



<b>TITLE</b>	Safeguarding Adults at Risk
<b>APPLICABLE TO</b>	All employees & volunteers working for Weldmar Hospicecare who come into contact with patients and their families
<b>REVIEW DATE</b>	November 2024
<b>KEYWORDS</b>	Adults safeguarding, abuse, vulnerable adult, harm, mental capacity, adults at risk, protection, whistleblowing
<b>POLICY NO</b>	81 v5

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## 1. AIMS OF THE POLICY

The aim of this policy is to ensure that Adults at risk are protected from harm and that Weldmar Hospicecare Charity offers a robust approach to the recognition of, and response to abuse.

The terms 'adult at risk' has been used to replace 'vulnerable adult', and 'harm' will replace 'abuse' as used throughout 'Multi-agency Safeguarding Adults Policy and Procedures' (Bournemouth Dorset and Poole 2011).

The adult experiencing, or at risk of harm or neglect will hereafter be referred to as the *adult* throughout this policy.

It is the responsibility of every employee of The Trust to:

- ensure the protection of
- and
- to promote the safety and wellbeing of adults within our care.

Although not all employees will enter into direct contact with patients in their professional role within The Charity it is important that they have an understanding of Adult Safeguarding issues should a particular concern be brought to their attention.

Any professional or volunteer who has direct or indirect contact with adults at risk must be able to identify those adults for whom harm has already occurred or who may be at potential risk of harm. The policy clarifies the accountability and responsibility of all staff and volunteers to ensure appropriate action is taken when abuse is identified or suspected.

Training is an essential part of ensuring "best" practice. Alongside training opportunities provided by The Charity, all employees and volunteers should have a good understanding of Adult Safeguarding issues.

The protection of adults is integral to The Charity's "Duty of Care" principle.

Weldmar Hospicecare Charity has a duty and responsibility to protect adults at risk of harm, thereby ensuring the safety and welfare of adults in their care is not compromised.

All members of staff and volunteers must always act if concerns arise within their area of work, either within the Hospice, the community or day care.

## 2. GLOSSARY / ABBREVIATIONS

POVA	Protection of Vulnerable Adults
PREVENT	Safeguarding people and communities from the threat of terrorism and violent extremism.

DOH	Department of Health
CQC	Care Quality Commission
CEO	Chief Executive Officer
MCA	Mental Capacity Act
CGSG	Clinical Governance Steering Group
Employees	All members of staff, paid and unpaid, including volunteers, students, sessional / bank staff, all Trustees

### 3. **POLICY APPLICABLE TO**

All employees of Weldmar Hospicecare Charity  
All volunteers and other non-paid staff members (e.g. students on practice experience, agency staff).  
All Trustees and Council Members of Weldmar Hospicecare Charity

### 4. **POLICY**

#### 4.1 The Charity believes that: -

All adults have the right to live their lives free from violence, fear and harm.

All adults have the right to live independent lives based on self-determination and personal choice

All adults have the right to independence, which involves a degree of risk

All adults who require our services have the right to care with dignity

All adults have a right to be valued as individuals and not to be discriminated against on the basis of their race, culture, gender, age, disability, religion or sexual orientation.

#### 4.2 The aims of adult safeguarding are to:

- Stop harm or neglect wherever possible;
- Prevent harm and reduce the risk of harm or neglect to adults with care and support needs;
- Safeguard adults in a way that supports them in making choices and having control about how they want to live;
- Promote an approach that concentrates on improving life for the adults concerned;
- Raise public awareness so that communities as a whole, alongside professionals, play their part in preventing identifying and responding to harm and neglect;
- Provide information and support in accessible ways to help people understand the different types of harm, how to stay safe and what to do to raise a concern about the safety or well-being of an adult; and
- Address what has caused the harm or neglect.

**4.3** Adult safeguarding is underpinned by the following six principles which should inform the ways in which professionals and other staff work with adults.

