Oxfordshire Mind

Safeguarding Adults Policy

August 2024

Version Control

Policy Owner	CEO
Policy Author	Head of Innovation
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Summary: policy and procedures for safeguarding adults at risk of harm, with some supporting information

Key changes:

- Updates 'key persons' list to reflect staffing and structural changes.

- Clarifies that the policy applies to back office as well as to front line workers.

- Adds a note to highlight that abuse can occur in online as well as physical settings.

- Updates requirements to complete refresher training in line with local Safeguarding Board advice.

- Sets out approach to managing gaps in DBS history for staff or volunteers who have lived or worked overseas.

- Adds guidance on how workers who do not themselves have access to In-Form can ensure matters are recorded on the In-Form system.

Key Information Sources:

- MQM Policy Checklist – Safeguarding Adults at:
  https://connectingminds.org.uk/resources/policy-checklist-safeguarding-adults-at-risk/
  [accessed 30.05.2024]

- Oxfordshire Mind MQM Report and Improvement Action Plan – April 2023

- Charity Commission guidance Safeguarding and protecting people for charities and trustees at:

  https://www.gov.uk/guidance/safeguarding-duties-for-charity-trustees

  [accessed 30.05.2024]

- Care Act Statutory Guidance (Safeguarding) at:
  https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#safeguarding-1
  [accessed 30.05.2024]

- UK Government Guidance on Revisiting Safeguarding Practice Guidance

- Oxfordshire Safeguarding Adults Board at:
  https://www.osab.co.uk/
  [accessed 30.05.2024]

- West of Berkshire Safeguarding Adults Board at:
  https://sabberkshirewest.co.uk/
  [accessed 30.05.2024]

- Ann Craft Trust, especially: https://www.anncrafttrust.org/resources/

- Local Government Association 'Understanding what constitutes a safeguarding concern and how to support effective outcomes'

- Social Care Institute for Excellence, especially: https://www.scie.org.uk/safeguarding

Contents

1. Introduction

1.1. Oxfordshire Mind (OxM) is committed to protecting a person's right to live in safety, free from abuse and neglect. Oxfordshire Mind understands that safeguarding is everyone's responsibility. Our aim is to support individuals using our services to live free from fear and harm and have their rights and choices respected.

1.2. This policy sets out Oxfordshire Mind's commitment to safeguarding adults at risk of harm in line with national legislation and local guidelines.

1.3. Oxfordshire Mind regards an 'adult at risk' as any person aged 18 years or over who

- Has needs for care and support (whether or not these needs are being met by Oxfordshire Mind or any other services) and;

- Is experiencing, or is at risk of, abuse or neglect (including self-neglect); and;

- As a result of those care and support needs, may be unable to protect themselves from either the risk of, or the experience of, abuse or neglect.

1.4. This policy applies to everyone involved in providing services at Oxfordshire Mind. For the avoidance of doubt, this includes full-time employees, part-time employees, contractors and sessional workers, consultants, secondees, locums, students on placement, trustees and volunteers – whether in a frontline or back office role. Oxfordshire Mind uses the working name Mind in Berkshire for some of its Berkshire activities, but Mind in Berkshire is not a separate legal entity and therefore this policy applies to everyone from Oxfordshire Mind involved in providing services in Berkshire, who may be held out as Mind in Berkshire workers.

1.5. Oxfordshire Mind has a separate Child Protection and Safeguarding Policy for safeguarding concerns for anyone below the age of 18.

1.6. The safeguarding process is inclusive, at all stages, of the adult(s) concerned. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances. Oxfordshire Mind also recognises that some people perceive and experience barriers to communicating concerns, seeking and/or receiving help, related to characteristics such as ethnicity, ability and disability, gender identity etc; again, we aim for inclusive and flexible processes which address the unique needs of an individual adult at risk.

2. Aims of the Policy

2.1. The aims of this policy are to:

- Ensure effective responses to allegations and concerns of harm and abuse, in line with legislation and local multi-agency procedures

- Provide a clear framework of responsibilities so that all workers understand their duties in keeping adults at risk safe from harm.

- Ensure learning from OxM's experiences of safeguarding is used to improve the support OxM offers to help adults stay safe and well.

3. Principles of safeguarding

3.1 The following six safeguarding principles from the Care Act 2014 should underpin our practice:

- o **Empowerment** – *I am asked what I want as the outcomes from the safeguarding process and these directly inform what happens.* In effect: people are supported and encouraged to make their own decisions and give informed consent.

- o **Prevention** – *I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help.* The principle of Prevention recognises the importance of taking action before harm occurs and seeking to put mechanisms in place so that they do not re-occur.

- o **Proportionality** - *I am sure that the professionals will work in my interests, as I see them, and they will only get involved as much as needed.* The principle of Proportionality means to decide the least intrusive response appropriate to the risk presented by the individual.

