

Safeguarding Adults*Policy & Procedure

Introduction

This document outlines Yellow Door's responsibilities and approach to safeguard adults at risk. All statement and procedure apply to Yellow Door's (YD) work undertaken both on YD premises and at any other locations. This document should be read in conjunction with other YD policies and Procedures. This policy is endorsed by Board of Trustees.

Please note this Policy has been reviewed using the 4 Local Safeguarding Adults Board Organisational Safeguarding Self Audit Tool in March 2022 and was approved by Southampton's LSAB in April 2016. This policy is consistent with the Care Act 2014 and current local safeguarding procedures. Contact details for referrals to Adults services in Southampton and Hampshire are in Appendix 4.

'Adult Safeguarding' is working with adults with care and support needs to keep them safe from abuse or neglect. The Care Act requires agencies to use the term 'adult at risk' to replace the previously used 'vulnerable adult'. This is because the term 'vulnerable adult' may wrongly imply that some of the fault for the abuse lies with the victim of abuse.

*Please note in this Policy we will use the term adults when referring to adults who have care and support needs.

1. Policy

According to the Care Act, an adult may be considered to be 'at risk' if:

- 1. They have needs for care and support (whether or not the authority is meeting any of those needs),
- 2. Is experiencing, or is at risk of, abuse or neglect, and
- 3. As a result of those needs is unable to protect themselves against the abuse or neglect or the risk of it.

The safeguarding duties apply to an adult (whether or not the local authority is meeting any of those needs) and; is experiencing, or at risk of, abuse or neglect; 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. (Care Act, 2014)

The Care Act Code of Practice outlines categories of abuse more widely and now includes physical abuse, domestic abuse, sexual abuse, psychological abuse, financial or material abuse, modern slavery, radicalisation, discriminatory abuse, organisation (previously institutional) abuse, neglect and act of omission and severe self neglect.

What does Safeguarding mean?

'Safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted including, where

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appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances. Care Act 2014, Chapter 14.

Whose responsibility is safeguarding?

We believe at YD that safeguarding is every body's business. Any person working for YD in a paid or voluntary capacity regardless of their role are required to be alert to risks and pro-active about safeguarding within the scope of their roles and take responsibility for the safeguarding of adults within the terms of this policy.

The CEO of YD takes operational lead responsibility for Safeguarding and is a Designated Safeguarding Lead (DSL) The Chair of Trustees holds overall governance responsibility for safeguarding.

Underpinning principles:

- YD endeavors to foster a culture of openness and integrity amongst workers and provide good support where any concerns can be aired and taken seriously.
- YD works to in a trauma informed way throughout the adult's journey and we ensure this approach is embedded throughout the safeguarding processes. Consultation and discussion with Service Users is at the heart of YD approach to safeguarding.
- All staff and volunteers will raise safeguarding concerns with an operational service manager and / or designated safeguarding lead/s as required and detailed in the procedures that follow.
- YD intends to provide the highest possible level of confidentiality consistent with the law and the Ethical Framework for the Counselling Professions 2018 https://www.bacp.co.uk/media/3103/bacp-ethical-framework-for-the-counselling-professions-2018.pdf
- Whilst YD maintains confidentiality and respects client wishes regarding the sharing of information as far as is possible, these factors must always be balanced with wider safeguarding obligations.
- YD is committed to working in partnership with other relevant agencies involved in safeguarding adults who have care and support needs and to provide relevant information where possible and appropriate.
- Where YD makes a decision that information should be disclosed to the appropriate authorities, consideration should be given to whether it is more appropriate to support a client to themselves refer these concerns to appropriate authorities or for YD to disclose such information on their behalf. If YD discloses information, consent for this will be sought if possible and appropriate but should not be considered necessary if safeguarding obligations take precedence.

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2. Procedure for Addressing concerns

Responding to an Emergency level of risk:

When there is evidence that an Adult is at high risk of immediate harm, YD staff and volunteers should contact the appropriate services including Adult's services or emergency (police / ambulance) services as required. On some occasions it may be appropriate to also contact another person who supports or cares for the person, however workers must always consider and assess if the person they are contacting is involved in the harm or risk to the Adult or client and not to increase this risk by making contact.

When managing crisis or emergency situations on YD premises, staff and volunteers should work with other members of the YD team who may be present in the building and/or liaise with partner agencies to ensure:

- immediate safety of and minimise negative impact on all workers and clients
- maximise privacy, empowerment and choice for any person in crisis

Risk may relate to one event that is of significant concern or a series of events that mean the accumulated risk is believed to be high.