- Empowerment - People being supported and encouraged to make their own decisions and informed consent
- Protection - Support and representation for those in greatest need.
- Proportionality - The least intrusive response appropriate to the risk presented.
- Prevention - It is better to take action before harm occurs.
- Partnership - Local solutions through services working with their communities.
- Accountability - Accountability and transparency in delivering safeguarding.

#### **4.4 Definition**

This policy relates to adults over the age of 18. Children under the age of 18 are protected by The Trust's Policy and Procedures for Safeguarding Children.

The safeguarding duties apply to an adult who:

- Has needs for care and support (whether or not the local authority is meeting any of those needs) and;
- Is experiencing, or at risk of, harm 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 harm or neglect.

#### **4.5 Adult Safeguarding - what it is it and why it matters:**

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

##### **4.5.1 Prevent - Safeguarding people and communities from the threat of terrorism and violent extremism**

The main aim of Prevent is to stop people from becoming terrorists or supporting violent extremism.

At the heart of Prevent is safeguarding children and adults. Providing early intervention to protect and divert people away from being drawn into terrorist activity is crucial.

Prevent addresses all forms of extremism, but continues to ensure resources and effort are allocated on the basis of threats to our national security.

Any individuals who are identified as being vulnerable to radicalisation are referred to a multi-agency Channel Panel. This ensures the appropriate interventions are put in place to protect the individual. Like child protection, Channel is a multi-agency safeguarding programme run in every local authority in England and Wales. It works to support vulnerable people from being drawn into terrorism. It provides a range of support such as mentoring, counselling, assistance with employment etc.

Any individuals who are identified as being vulnerable to radicalisation are referred to a multi-agency Channel Panel.

#### **4.5.2 Making a referral to Prevent**

Every member of staff may identify possible PREVENT concerns through the course of their work; this could come from written reports, complaints, incidents or direct observation and could include concerns identified relating to colleagues and members of staff within the CCG or partner organisations. Any concerns should be escalated as soon as possible to the police via [Mash@dorsetpolice.pnn.police.uk](mailto:Mash@dorsetpolice.pnn.police.uk)

If you believe that someone is at risk of radicalisation you can help them obtain support and prevent them becoming involved in terrorism by raising your concerns and making a referral. You may have concerns about a potentially vulnerable institution that is being exploited for the purpose of promoting an extremist ideology. In either case, a dedicated team is ready to help.

**For referrals in Dorset:** email [MASH@dorset.pnn.police.uk](mailto:MASH@dorset.pnn.police.uk)

#### **4.6 Mental Capacity**

The presumption is that adults have mental capacity to make informed choices about their own safety and how they live their lives. Issues of mental capacity and the ability to give informed consent are central to decisions and actions in Safeguarding Adults.

All interventions need to take into account the ability of adults to make informed choices about the way they want to live and the risks they want to take. This includes their ability:

- To understand the implications of their situation
- To take action for themselves to prevent harm
- To participate to the fullest extent possible in decision making about interventions

The Mental Capacity Act 2005 provides a statutory framework to empower and protect people who may lack capacity to make decisions for themselves and establishes a framework for making decisions on their behalf. This applies whether the decisions are life-changing events or everyday matters.

All decisions taken in the Safeguarding Adults process must comply with the Mental Capacity Act (2005).

### **5. ROLES AND RESPONSIBILITIES**

**5.1 Policy Lead** - Jo Jury Specialist Palliative Care Social Worker/Safeguarding Adults Lead (responsibility is automatically delegated to Senior Clinical Leads (i.e. Medical Director, Lead Nurses and Doctors in the Policy Lead's absence, Human Resources).