- o **Protection** - *I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want.* The principle of Protection involves organising and delivering support and representation for those in greatest need who may not be able to do so themselves.

- o **Partnership** - *I know that staff treat any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me.* The principle of Partnership recognises that effective safeguarding cannot be delivered in isolation of other partners and systems that interact with or impact on a person.

- o **Accountability** - *I understand the role of everyone involved in my life and so do they.* The principle of Accountability means recognising the importance of being open, clear and honest in the delivery of safeguarding and ensuring there are mechanisms in place to hold practitioners, services or systems to account.

3.2   In line with 'Making Safeguarding Personal' guidance, we aim to respond in safeguarding situations in a way that enhances involvement, choice and control as well as improving quality of life, wellbeing and safety. We regard people as experts on their own lives and aim to work alongside them.

3.3   Further information on the legislative framework for Adult Safeguarding is given in Appendix 3.

4. What workers need to know

4.1. All workers should be aware of the systems within Oxfordshire Mind which support adult safeguarding. Items i-v below are covered in this document.

   i.   This document – the Safeguarding Adults at Risk policy

   ii.   What to do if they have a concern about an adult at risk

<ol type="i" start="3">
What to do if adults at risk tells them they are being abused or neglected
The role of the Designated Safeguarding Lead (DSL) and Deputy DSLs
Managing safeguarding allegations about workers or volunteers

See appendix 4 for information about other relevant policies and procedures, covering issues such as staff conduct, recruitment, data protection, whistleblowing, record-keeping etc.

4.2. Workers should never promise that they will not tell anyone about the allegation or disclosure that the person has made, as this may ultimately not be in the best interests of the individual.

4.3. All paid workers should complete online Level 1 safeguarding training within the first month of starting work with Oxfordshire Mind. This then needs to be refreshed every 3 years.

4.4. Frontline workers should complete Level 2 training as soon as possible after completing Level 1 training - no later than 12 months from starting work in a service user facing post. Workers required to complete Level 2 training need to refresh this every 3 years, unless they are refreshing their knowledge at Level 3 (see below)

4.5. Oxfordshire Mind provides bespoke training and inductions for unpaid workers, to include safeguarding matters. Some unpaid workers will also be required to complete Level 1 and/or Level 2 training, depending on the nature of their role. The Volunteering and Peer Support Manager or Head of Human Resources will advise when this is appropriate.

4.6. The DSL, Deputy DSLs and MARAC Officer should receive specialist training before starting their designated roles – Level 3 Safeguarding. Level 3 refresher training for Children's Safeguarding should be repeated every 2 years. Level 3 refresher training for Adult Safeguarding should be repeated every 3 years. Staff who are refreshing their knowledge at Level 3 do not need to refresh Level 2 training after completing it once. The DSL and DDSLs should also aim to complete other specialist training offered by the relevant Safeguarding Board within 1 year of it becoming available (for example, Modern Slavery, Preventing Radicalisation etc).

4.7. In Oxfordshire, all levels of training are available free from the Oxfordshire Safeguarding Adults Board. https://www.osab.co.uk/learning-zone/

4.8. In Berkshire West, free training is available from the three local authorities (Reading, Wokingham and West Berkshire) covered by the West of Berkshire Safeguarding Adults Board: https://www.sabberkshirewest.co.uk/practitioners/workforce-development/

5. What Oxfordshire Mind workers should look out for

5.1 All workers need to be aware of the signs of abuse and neglect, so they are able to identify an adult at risk who may be in need of help or protection. Knowing what to look for is vital to the early identification of abuse and neglect. Further information about the types and indicators of abuse can be found in section 14, and also here: https://www.scie.org.uk/safeguarding/adults/introduction/types-and-indicators-of-abuse.

6. What workers should do if they have concerns about an adult at risk

6.1. If workers have any safeguarding concerns about an adult, they should speak to their Line Manager. This may be because of something a person has told them (a "disclosure") or based on information from other persons or from their own observation. This should be done as soon as possible, usually immediately and certainly before the end of the working day.

6.2. If their Line Manager is not available, the worker should find someone to speak to by going up the management chain – to their manager's manager, to that manager's manager etc, up to the DDSL and the DSL. If the DSL is not available either, the worker should speak to any other member of the Senior Management team.

** The most important thing is to speak to someone! Any manager should welcome that discussion and the worker should not worry that they might have approached the 'wrong' manager **

6.3. Whichever manager the worker speaks to will discuss the case with them and guide them on whether to consult with or make a referral to the relevant local authority safeguarding service. Further details are given in Appendix 2, including contact details for the local authority.

6.4. **If the adult is in immediate danger the police should also be contacted.**

6.5. Ensure that all concerns and related actions are recorded on In-Form. See Appendix 5 for points of contact for assistance with this to be used by workers who do not themselves have In-Form access. Once information has been recorded on In-Form, all other records of the concern and related action should be deleted / destroyed. The In-Form record will be deleted 6 years after Oxfordshire Mind's last contact with the service user concerned, or 6 years after the record was created if this is not attached to a service user.

