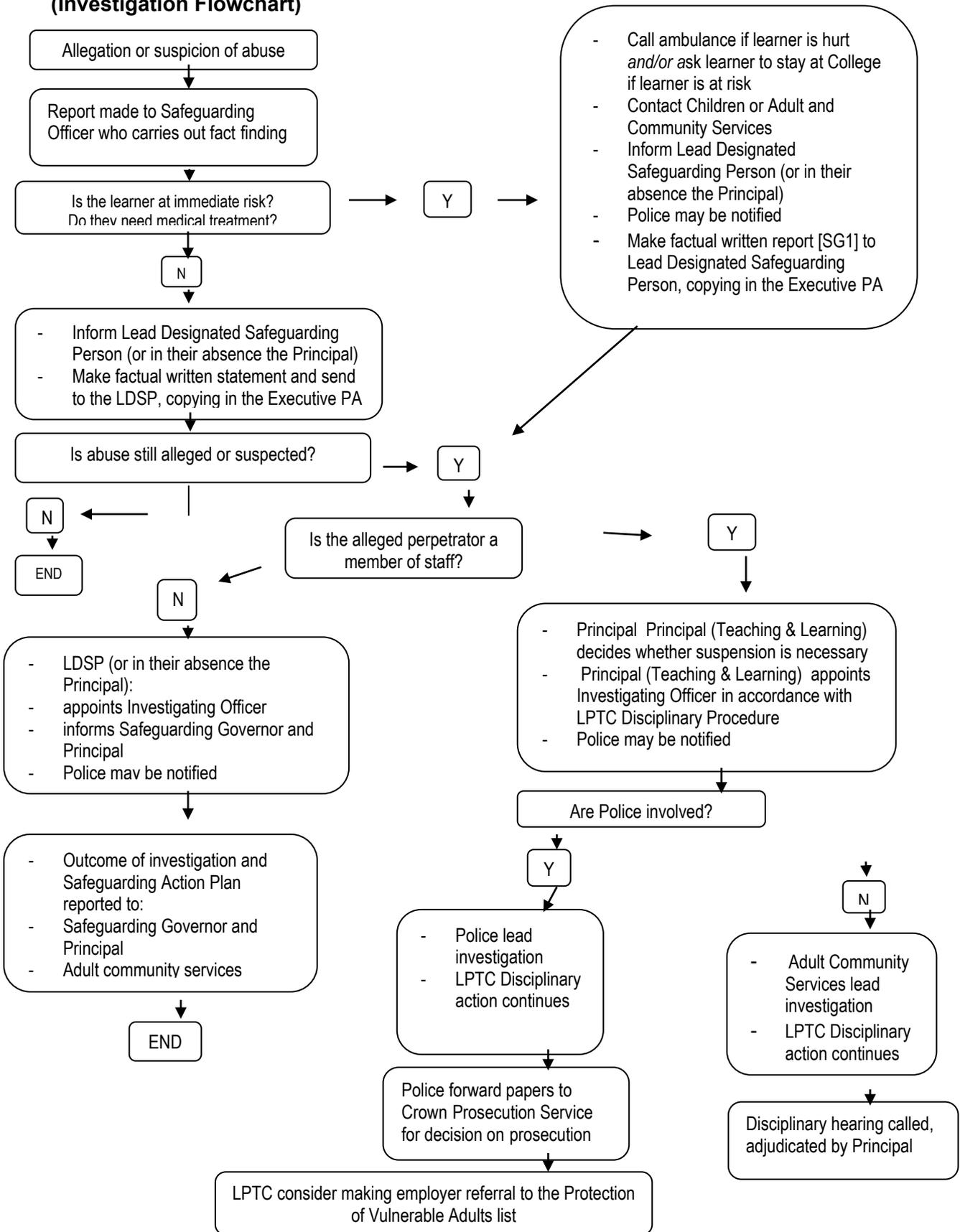
In conducting the interview the following information should be considered:

- 7.1. Background information;
- 7.2. The nature and extent of the reported abuse;
- 7.3. Any evidence to support the allegation of abuse;
- 7.4. Reasons why the person suspected of being abused is deemed vulnerable;
- 7.5. The individual's capacity to give informed consent to actions which may be required in an investigation;
- 7.6. What is known of the vulnerable adult's ability to communicate? Is an interpreter required?
- 7.7. Has a disclosure already been made by the vulnerable adult?
- 7.8. What is the relationship between the alleged perpetrator and vulnerable adult?
- 7.9. Enquiries should be made regarding the background of the alleged perpetrator;
- 7.10. Have there been any previous reports of abuse and if so what was the outcome?
- 7.11. Who within the professional network has the confidence of the vulnerable adult?
- 7.12. Is there a risk of repeated or increasingly serious acts involving this or other vulnerable adults?

### **Training**

All staff will undertake training at induction and then additional training and updates as appropriate to their roles and responsibilities.

## Actions for Safeguarding Officers on Receiving an Alert to the Possibility of Abuse (Investigation Flowchart)



## Recommended Timescales for Reporting and Investigating Reports of Abuse

Alerting Safeguarding Officer	_____	Immediate Action
Safeguarding Officer Makes Report	_____	Same Working Day
Principal/ Lead Officer Decision to Investigate	_____	By End of Working Day
Completion of Investigation	_____	Within 5 Working Days
Safeguarding Strategy Meeting	_____	Within 5 Working Days
Production of Related Action Plan	_____	10 Working Days
Review of Action Plan	_____	Within 3 Months