- To keep updated with legislative and local/national policy changes or developments in relation to adult safeguarding
- Ensure Weldmar Hospicecare Charity Policies have set review dates
- Provide all employees and volunteers, (new and existing) with Adult safeguarding awareness (including 'Prevent' awareness) training face to face training and Training Tracker as appropriate
- Provide ongoing staff development and three yearly refresher training to all key members of staff and volunteers as required
- To liaise with Line Managers to ensure all employees for whom they are accountable understand "adult safeguarding" issues and their responsibilities within.
- To contact Adult Safeguarding Triage Team in order to discuss any uncertainty regarding the raising of a safeguarding alert or making a direct referral in relation to adult safeguarding issues.
- To refer to Social Care and Health, Adult Services without delay, all concerns regarding the safety and welfare of an adult at risk. This can be done by email to the Adult Safeguarding Team Triage System as follows:
  - For advice about if a referral is appropriate **telephone 01929 557712.**
  - Referrals to be emailed to [dorsetadultsafeguarding@dorsetcc.gov.uk](mailto:dorsetadultsafeguarding@dorsetcc.gov.uk)
- To ensure any incident or allegation highlighted in connection with a patient or family member and concerning the safeguarding of adults, is recorded appropriately and within confidentiality principles (i.e. accessible to all clinical staff only on a **need to know** basis and in consideration of the patients' clinical care)
- Information will only be shared on a 'need to know' basis when it is in the interests of the adult;
- Confidentiality must not be confused with secrecy;
- Informed consent should be obtained but, if this is not possible and other adults are at risk of harm or neglect, it may be necessary to override the requirement; and
- It is inappropriate for agencies to give assurances of absolute confidentiality in cases where there are concerns about harm, particularly in those situations when other adults may be at risk.

Where an adult has refused to consent to information being disclosed for these purposes, then practitioners **must** consider whether there is an overriding public interest that would justify information sharing (e.g. because there is a risk that others

are at risk of serious harm) and wherever possible, the appropriate Caldecott Guardian should be involved.

- Adult Safeguarding Lead or Senior Members of staff will update SystemOne as appropriate.
- To re-contact Adult Services in Social Care and Health within three working days if no response to a referral has been received from them and daily thereafter until a satisfactory response is received from them.
- To request the Registered Manager of Weldmar Hospicecare to inform the CQC of any incidents of harm relating to the person using the services of Weldmar Hospicecare.
- Safeguarding Link Group – a member from each area of Weldmar Hospicecare Charity has been identified as being a link between each area of the organisation and the Charities Safeguarding Lead. To ensure seamless information and updates being shared to encourage and allow open and transparent conversations around Safeguarding.

This was initially an outcome of an internal Safeguarding Audit that identified that not everyone is aware of who to go to for advice and guidance to talk through areas of concern. It is also a link for educational updates that pertain to particular areas of the Charity.

The Safeguarding Link Group consists of a member from each area of the Charity, the Adult Safeguarding Lead for the Charity and a Trustee, whose area of responsibility covers Safeguarding. It has been agreed that the group meet twice per year for updates and discussions on any safeguarding alerts, that are cascaded to the rest of the Charity.

## **WHISTLEBLOWING AND SPEAKING UP**

In some cases, it may not be appropriate to share concerns of harm with your line manager (e.g. where he or she is the alleged perpetrator or your concerns are not taken seriously). In such circumstances, follow the Freedom to Speak Up: Raising Concerns (Whistleblowing Policy and Procedure Policy). The Public Interest Disclosure Act 1998 offers some protection for whistle blowers.

Safeguarding is complex and it is important to promote a culture where staff are able to raise concerns and whistle blow without fear, that there is an understanding of the need for staff support to achieve effective outcomes for vulnerable individuals. Weldmar Hospicecare has a whistleblowing policy which should be read in collaboration with this policy.

Concerns can also be discussed with the Trust's Freedom to Speak Up Guardian.

### **5.2 Relevant Clinical Governance Group/CGSG**

- To ensure the implementation of this policy is monitored, reviewed and evaluated.
- To ensure all employees have access to this policy by whatever means necessary, including access via the intranet.
- To ensure ongoing review of this policy incorporates audits against practice.