7. **What workers should do if they have concerns about another worker, and/or they have received an allegation against a worker.**

   7.1. Safeguarding concerns about a colleague's practice, and allegations of abuse by workers, must be referred to the DDSL or DSL as soon as possible and before the end of the working day. Concerns/allegations about the DSL must be referred to the CEO. Concerns/allegations about the CEO must be referred to the Lead Trustee for Safeguarding. Concerns and allegations about a Trustee should be referred to the DSL or CEO.

   7.2. OM understands that this will be a distressing and stressful situation for everyone involved. Appropriate care and support will be offered to any clients involved and to the person(s) raising the concern or making the allegation. Employees are able to access the Employee Assistance Programme on freephone number 0800 0280199 (Username: Wellbeing, Password: SignPostLamp). Workers should also see the Whistleblowing Policy, and be reassured that when raising concerns in good faith, they will be supported, and protected from any retaliation.

   7.3. Suspension of the worker(s) against whom an allegation has been made should be regarded as a neutral act to protect everyone involved while the matter is investigated. A decision to suspend needs careful consideration and Oxfordshire Mind Human Resources (HR) will be consulted prior to any suspension taking place. If disciplinary action is required, refer to the Oxfordshire Mind Disciplinary Policy.

   7.4. Any reporting to funders or commissioners about these concerns or allegations, as per the relevant contractual agreement, will also be reported promptly to the CEO and the Trustee Lead for Safeguarding, and included in the Risk Register.

8. **What workers should do if they have concerns about safeguarding practices within the organisation**

   8.1. All our workers should feel able to raise concerns about poor or unsafe practice and potential failures in the organisation's safeguarding practices and that such concerns will be taken seriously by the leadership.

   8.2. Oxfordshire Mind's Whistleblowing Policy explains how workers can report their concerns.

   8.3. Where a worker feels unable to raise an issue with Oxfordshire Mind or feels that their genuine concerns are not being addressed, other whistleblowing channels may be open to them.

   8.4. General guidance can be found at- https://www.gov.uk/whistleblowing/what-is-a-whistleblower

9. Key people at Oxfordshire Mind.

Designated Safeguarding Lead	Jess Willsher, Chief Executive Officer Email: jess.willsher@oxfordshiremind.org.uk Tel: 07435 760818
Trustee Safeguarding Lead	Rachel Griffiths Email: Rachel.griffiths@oxfordshiremind.org.uk Tel: 07833 728081
Deputy DSL (Housing)	Simon Pitkin, Head of Housing Email: simon.pitkin@oxfordshiremind.org.uk Tel: 07713 566617
Deputy DSL (Wellbeing)	Andrew Grillo, Head of Wellbeing Email: andrew.grillo@oxfordshiremind.org.uk Tel: 07435 760796
Deputy DSL (Innovation)	Janette Searle, Head of Innovation Email: janette.searle@oxfordshiremind.org.uk Tel: 07719 084338
Deputy DSL (Children & Young People)	Sara Keppie, Wellbeing Service Manager (CYP & Families) Email: sara.keppie@oxfordshiremind.org.uk Tel: 07590 878827
Designated Multi-Agency Risk Assessment Conference (MARAC) Officer	Sara Keppie, Wellbeing Service Manager (CYP & Families) Email: sara.keppie@oxfordshiremind.org.uk Tel: 07590 878827

10. Roles and responsibilities

10.1 The Board of Trustees will:

- Appoint a lead Trustee for safeguarding, to lead the Board in providing oversight of all safeguarding matters.

- Set out how safeguarding risks will be managed in the organisational risk register that is regularly reviewed by the Board.

- Conduct annual reviews of safeguarding policies, procedures, practice and outcomes

10.2 The CEO will:

- Ensure that safeguarding policy and procedures are understood and followed by everyone in a position of trust and involved in providing services, including ensuring that updates to this policy are shared across the organisation in line with OxM's policy implementation procedure.

- Promote an organisational culture in which everyone feels able to raise concerns about poor or unsafe practice, confident that such concerns will be handled sensitively and in accordance with the Whistleblowing Policy.

- Ensure there is a named DSL and Deputy DSLs who have undertaken the relevant specialist safeguarding training

- Ensure there are appropriate procedures for dealing with allegations of abuse made against workers, including management.

- Ensure that all staff/managers with recruitment responsibilities are aware of their safeguarding responsibilities in relation to safe recruitment and also deployment of volunteers. This includes carrying out Disclosure and Barring (DBS) checks. If a candidate for a paid or voluntary role with Oxfordshire Mind has been resident outside the UK for three months or more over the past five years, a risk assessment will be carried out prior to the individual starting their role to help make an informed decision about how best to proceed in the face of this gap in DBS history. If the role is a paid child-facing role, the individual may be required to obtain an overseas criminal records check in order to continue in their role. The Home Office provides [guidance on applying for criminal records checks for overseas applicants](#)

- Ensure that there is a training plan in place that ensures all paid workers, including management, and Trustees, receive safeguarding training, with refresher training at appropriate intervals.

