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| WELLCOME CARE HOMES | Reviewed March 2022 |
| SAFEGUARDING OF VULNERABLE ADULTS | Page1 of 4 |

Aim of the policy:

This policy has been introduced to:

- help to safeguard the welfare of our residents.
- help protect vulnerable people from abuse.
- enable staff to identify, and appropriately act on suspicions of abuse.
- provide robust procedures to deal with allegations of abuse.
- help staff to avoid placing themselves in vulnerable positions, either from risk of abuse or risk of unnecessary allegations of abuse.
- to advise staff there is an information app available for mobile telephones which can be downloaded.

1. Policy Statement

Wellcome Care Homes are committed to providing the best possible care for our residents in a safe environment. Abuse can however occur within or outside of the home, when residents are alone or accompanied.

We shall make every attempt to protect our residents from abuse at all times, although there may be times when they are away from the care home., this may prove more difficult. We can however be aware of any physical or psychological changes in our residents which should alert us to a problem. This should be carefully monitored.

It is the responsibility of everyone who witnesses what they regard as possible abuse of a resident to bring the matter to the attention of the appropriate person immediately.

2. Definitions of abuse include:

- Physical abuse includes hitting, pushing, kicking, deliberate infliction of pain, rough or inappropriate handling, misuse of medication and inappropriate use of restraint.
- Sexual abuse includes any sexual act without the consent of the resident, unnecessary touching of private areas of the body and failure to provide privacy for personal activities such as toileting or bathing. Inappropriate sexualised language. Taking of sexually explicit photographs.
- Financial or material abuse includes theft, fraud, misuse of residents' property including benefits, exerting pressure to receive gifts, inheritance or financial transactions and extortion.
- Neglect includes failure to provide adequate food and drink, failure to provide timely help with care needs, denying access to health advice or treatment, failure to address a disability and ignoring a resident's social needs

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- Discrimination includes making unfavourable remarks or jokes about race, sex, sexuality, disability and appearance; using inappropriate names; failure to meet religious, spiritual or cultural needs.

3. Who is at risk of abuse?

Residents may be at risk from staff, other residents, relatives, visitors to the home and members of the public.

4. Actions taken to reduce the risk of abuse by staff:

- Robust recruitment procedures in are in place to help to ensure that suitable staff are employed. Pre employment checks include references, Disclosure and Barring Service (DBS) checks, and checks against the Safeguarding of Vulnerable Adults (SOVA) list. Satisfactory references.
- Staff Induction training includes the topic of protection and abuse.
- A mentoring system is in place to ensure that all newly appointed staff, work initially with another more experienced team member.
- All newly appointed staff work a probationary period of six months to assess their suitability for the role.
- Regular supervision for all staff is provided by a member of the management team, according to the needs of each individual staff member.
- All staff receive regular training on adult protection awareness. An element of abuse/protection is included in the QCF training programme, designed for care assistants.
- A 'Complaint Procedure' is designed to enable anyone to raise concerns easily either with the management team or with appropriate outside agencies.
- We encourage the use of an advocate to act on behalf of the residents who may not have a next of kin or LPA.
- We encourage an open culture of reporting within the home accepting constructive criticism and quickly responding to any issue raised.
- We aim to build positive relationships with residents and their families to ensure good communication and transparency is maintained.

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- In order to protect staff from allegations of financial abuse they are not permitted to handle a patient's money, hold keys or accept gifts.
- Staff will not get involved in any way, in the preparation of a will.

5. Checklist to follow if abuse is suspected:

- Note any suspicious signs and symptoms.
- Observe the suspected abuser.
- Take all reasonable steps to establish the facts as accurately as possible.
- Do not assume abuse or neglect has occurred but report the matter to the manager or the person in charge immediately.
- If the concern is raised about the person in charge, report to the Manager, and if the concern is raised about the manager then take the matter to the R.I.

6. Procedure for staff to follow when concerns are raised:

If an allegation of abuse is made against a member of staff; or if abuse is suspected the person in charge must report immediately to one of the management team.

The person in charge must record the event as an adverse incident immediately and complete a Regulation 60 for CIW.

The manager must report the incident/allegation to the 'Safeguarding Coordinator' for the local authority or Police.

The manager will suspend the person suspected of abuse for their own protection pending an *external* investigation.

7. An *internal* investigation will only commence if requested from the Adult Protection Team

If there is evidence that abuse has occurred, a full internal investigation will be carried out. In the event of this the manager will consider the following:

- Fear sensitivity and confidentiality of the situation for all concerned.
- Risk of intimidation and reprisal.
- Protection and support the abused person.
- Need for protection and support of any witnesses.
- Any requirements or recommendations made by outside agencies.
- To keep the abused person informed and updated throughout.

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If a reassessment of a resident indicates a change in care needs, then the appropriate documentation must be completed. Staff must be alerted to the changes in the planned care.

Ensure that any action plan is monitored and the care is regularly reviewed.

Follow any guidance and recommendations made by any agencies involved in the investigation and the care reviews. This may include reporting to the DBS Adult's barred list, if there is sufficient evidence to suggest that a member of the care team has abused a resident.

Put systems in place to ensure the risks of further abuse is reduced as far as is possible.

8. Advice for residents/representatives

If a resident feels at risk of abuse either by another resident, a visitor or a member of staff you must report the matter to someone immediately.

Speak to a friend, fellow resident, social worker or anyone from an outside organisation if appropriate.

Ask for a meeting with the care home managers.

If a relative/visitor suspects that abuse has occurred, report this immediately to the person in charge of the home and request contact or a meeting with the manager as soon as possible.

Abuse may take the form of violence, offensive language, inappropriate behaviour or interference with personal possessions.

It is the responsibility of the manager to take appropriate action in response.

If you are dissatisfied with the response or actions taken by the manager, then contact the relevant authorities as directed in the 'Complaints Procedure' which is posted in the front foyer to the home.

Review date: March 2023