### **5.3 Staff Management/Peoples Services Clinical Governance Group**

- To ensure that all relevant post holders new to the organisation are checked through Disclosure and Barring Service (DBS), (or the equivalent) in line with Weldmar Hospicecare Employment Policies.
- To ensure where staff members have been implicated as alleged perpetrators of harm that correct disciplinary procedures and reporting under Protection of Vulnerable Adult (POVA) (Care Standards Act 2000) have been followed.

### **5.4 Education**

- Ensure all employees, new and existing attend mandatory Adult Safeguarding Awareness Training as part of their induction programme and have access to this policy to support them in practice
- Ensure ongoing staff development and refresher training is provided to all key members of staff as required.

### **5.5 Line Managers**

- To ensure the staff for who they are responsible attend mandatory training sessions provided and are released from their duties in order to do so.
- To use supervision and appraisal meetings to ensure all employees have attended and understood the training offered in relation to Adult Safeguarding.
- To inform the Policy Lead of further development / training needs of their supervisees with regard to Adult Safeguarding.
- To ensure that staff under their management understand issues of consent, capacity and confidentiality and recognise the principle of sharing information on a 'need to know basis' only.
- To ensure that all concerns brought to their attention are responded to in line with this policy.

### **5.6 All Employees**

- To ensure that they attend training provided



- To ensure they read and The Trust's Policy on Safeguarding Adults at Risk (Vulnerable Adults).
- To ensure they know what to do if they have any concerns relating to an adult at risk.
- To discuss with their line manager or a senior manager if they do not understand what is expected of them.
- In liaison with a Senior Manager or most senior clinical lead, to undertake a risk assessment to identify the possibility of immediate harm being caused to an adult and to contact Social Care and / or the police without delay if an immediate risk to safety is identified
- To ensure that if they have cause to feel any suspicion or concern about an adult in their care that they raise this concern with their line manager or the most senior member of staff on duty / or the Adult Safeguarding Lead.
- Not to undertake an investigation. All incidents of suspected or actual abuse of an adult **must** be reported to Dorset County Council Social and Community Care Services to investigate as they hold the Lead Responsibility for doing so. This will be with the agreement of the most senior manager on duty and with the full consent of the adult concerned. Where an adult is assessed as not having capacity under the MHA or MCA to give consent to refer, or where it is felt (by the most senior/clinical members of staff available) that the level of actual or potential risk outweighs the adult's right to confidentiality, staff will make a referral to Adult Social Care in accordance with Duty of Care Principles and Professional Codes of Practice.
- To keep factual notes of the concern, identifying all that has happened, including dates, times and what was said by whom. This information may be needed later. The Policy Lead or their delegated colleagues (as above) should consider the appropriateness of 'full' incident details being recorded onto a patient's record. Where this is judged as not being appropriate to ensure that such detail is recorded using word documentation and that this record is then kept securely with consideration to confidentiality issues. I.e. paper records may be held securely by the Policy Lead / Delegate, until the document can be 'Password Protected' onto SystemOne (Patient Electronic Record Database). Once the details are securely documented onto the patient database any paper copies describing the incident should be destroyed in line with confidentiality.
- remember that the Data Protection Act 1998 and Human Rights law are not justified barriers to sharing information, but provide a framework to ensure that personal information about living individuals is shared appropriately;

## 5.7 IT/Clinical Documentation Group

- All concerns regarding the safety and welfare of adults must be recorded and all recording systems must ensure the safety, privacy and security of such information in accordance to The General Data Protection Regulation 2016.

- IT Support staff will respond to requests for support from staff to maintain safeguarding records of a confidential / sensitive nature as directed by the Policy Lead/Delegate
- Electronic copies of this policy will be available on the intranet for all staff. Copies of this policy will be made available in alternative and accessible formats for staff who request this.