- Allocate sufficient time and resources to enable the DSL, DDSLs and DMO to carry out their roles effectively.

10.3   The DSL will:

- Be appropriately trained and understand the local Safeguarding Adults Board procedures for the areas in which the organization operates.

- Act as a source of support and expertise to the whole organisation

- Be the final arbiter within OxM of whether to refer suspected cases of neglect and/or abuse to the local authority and police in situations where other staff are struggling to reach consensus.

- Ensure records of all concerns are kept securely, within the case notes of the individual, and also used to review and improve safeguarding practices and outcomes across the organisation, e.g. through periodic audits.

- Oversee and submit any safeguarding assessment reports required by Commissioners/Funders of OM services (such as the Section 11 Safeguarding Self-Assessment Audit) and oversee OM's response to any safeguarding-related queries from external agencies.

10.4 The Deputy DSLs will:

- Be appropriately trained and act as lead for safeguarding issues in their area of practice (as detailed in the 'key people' table above), escalating issues to the DSL where necessary.

- In the absence of the DSL, carry out those functions necessary to ensure the ongoing safety and protection of adults at risk. In the event of the long-term absence of the designated person, the DDSL will assign – in consultation with the CEO - one of their number to assume all of the functions of the DSL.

10.5 The Designated Multi-Agency Risk Assessment Conference (MARAC) officer will:

- Actively encourage colleagues to make referrals in cases that present a high risk of harm for victims of domestic abuse.

- Support colleagues to attend MARAC meetings if required

- Act as a point of contact on behalf of Oxfordshire Mind for enquiries relating to domestic abuse.

10.6 All workers will:

- Follow Oxfordshire Mind's Safeguarding Adults policy, working in accordance with the safeguarding principles outlined above.

- Participate in safeguarding adults training and alert their Line Manager if they feel in need of further training or guidance.

- Understand that the responsibility to safeguard an adult at risk requires that we all appropriately share any concerns that we may have about an individual.

11 Confidentiality

11.1 We recognise that all matters relating to safeguarding are confidential and will disclose personal information about an individual to others on a need-to-know basis only. All workers must be aware that they have a professional responsibility to share information with other agencies in order to safeguard adults.

11.2 All workers must also be aware that they cannot promise an individual to keep secrets which might compromise their safety or well-being or that of another.

11.3   Confidentiality is important. However, in certain circumstances we will need to breach confidentiality in the best interests of the individual(s) concerned. Wherever possible staff should discuss their concerns with the person and/or their representative and seek their consent to share information. However, consent is not essential when deciding whether safeguarding concerns should be shared with others in order to protect a person from abuse or neglect (known or suspected .

Where the person is not willing or able to freely give their consent to information about their circumstances being shared, the worker will need to consider if there are any children and/or other adults with care and support needs involved, or is there a potential risk to others. If this is the case, consent can be overridden in the interests of protecting others. Consent can also be overridden if informing the person is likely to prejudice the outcome of the safeguarding process. There may also be mental capacity considerations.

- o   A decision to override consent must be taken in discussion with a DDSL or the DSL.

- o   The worker must ensure that all actions are recorded clearly, with reasons for the decisions.

11.4   Also see the 'golden rules for information-sharing' in Appendix 2.

12   Supporting Workers

12.1   Oxfordshire Mind recognises that workers who have had contact with an individual who has suffered harm or appears likely to suffer harm may find this situation stressful and upsetting.

12.2   Workers will be given an opportunity to talk through any anxieties with their Line Manager, their Service Lead or the DDSL or DSL. For additional support, staff can contact the Employee Assistance Programme on freephone number 0800 0280199 (Username: Wellbeing, Password: SignPostLamp)

13   Partnership Forums: Safeguarding Adults Boards, MARAC and MAPPA

13.1   The Care Act requires every Local Authority to establish a multi-agency Safeguarding Adults Board (SAB) for its area, to work at a strategic level to safeguard adults with care and support needs. Oxfordshire Mind is not currently a member of any SAB but is commissioned by organisations that are, and works closely with many of their members. Oxfordshire Mind will work within the protocols and guidance of the relevant SAB, and will cooperate fully with any requested engagement.

13.2 Oxfordshire Mind recognises that it has a duty to supply information to a Safeguarding Adults Board when a request is made for the purposes of enabling the SAB to carry out its functions and Oxfordshire Mind is the most relevant organisation to provide it. Any information provided will be in line with the Caldicott Principles.

Oxfordshire:

- https://www.osab.co.uk

- https://www.osab.co.uk/resources-and-publications/

  (local protocols, policies and procedures)

Berkshire West:

- https//www.sabberkshirewest.co.uk/ (This Board covers the local authority areas of Reading, West Berkshire and Wokingham.)