Non-Emergency Risk

In any situation where a YD worker becomes aware of risk to an Adult they should respond calmly and in such a way that provides as much reassurance to the Adult as possible. It should be made clear that confidentiality cannot be guaranteed and that their concerns will need to be discussed with appropriate others as detailed in our Underpinning Principles above.

Concerns should be discussed, at the earliest available opportunity, with an operational manager who is part of the Safeguarding Team (for the list of such managers see below), to determine the course of action. See below for a list of these managers. If deemed necessary/ appropriate, concerns should be escalated to a Designated Safeguarding Lead (DSL). If an operational line manager is not available, contact should be made with a DSL.

The DSL will assess the risk with regard to information received and give appropriate guidance to the person who has brought the concern. If the DSL assesses the risk as of significant concern, they should liaise with at least one other DSL in order to take a collaborative approach to decision making. A decision to refer a concern to statutory services should be taken wherever possible by at least one manager and a DSL, unless urgent circumstances demand otherwise. Any such referral will be allocated to the most appropriate staff member and recorded using the system outlined above. Where a client has not consented to a referral or information sharing with other services, this should be discussed, and action agreed by at least two DSL's. Please also refer to Yellow Door's Data Protection Policy.

The urgency of the process outlined above will depend upon the level and immediacy of the risk and should be actioned as soon as possible. This should always be within 1 working day of the concerns arising. A full written record, recorded on Client file in Lamplight, must be produced by the staff member or volunteer raising the concern within 1 working day.

Once discussed and actioned the YD worker will complete the appropriate client case record safeguarding section on Lamplight (YD Client Management System) and any resulting or ongoing actions and monitoring procedures; ensure that the reason for the concern, the detail of the risk assessment undertaken and rationale for any plans made as a result. These are carefully recorded/ dated safeguarding manager/ DSL are linked in the records and are completed and signed off and per the Lamplight process (See Appendix 3)

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The worker will use existing structures (i.e. line management meetings, group and individual supervision,) to review any ongoing areas of concern.

Challenging a decision

Occasionally a situation may arise when YD have raised a safeguarding concern in relation to an Adult and it is felt the response from statutory services is not a safe one. The safety of individual Adult is the paramount consideration in any professionals' disagreement and workers should feel able to challenge decision making in a timely fashion in order to best safeguard the person. In any such event YD will follow the local safeguarding partnership 'escalation' policy and procedure. 2880-4LSAB-Escalation-Protocol-Final-July-2018.pdf (iowsab.org.uk)

Who to contact for Safeguarding Support in YD:

Everyone within YD has a responsibility to safeguard Adults, and most operational managers have additional responsibility for safeguarding, to support staff and volunteers with safeguarding practice and procedures, namely YD's DSL's and the Safeguarding Team.

An up to date DSL / Safeguarding Team Contact List is available on YD on notice boards in each team room and also on the YD HR system - Breathe. All staff who work off site are required to ensure they have access to this information both onsite and when working out of the building.

<u>DSL's are readily contactable, urgent safeguarding work takes priority over other work. Whenever the service is operating a DSL will be available, either in the building or on the phone.</u>

The DSL's are:

CEO (Lead Safeguarding Responsibility)
Duty Manager
Head of Therapeutic Services

Safeguarding Team of Operational Managers are:

Adult & CYP Therapy Manager Domestic Abuse Team Manager Diversity & Inclusion Manager Family Therapy Manager ISVA Manager Trauma Manager

Providing a Safe and Trusted Environment

1:1 and group work should take place when another responsible adult is present in the building.

Any concern or allegation about a member of the YD team must be taken seriously and acted upon. Please refer to the Duty to Act (Whistle blowing) procedure in the Staff Handbook for details. When required a referral or contact must be made to the Local Authority Designated Officer (LADO). For Serious Incidents please refer to the Serious and Critical incidents Policy.

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Safe Recruitment, Induction and Training

All workers who have direct contact with Adults will:

Complete a form declaring any previous court convictions

All applicants for paid employment at YD will be required to give full details of their working history including any reasons for gaps in employment.

Have appropriate DBS check undertaken and are updated every 3 years. YD is diligent in ensuring that no one is appointed who is disqualified as a trustee or to a senior manager position (at chief executive or finance director level) and the register of declarations is updated annually.

Provide identification and evidence of relevant qualifications.

Provide two references asking specifically about their suitability to work with vulnerable people.

Receive this policy and other associated policies and provide written confirmation that they have read and agreed to abide by the policies and procedures of the organisation.

Successfully complete a pre-determined probationary period which may be extended at the discretion of the service.