## **6. DISSEMINATION, IMPLEMENTATION & MONITORING**

### **1. Compliance**

All employees will be advised to familiarise themselves with this policy and informed of its availability on the Charity's intranet. Line Managers must ensure that all staff who are unable to access the Intranet or who require this policy in other accessible formats are provided with a copy as part of their Induction Programme. Adult Safeguarding Awareness training will be integral to the mandatory training programme for all new employees. Three yearly updates will be provided to all employees who have contact with patients and their families.

## **7. RELATED POLICIES**

Bournemouth, Dorset and Poole's Adult Protection Policy and Procedures (October 2007)

Weldmar Hospicecare Charity: -  
Advanced Statement and Decisions Guidance  
Staff Guidelines on the Protection of Vulnerable Adults  
Public Disclosure (Whistleblowing) Policy  
HR Policies  
Disciplinary / Grievance Policy  
Complaints Policy  
Equality and Diversity Policy  
Mental Capacity Act  
Whistle Blowing Policy

## **8. RELATED INFORMATION**

Action on Elder Abuse study (2004) [Hidden Voices: Older Peoples Experience of Abuse](#)  
Mental Capacity Act 2005;  
Equality Act 2010;  
Sexual Offences Act 2003;  
Domestic Violence, Crime and Victims Act 2004;  
Serious Crimes Act 2015 (Coercion and Control;  
Counter – Terrorism and Security Act 2015 (PREVENT);  
Safeguarding Vulnerable Groups Act 2006;  
Mental Health Act 1983;  
NHS Act 2006;  
Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

Care Quality Commission (Registration) Regulations 2009  
Care Quality Commission 'Adult social care: hospice services, Appendices to the Provider Handbook' October 2014  
NHS Dorset Clinical Commissioning Group  
[MASH@dorset.pnn.police.uk](mailto:MASH@dorset.pnn.police.uk)  
<https://www.dorsetforyou.gov.uk/your-community/community-safety/prevent.aspx>  
The Care Act 2014

### **Local contacts**

Dorset County Council (safeguarding team) 01929 557712  
Out of Hours 01202 657279  
CCG quality directorate 01305 368070  
Designated Adult Safeguarding Manager CCG 01305213515 07795882116  
<https://www.dorsetforyou.gov.uk/dvahelp> 08000325204 You First Support for Domestic Violence  
<https://www.dorset.police.uk/help-advice-crime-prevention/personal-safety-help-advice/domestic-abuse>  
[PreventReferrals@Dorset.pnn.police.uk](mailto:PreventReferrals@Dorset.pnn.police.uk)

### **In an emergency:**

**If a vulnerable adult is potentially seriously injured: Ring 999**

**If someone is threatening to harm the vulnerable adult: Ring 999**

## **9. REFERENCES**

### **Care Act 2014**

The Data Protection Act 2018 is the UK's implementation of the General Data Protection Regulation (GDPR).

Care Standards Act 2000

[www.gov.uk/government/organisations/disclosure-and-barring-service](http://www.gov.uk/government/organisations/disclosure-and-barring-service)

**Public Interest Disclosure Act 1998**

[www.elderabuse.org.uk](http://www.elderabuse.org.uk)

## **10. APPENDICES**

None.

1.	<b>AIMS OF THE POLICY</b>
2.	<b>GLOSSARY / ABBREVIATIONS</b>
3.	<b>POLICY APPLICABLE TO</b> e.g. Staff, Volunteers, Carers, Visitors, Patients (not always all of them)
4.	<b>POLICY</b> (this is where the main body of text goes)
5.	<b>ROLES AND RESPONSIBILITIES</b>
6.	<b>DISSEMINATION, IMPLEMENTATION &amp; MONITORING COMPLIANCE</b>
7.	<b>RELATED POLICIES</b>
8.	<b>RELATED INFORMATION</b>
9.	<b>REFERENCES</b>
10.	<b>APPENDICES</b> (if applicable)