- https://www.berkshiresafeguardingadults.co.uk (local protocols, policies and procedures)

Other partnership forums:

13.3 **MARAC** (Multi-Agency Risk Assessment Conference) is a victim-focused meeting where information is shared on the highest risk cases of domestic abuse. The primary focus of the MARAC is to safeguard the adult victim. The MARAC will also make links with other fora to safeguard children and manage the behaviour of the perpetrator. Further information can be found here.

- Oxfordshire Mind will support clients to engage with MARAC. Where a victim does not want to be referred to MARAC, Oxfordshire Mind will assess whether it is proportionate and defensible to share information without the victim's consent (see Section 12: confidentiality).

13.4 **MAPPA** (Multi-Agency Public Protection Arrangements) is the process through which agencies such as the Police, Prison and Probation services work together to protect the public by managing the risks posed by violent and sexual offenders living in the community.

- Oxfordshire Mind is required to engage with MAPPA wherever a person using our services has been identified as a high-risk offender. Further information on MAPPA can be found here.

Appendix 1 - Definitions and Indicators of Abuse

Types of abuse

Abuse and neglect can take many forms and the circumstances of the individual's case should always be considered. Incidents of abuse may be one-off or multiple and may affect one person or more. Some forms of abuse can occur in online as well as physical settings. Patterns of harm should be identified instead of looking at single incidents in isolation.

People who are being abused may well be subject to more than one type of abuse at the same time. Many forms of abuse can also occur on-line.

Abuse is not always deliberate. It may be that someone is trying to do their best in a challenging situation. They may be a relative, friend or carer who needs help or support in difficult circumstances. Oxfordshire Mind will report abuse even if does not seem to be deliberate.

Statutory guidance to the Care Act identifies 10 types of abuse.:

- **Physical abuse**– including assault, hitting, slapping, pushing, misuse of medication, restraint and inappropriate sanctions.

- **Domestic violence** -including psychological, physical, sexual, financial, emotional abuse and 'honour' based violence.

- **Sexual abuse** -including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, sexual acts to which the adult has not consented or was pressured into consenting.

- **Psychological abuse** – including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.

- **Financial or material abuse:** including theft, fraud, internet scamming, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transaction or the misuse or misappropriation of property, possessions or benefits.

- **Modern slavery** – encompasses slavery, human trafficking, forced labour and domestic servitude.

- **Discriminatory abuse** – includes forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion.

- **Organisational abuse** – including neglect and poor practice. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional

practice as a result of the structure, policies, processes and practices within an organisation.

- **Neglect and acts of omission** –including ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life such as medication, adequate nutrition and heating.

- **Self-neglect** – this covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding.

Other areas of risk include:

- **Forced Marriage** – this is a marriage where one or both of the parties are married without their consent or against their will. It differs from an arranged marriage where both parties consent to the assistance of their parents or a third party in identifying a potential spouse. It is a criminal offence to force someone to marry and part of the safeguarding action must be swift contact with the Police as urgent action may need to be taken.

- **Honour-based Violence** – Honour-based violence is a crime, and referring to the police must always be considered. It has or may have been committed when families feel that dishonour has been brought to them. Women are predominantly (but not exclusively) the victims and the violence is often committed with a degree of collusion from family members and/or the community.

- **Female Genital Mutilation** – FGM involves procedures that intentionally alter or injure female genital organs for non-medical reasons. The procedure has no health benefits for girls and women. The Female Genital Mutilation Act (FGMA) makes it illegal to practise FGM in the UK or to take girls who are British nationals or permanent residents of the UK abroad for FGM whether or not it is lawful in another country. It also makes it illegal to aid, abet, counsel or procure the carrying out of FGM abroad.

- **Radicalisation** – supporting or becoming a terrorist is another safeguarding concern. "Prevent" is part of the Government's strategy to tackle the problem of terrorism at its roots. It covers all forms of extremism. Oxfordshire Mind workers are responsible for engaging with 'Prevent' by noticing people's vulnerability and any changes in behaviour or ideology; checking out any concerns with their Line Manager or DDSL; and sharing concerns with the individuals, the local authority safeguarding team and the police.

- There is evidence that **social isolation** increases the likelihood of abuse and neglect, and that certain types of abuse escalated during the covid-19 pandemic, especially domestic abuse and financial abuse. During lockdowns, people who are experiencing abuse may be less visible, and may also be less likely to ask for help as they know services are stretched.

Spotting signs of abuse and neglect

What might you be concerned about?

- A person not getting the help or care they need

- A person being hurt, bullied, frightened or intimidated

- A person being taken advantage of, or exploited because of characteristics such as their mental health issues, their age, disability, sexuality etc

- A person not being allowed to make their own choices or decisions

- A person being made to do something against their will

- A person not being treated in a dignified or respectful manner

What might cause you to be concerned?

