

EXAMPLE

VULNERABLE ADULTS POLICY

FOR SMALL GROUPS

Adopted by XXXXX at the Management Committee meeting

ON.....

SIGNED.....

PRINT NAME.....

POSITION

ISSUE NUMBER.....

REVIEW DATE

(NAME OF THE ORGANISATION) will take all reasonable measures to ensure that the risk of harm to vulnerable adults it comes into contact with is minimised. It commits to adopt best practice and recognises its responsibility to have appropriate safeguards in place to protect and promote the welfare of vulnerable adults as well as enhance the confidence of trustees, staff and volunteers in being aware of and dealing with safeguarding issues.

For the purpose of this policy a vulnerable adult is defined as someone who is eligible or may be eligible for community care services – a person whose wellbeing would be at risk if they did not receive appropriate support and who may therefore be at risk of abuse.

Who might be at risk?

- People who depend upon others for their care;
- People with mental health problems;
- People with learning or physical disabilities;
- People with sight or hearing impairment or loss;
- People with dementia;
- People who misuse substances;
- People with long term health needs;

Definition of Abuse

Abuse is defined as 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 individual in more subtle ways, such as withholding or denying access to basic needs or services.

Types of Abuse

Physical – bodily assaults resulting in injury, e.g. hitting, slapping, pushing, kicking, misuse of medication, restraint, malnutrition, dehydration, medical or healthcare maltreatment.

Sexual – rape, incest, acts of indecency, sexual assault, sexual harassment, non-consensual sexual acts. This form of abuse can also include exposure to pornographic materials, being made witness to sexual acts and non-contact abuse.

Psychological/Emotional – threats of harm, controlling, intimidation, coercion, harassment, verbal abuse, enforced isolation, enforced social isolation, humiliation, bullying.

Neglect – ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, deprivation of food, clothing, medical attention, or denial of right to be informed.

Discriminatory – including racist, sexist or based upon a person's disability and other forms of harassment, slurs or similar treatment.

Financial – misuse and/or misappropriation of monies, benefits or property.

Institutional – repeated instances of poor care may be an indication of more serious problems. Neglect and poor professional practise may lead to other forms of abuse as defined above.

Signs of Abuse

The following signs and symptoms may indicate that abuse has taken place:

History of unexplained falls or minor injuries, bruising, finger marks, burns, injuries at different stages of healing, injury shape similar to an object, history of GP or agency hopping, reluctance to seek help, weight loss, weight gain, ulcers, bed sores, drowsiness, recurring crises/hospital admissions.

Disclosure or partial disclosure of sexual abuse, genital infections, pregnancy, difficulty walking or sitting, disturbed behaviour, depression, withdrawal from activities, lack of sleep, nightmares, self-injury, showing fear or aggression, inappropriate sexual behaviour, loss of appetite.

Isolation, unwashed, over meticulous, inappropriately dressed, withdrawn, change in appetite, insomnia or excessive sleep, tearfulness, unexplained paranoia, excessive fear, low self esteem, confusion, physically poor condition, clothing in poor condition, weight loss or weight gain, untreated injuries, poor personal hygiene.

Responding to Abuse

The following guidelines set out how staff and volunteers should respond if abuse is disclosed or suspected.

- React calmly, do not panic or show panic and reassure the person that they were right to tell.
- Be clear that you are unable to keep secrets if you feel that the person is being harmed in some way.
- Keep questions to a minimum and only ask in order to clarify what is being said, rather than to enquire. (It is up to social services and the police to investigate the matter fully, not your organisation.)
- Take what is said seriously.
- Make a full record of what is being said, heard or seen as soon as possible
- Do not delay in passing information to the appropriate person within (NAME OF ORGANISATION) as noted below.
- If a member of staff or volunteer is not satisfied that the matter has been dealt with appropriately within the organisation, they have the option of referring the matter direct to the local authority.

It is not the responsibility of (NAME OF THE ORGANISATION) to decide whether or not abuse has taken place but it is the responsibility of (NAME OF THE ORGANISATION) to act if there is cause for concern, in order that the appropriate agencies can investigate and take the necessary action to protect an adult at risk.

Procedure for Reporting Abuse

(This is where your organisation would outline exactly what to do, the person to report to and the details that need to be taken. It might take the form of a flow chart to show procedures or be a list of numbered procedures that need to happen to ensure that appropriate action is taken. As this is organisation specific it is not outlined here, but will need to include a clear and well publicised

process for reporting incidents, concerns and referrals as well as storing these securely in compliance with relevant legislation.)

Contact Information

Organisation	Tel No
Slough Adult Social Care Services (normal hours)	01753 475111
Emergency Duty Team	01344 786543
Thames Valley Police	08458 505505
Care Quality Commission	03000 616161
Designated Person within the organisation	Office & Mobile No
In an emergency dial 999	

Training

(NAME OF ORGANISATION) will ensure that all relevant people working on behalf of the organisation have appropriate Safeguarding training as appropriate to their roles and responsibilities. Every person working on behalf of the organisation will understand exactly what to do if abuse is disclosed or suspected.

Recruitment

(NAME OF ORGANISATION) are committed to the safe recruitment, vetting and selection (which includes checks into the eligibility and suitability) of all trustees, staff and volunteers who have direct or indirect contact with vulnerable adults. All staff, volunteers and any other person who comes into contact with vulnerable adults on behalf of (NAME OF ORGANISATION) will have a valid DBS check and cannot commence employment or voluntary work on behalf of (NAME OF THE ORGANISATION) until this has been done.