Attend mandatory local & Online Safeguarding Adults level 1 and 2 training as appropriate to their role as part of induction and then every two years after. Safeguarding Team and DSLs will in addition attend Level 3 Safeguarding Training.

Have access to appropriate levels of supervision, training and other learning opportunities to develop their awareness of working with adults who have needs for care and support

Receive information and guidance on issues relating to Adults in relation to their work for Yellow Door including being made aware of the Local Safeguarding Adults who have needs for care and support guidance available on the internet at Southampton Local Safeguarding Adults Board— Working together to improve the safety and wellbeing of Adults at risk of harm in Southampton (southampton sab.org.uk) with reference to the documents section and in particular the guidance available about the voluntary sector. We also promote the wellbeing of adults, ensuring that safeguarding activities are of a high quality and in line with the Care Act 2014.

Expectations of staff and volunteers include that they:

Remain alert to the possibility of abuse and neglect.

Maintain appropriate professional boundaries (see Guidelines for YD services) and avoid behaviour which might be misinterpreted by others.

Report and record any concerning behaviour from a child/young person towards a worker or vice versa.

Remain conscious that their behaviour/ actions outside of the workplace could indicate an unsuitability to work with children or young people and lead to action being taken to safeguard service users.

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Do not share any personal information with a child or young person and should not request, or respond to, any personal information from the child/young person, other than that which might be appropriate as part of their professional role.

Attend training in line with requirements set out above, provide certificates / proof of attendance to their line manager.

Will adhere to any requirements from the 4LSAB in terms of Adults who are at Risk but do not meet the threshold for Safeguarding within the limits of our service remit under the MARM framework: Responding To Self-Neglect And Persistent Welfare Concerns (hampshiresab.org.uk)

Cameras, mobile phones and other recording devices. (for further details please refer to our Data Protection Policy)

- Because many mobile phones have inbuilt cameras or recording devices which could inadvertently be on, members of groups will be asked to switch off mobile phones during sessions.
- Workers must not take cameras, mobile phones or any other recording devices into client sessions or make use of them during any contact with clients other than for the purpose of recording material as part of YD work with clients. Any photographing or filming during sessions should not be of Adults themselves but of the work they have created during the therapy. All such photographs or film will be stored on the internal server which is password protected and will only be put into the public domain if written consent is gained from the people whose work was filmed.

Feedback, Concerns/ Complaints Policy/Procedure

At Yellow Door we are committed to transparent and clear communication with Service Users and other key stakeholders. We proactively seek feedback about our services. We respond openly to negative feedback, concerns and complaints, looking to resolve these fairly and learn when there is something that the service needs to change. Our Feedback, Concerns, Complaints policy and Procedure is available on our website and is available in alternative formats upon request.

This policy is made available on YD website, (<u>www.yellowdoor.org.uk</u>) YD Staff HR System, displayed on public notice-boards at YD premises. If an alternative format is required please contact YD Offices.

Related YD Policies:

Duty to Act Whistle blowing Policy and Procedure (Staff Handbook)
Safeguarding Adults* Policy and Procedure
YD Client Services Guidelines
YD Services Guidelines – Working with Suicidal Thoughts
Helpline and Therapeutic Services Minimum Standards
Equalities Statement (Staff Handbook)
Health & Safety Policy
Data Protection Policy
Recruitment Policy
Staff Handbook
Managing Incident and Serious Incidents Policy
Managing Challenging Behaviours Policy

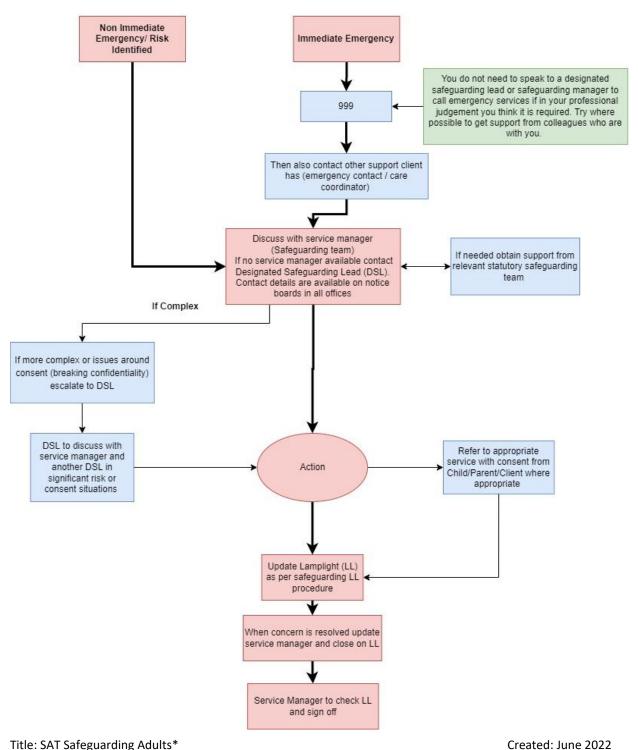
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Appendix 2: Procedure Flow Chart for Safeguarding