You might see and/or hear something happen:

- Someone being bullied or intimidated

- Someone being made to feel frightened or unhappy

- Someone in a situation of unnecessary risk.

The person might say things or behave in a way that causes you concern:

- The person may seem unhappy or distressed

- The person may appear frightened, anxious or agitated without identifiable cause, or in relation to certain people

- The person may have sleeping problems

- Constant visits to the toilet without a medical reason

- Other unexplained changes in how the person behaves

- You may not know. Perhaps you are never being allowed to see the person on their own. It is enough that you are worried.

Somebody might tell you something or say something that gives cause for concern, e.g.

- A colleague;

- Family member;

- Member of the public.

Further information on types of abuse and indicators is widely available, for example here

Appendix 2- Dealing with disclosures and concerns - Guidance Notes

Any Oxfordshire Mind worker who identifies the possibility of abuse or neglect must take these key actions. Wherever possible these must be carried out on the same day as the alert is raised.

If an individual asks to speak to you about a problem, do not promise confidentiality but explain that it may be necessary to consult other colleagues and/or external agencies.

Evaluate

Make an immediate evaluation of the risk and take steps to ensure that the adult is in no immediate danger. Call 999 for emergency services if there is a medical emergency, other danger to life or risk of imminent injury, or if a crime is in progress.

Talk to the person & obtain consent

Ask them what they want to happen and what outcomes they want. Tell them what you can do to help. Reassure the person that their wishes will be taken into account. Encourage and support the adult to contact the police if a crime has been or may have been committed.

If the person has capacity, they may not wish for any intervention to take place. Their wishes should be respected as far as possible, however if you feel they, others, including children, may be at risk, it is mandatory to report the incident or concerns.

Reassure

Stay calm, no judgements, empathise. Never make a promise that you can keep what the person has said a secret. Give reassurance that only those who need to know will be told. Reassure the person that they were right to tell you.

React

React to the individual only as far as is necessary for you to establish whether or not you need to refer this matter, but do not interrogate for full details.

Do not ask leading questions – keep the open questions e.g. 'is there anything else you want to say?'

Do not criticise the perpetrator; the individual may have affection for him/her.

Explain what you will do next – inform your manager etc.

Record

Make brief notes about what they are actually telling you at the time. Keep these notes, however rough they are. If you are unable to make notes at the time, write down what was said as soon as you can. Further details on recording on In-form (client database) below.

Oxfordshire mind

Try to record what was actually said by the individual rather than your interpretation of what they are telling you.

Record the date, time, place and any noticeable nonverbal behaviour.

Report

Report the disclosure, allegation or concern to your Line Manager before the end of the working day or shift. Concerns arising as a result of the accumulation of indicators/signs of abuse should be discussed with the manager and action agreed within 3 working days.

If your Line Manager is not available, you should find someone to speak to by going up the management chain – to their manager's manager, to that manager's manager etc, up to the DDSL and the DSL. If the DSL is not available either, you should speak to any other member of the Senior Management team.

** The most important thing is to speak to someone! Any manager should welcome that discussion and you should not worry that you might have approached the 'wrong' manager **

Whichever manager you speak to will discuss the case with you and guide you on **whether to report externally.**

- Concerns must be reported if a serious crime has taken place, the person subject to abuse does not have capacity to make a decision about the reporting, or if there are other people who may be at risk.

- Report emergencies to the police on 999 and non-emergencies on 101. Make a note of any reference number provided on the service user notes.

- For local authority referrals:

   o Make a record of any referral or report reference number on the service user notes.

   o Always follow up in a few days to check what action is being taken as a result of your safeguarding referral.

   o Remember that the local authority safeguarding team is not an emergency service – if necessary, contact emergency services as well.

Report to the Local Authority – Oxfordshire County Council:

   o First consult the Threshold of Needs Matrix which sets out when and how to access safeguarding services

   o For discussion with the Safeguarding Team about your concerns and whether or not to refer (called a Consultation), call 01865 328232 and ask to speak to the Duty Team.

   o To make a referral, complete:

https://www.oxfordshire.gov.uk/residents/social-and-health-care/social-and-health-care-information-professionals/raising-safeguarding-concern-0

- o Contact Adult Social Care in the area in which the person lives, on the numbers, email address or by completing an online form as below.

    Reading – call **0118 9373747** or email at CSAAdvice.Signposting@reading.gov.uk or complete a online form

    West Berkshire – call 01635 519056 or email safeguardingadults@westberks.gov.uk or complete a online form

    Wokingham call 0118 974 6371 or email Adultsafeguardinghub@wokingham.gov.uk or complete: https://www.wokingham.gov.uk/form/report-a-concern-about-an-adult

    For help out of normal working hours contact the **Emergency Duty Team** on 01344 351 999 or email edt@bracknell-forest.gov.uk

Under some circumstances, a local authority may pass a safeguarding referral on to the local mental health trust for follow-up. However, new safeguarding referrals should always be sent to the local authority, even if you believe that your OxM client is a patient of the mental health trust. If you become aware that your referral has been assigned to a safeguarding manager in the mental health trust, then you can contact them directly, but if in any doubt, continue to follow up your safeguarding concerns through the local authority.

Record Keeping

There are a number of record types on In-form that might be relevant when a worker has safeguarding concerns about a client: daily logs, client alerts, incident and accident forms, safeguarding alerts and restricted visibility timelines.

If the worker is in any doubt about which to use, they should consult their Line Manager. In-form guidance is available on Sharepoint (see Appendix 4), including advice about what type of record to use when, and how to complete a Safeguarding Alert form (and any other form).

Line Managers are responsible for ensuring that the Safeguarding Alert Form on In-form has been completed by the end of the working day in which the concern was identified. Safeguarding records can be added to as more information is gathered and more actions taken – so do not wait, write what you know as soon as you can! This ensures that a colleague can follow up in your absence if necessary.

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If a crime has been committed

Abuse is often a crime and may also need to be reported to the police on either the non-emergency number 101, or by dialling 999 in an emergency.

Advocacy

People using Oxfordshire Mind's services will be encouraged to contact advocacy services to assist them in making an allegation of abuse.

Oxfordshire

Website: https://www.voiceability.org/support-and-help/services-by-location/oxfordshire

Tel: 0300 303 1660

Email: helpline@voiceability.org

Berkshire West (Reading, Wokingham and West Berkshire)

Website: https://www.theadvocacypeople.org.uk/

Tel: 0330 440 9000

Email: info@theadvocacypeople.org.uk

Seven golden rules for information sharing

1. Remember that the Data Protection Act 2018 and human rights laws are not barriers to justified information sharing, but provide a framework to ensure that personal information about living individuals is shared appropriately.

2. Be open and honest with the individual (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.

3. Seek advice from other practitioners if you are in any doubt about sharing the information concerned, without disclosing the identity of the individual where possible.

4. Share with informed consent where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information. You may still share information without consent if, in your judgement, there is good reason to do so, such as where safety may be at risk. You will need to base your judgement on the facts of the case. When you are sharing or requesting personal information from someone, be certain of the basis upon which you are doing so. Where you have consent, be mindful that an individual might not expect information to be shared.

5. Consider safety and well-being: Base your information sharing decisions on considerations of the safety and well-being of the individual and others who may be affected by their actions.

6. Necessary, proportionate, relevant, adequate, accurate, timely and secure: Ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those individuals who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely.

7. Keep a record of your decision and the reasons for it – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.

Acknowledgement: these seven golden rules are from OSCB

Appendix 3 - Legal Framework for Adult Safeguarding

1) The Care Act 2014

The Care Act 2014 sets out a clear legal framework for the protection of adults with care and support needs who are at risk of abuse or neglect. The Act established duties such as the Local Authority's duty to make enquiries (or cause them to be made) where there is a safeguarding concern about an adult, and to establish a Safeguarding Adults Board. Under the Act, safeguarding is not confined to the work of the local authority but is the work of everyone who has contact with a person with care and support needs, captured in the phrase: "safeguarding is everyone's responsibility". Under the Care Act, safeguarding is principle-led, not process-led, that is - many aspects of the process are not proscribed but whatever actions are taken must be in line with the six key principles: empowerment, prevention, proportionality, protection, partnership and accountability.

The Care Act noted that safeguarding interventions must also have regard to the Well-being Principle. Being able to live free from abuse and neglect is a key element of well-being. The legislation recognised that statutory agencies sometimes acted disproportionately in the past, for example, removing an adult at risk from their own home when there were other ways of preventing harm. In the words of one High Court Judge *'What good is it making someone safer when we merely make them miserable?*[1]*'* For that reason, any actions taken to safeguard an adult must take their whole well-being into account and be proportionate to the risk of harm.

Further guidance to the Care Act emphasised the need to 'Make Safeguarding Personal'. This describes the importance of a person-centred approach, and recognises that adults may make choices that may mean that one part of our well-being suffers at the expense of another – for example we move away from friends and family to find better housing. Similarly, adults can choose to risk their personal safety; for example, to provide care to a partner with dementia who becomes abusive when they are disorientated and anxious. None of us can make these choices for another adult. If we are supporting someone to make choices about their own safety, we need to understand what matters to them and what outcomes they want to achieve. The Guidance recognises that empowerment must be balanced with a duty of care and the principles of the Mental Capacity Act and the Human Rights Act.