Yellow Door Safeguarding Procedure

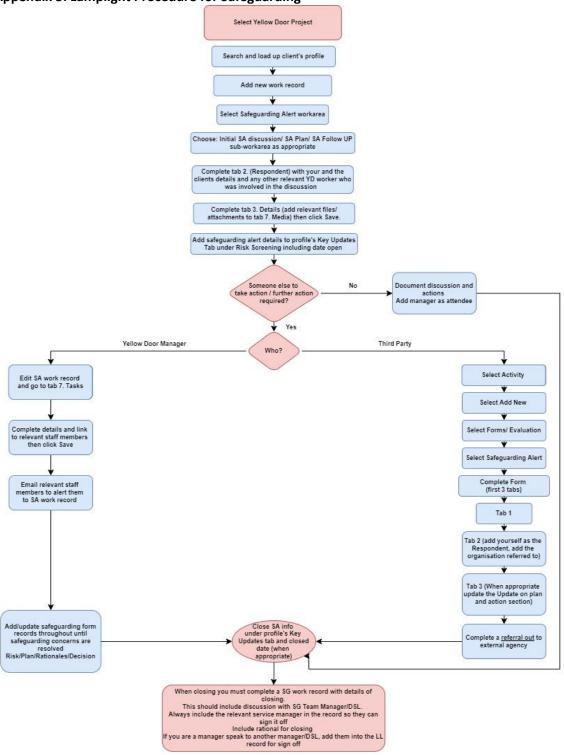


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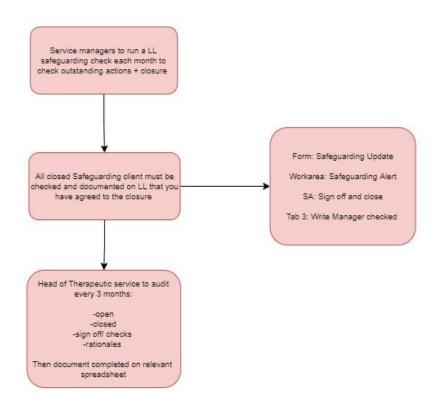




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LL Safeguarding Audit Process



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Appendix 4: Safeguarding Teams Adults & LADO

Southampton:

If you are a practitioner who is worried about an adult in please contact Adult Social Care on:

Telephone: 023 8083 3003

Email: adultsocialcareconnect@southampton.gov.uk

Spot the Signs of Abuse and Speak Out (southampton.gov.uk)

Hampshire

If you are a practitioner please call: Telephone: 0300 5551386 Office Hours

Telephone: 0300 5551373 Out of Office Hours

Referral Form: Adults' Health and Care help and support | Health and social care | Hampshire County

Council (hants.gov.uk)

Portsmouth

First point of contact for all social care calls, providing information and advice.

Telephone: 02392 680810 (8.00 am to 8.00 pm Monday to Friday)

Telephone: 0300 555 1373 Emergency Duty Service

Reporting Concerns (portsmouthsab.uk)

LADO contacts:

Southampton:

LADO contact details:

Telephone: 023 8091 5535 / 07500 952 037

Email LADO@southampton.gov.uk Link to details for notification form

https://sid.southampton.gov.uk/kb5/southampton/directory/family.page?familychannel=9-15

Hampshire:

If you need to report an allegation you can contact the LADO.

Phone 01962 876364

Email child.protection@hants.gov.uk

Link to details for notification form

https://www.hants.gov.uk/socialcareandhealth/childrenandfamilies/safeguardingchildren/allegations

Portsmouth

If you have a concern about a member of staff working with adults (in either a paid or voluntary capacity) please contact the Local Authority Designated Officer (LADO) on 023 9288 2500 or email LADO@portsmouthcc.gov.uk

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Appendix 4 For office use only

Stage	Date	Staff member	Comments
Draft	June 2022	RE	New version created
Edited	June 2022	NK	Edited
Edited	June 2022	SL	Edited
Edited	June 2022	TS	
Edited			
Edited			
Approved by SMT	June 2022	NK	
Signed off by Board	June 2022	JG	
Review date	June 2023		

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