2) Mental Capacity Act 2005

The Mental Capacity Act 2005 provides a statutory framework for people who lack capacity to make decisions for themselves, or who have capacity and want to make preparations for a time when they may lack capacity in the future. These can be small decisions – such as what to eat or wear that day – or major decisions, such as where to live or what happens if abuse has occurred. The Act sets out who can take decisions, in which situations, and how they should go about this. The Act applies to everyone, not just the statutory health and social care agencies: any organisation that offers something that requires a choice, a decision, consent, a signature or other agreement with a suggested course of action important to a person's health and care, is expected to conduct a capacity assessment if they suspect that the person does not fully understand what is being offered to them.

The Mental Capacity Act sets out 5 key principles:

The presumption of capacity – every adult has the right to make his/her own decisions and must be assumed to have capacity to do so unless it is proved otherwise.

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[1] Munby, Lord Justice (2010) 'What price dignity?', keynote address at LAG Community Care conference: Protecting liberties, London, 14 July.

The right of individuals to be supported to make their own decisions – people must be given all appropriate help before anyone concludes that they cannot make their own decisions.

Unwise decisions – a person is not to be treated as unable to make a decision merely because it is considered to be unwise. *(Note: it does not follow that the worker has to facilitate an unwise decision!)*

Best interests – anything done for or on behalf of a person without capacity must be in their best interests.

Least restrictive alternative – anything done for or on behalf of a person without capacity should be the least restrictive of their basic rights and freedoms.

There are cases where people lack the capacity to consent to particular treatment or care that is recognised by others as being in their best interests, or which will protect them from harm. Where this care might involve depriving vulnerable people of their liberty in either a hospital or a care home, extra safeguards have been introduced in law – Deprivation of Liberty Safeguards (DOLS), to protect their rights and ensure that the care or treatment they receive is in their best interests. DOLs will be replaced with Liberty Protection Safeguards (LPS) in 2022.

For guidance on understanding and assessing mental capacity, see https://capacityguide.org.uk.

3) Human Rights Act 1998

The Human Rights Act 1998 (which was extended by the Care Act 2014) sets out the fundamental rights and freedoms that everyone in the UK is entitled to and compels public organisations to treat everyone equally, with fairness, dignity and respect. It covers issues such as your right to a private and family life, to personal liberty, and to freedom of religion and belief (further information about the rights included in the Act here).

It applies to all public authorities (such as central government departments, local authorities and NHS Trusts) and other bodies performing public functions, including private and voluntary sector organisations that are commissioned with public funds, or who accept payment from public funds (eg. registered care providers), including Direct Payment situations. These organisations must not interfere with a person's human rights. Sometimes they must also take positive steps to protect someone's rights when they are at risk. For example, the Police have a positive duty to protect you if they know your life is in danger from someone. If they don't act to protect you they may breach article 2 which protects your right to life. Similarly, a public authority that knows an adult with care and support needs is being abused has a duty to protect that person from inhuman or degrading treatment.

The Human Rights act covers everyone in the United Kingdom, regardless of citizenship or immigration status.

4) There are many other pieces of legislation relevant to safeguarding adults, for example,

Legislation related to specific forms of abuse, such as the Modern Slavey Act 2015, the Sexual Offences Act 2003 or laws related to hate crime.

Legislation regarding information sharing such as the Data Protection Act 2018

Legislation around workforce issues such as safer recruitment, for example, The Disclosure and Barring Service (created under the Protection of Freedoms Act 2012

Appendix 4 Other Relevant Policies and Procedures

In addition to this document, there are other OxM policies, procedures and guidance which contribute to the safeguarding of adults with care and support needs.

These can be found on BambooHR in the Files section.

- The Recruitment, Retention and Development Policy which covers issues relating to employment, everything from recruiting safely and DBS checking, to inducting, developing and supervising staff.

- Disciplinary Policy

- Responsible Employment Policy

- The Whistleblowing Policy

- The Data Protection and Confidentiality Policy

- IT and Communications Policy

- Volunteering & Peer Support Policy

- Health and Safety Policy

- Bullying & Harassment Policy

- Incident Reporting Policy

- Supporting people who have committed violent or sexual offences – Wellbeing Service procedure

You should also be aware of OM's Child Protection and Safeguarding Policy for any safeguarding concerns regarding children and young people.

Other relevant documentation in relation to recording includes:

- In-Form factsheets available on Sharepoint at:
  Wellbeing - Guidance and training factsheets - All Documents (sharepoint.com)

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Appendix 5: Points of contact for In-Form access

Many Oxfordshire Mind workers have access to the In-Form system and so will be able to record safeguarding matters directly. Within the Services areas of the charity, most team members have In-Form access and for team members who do not have access, including new starters awaiting training or allocation of a licence, seeking the assistance of their line manager or another colleague will be the most appropriate way to proceed.

The following may also be approached to create or update an In-Form record on behalf of a colleague who does not have access.

- Volunteers can approach their 'local manager' in the service where they volunteer or a member of the Volunteering and Peer Support Team at:
  volunteering@oxfordshiremind.org.uk
- Staff in the Finance, HR or Development teams can approach the Data & Quality Team at:
  data@oxfordshiremind.org.uk

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