

Gateshead Youth Council

2024

Safeguarding Vulnerable Adults Policy

Signed:

Role: Chairperson

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Index

Introduction	3	
Policy Aims	3	
Policy Statement	3	
Safeguarding Procedures	5	
Undertaking DBS Checks	5	
Recognising the Signs and Symptoms of Abuse	6	
Responding to People who have Experienced or are Experiencing Abuse	8	
How to respond if you receive an allegation:	8	
Making a Safeguarding Referral		
Managing Allegations Against Staff or Volunteers	9	
Disseminating/ Reviewing Policy & Procedures		
Extremism and Radicalisation		
Female Genital Mutilation		
Roles & Responsibilities of the Designated Safeguarding Lead	11	
Safeguarding Contact Information	12	
GYC Safeguarding Leads & Safeguarding Partners		

Introduction

Policy Aims

This policy aims to enable The Gateshead Youth Council (GYC) to demonstrate its commitment to keeping safe adults at risk with whom it works alongside. It is acknowledged that significant numbers of adults at risk are abused and GYC acknowledges its duty to act appropriately to any allegations, reports or suspicions of abuse.

It is important to have policy and procedures in place so that all staff, including trustees, paid staff, volunteers, sessional staff, agency staff, and anyone working on behalf of GYC, can work to prevent abuse and know what to do should a concern arise. The policy applies to anyone working on behalf of GYC.

Policy Statement

The policy and procedures have been drawn up to enable GYC to:

- Promote good practice and work in a way that can prevent harm and abuse occurring.
- Ensure that any allegations of abuse or suspicions are dealt with appropriately and the person experiencing abuse is supported and
- Stop abuse occurring.

The policy and procedures relate to the safeguarding of **adults at risk**. Adults at risk are defined as individuals aged over 18 who:

- Have needs for care and support (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 are unable to protect themselves from either the risk of or the experience of abuse or neglect (Care Act, 2014).

GYC will:

 Ensure that anyone working on behalf of GYC, is familiar with this policy and associated procedures.

- Work with other agencies within the framework of the Gateshead Safeguarding Adults
 Board Policy and Procedures, issued under Care Act 2014 statutory guidance.
- Act within its data protection policy and will gain permission from service users before sharing information about them with another agency, except where it is clearly judged with reference to statutory guidance that to do so would place the service user at risk of abuse.
- Pass information to the Local Authority when more than one person is at risk. For example, if the concern relates to a worker, volunteer or organisation that provides a service to adults with care and support needs or children.
- Inform service users that where a person is in danger, a child is at risk, or a crime
 has been committed, then a decision may be taken to pass information to another
 agency without the service user's consent.
- Make a safeguarding adults referral to the Local Authority as appropriate (contact details provided at the end of this document);
- Endeavour to keep up to date with national developments relating to preventing abuse and welfare of adults.
- Ensure that the Designated Safeguarding Leads understands his/her responsibility to refer incidents of adult abuse to the relevant statutory agencies (Police/Local Authority).
- Ensure that all staff receive appropriate safeguarding training, which is refreshed annually. The current provision for this is through Gateshead Local Safeguarding Board training, to be recorded and timetabled in the Staff Training Log, and copy certificates passed to the Administration & Finance Officer for filing.

This policy should be read in conjunction with the Gateshead's Multi-Agency Safeguarding Adults Policy and Procedures documents, which are available at:

https://www.gatesheadsafeguarding.org.uk/article/9286/Multi-agency-policies-and-procedures

This policy needs to be read in conjunction with the following policies and procedures:

- Equality & Diversity
- Complaints
- Whistle Blowing
- Disciplinary and Grievance
- Data Protection (GDPR)
- Recruitment and Selection

1. Safeguarding Procedures

GYC is committed to safer recruitment policies and practices for anyone working on behalf of GYC. This includes ensuring references are taken up and providing adequate training on safeguarding adults. It may also entail obtaining an Enhanced DBS check if this is deemed necessary in accordance with current regulations.

The organisation will work within the current legal framework for referring staff or volunteers to the DBS who have harmed or pose a risk to vulnerable adults and/or children.

Information about safeguarding adults and the complaints policy will be available to participants (service users) and their carers/families.

Undertaking DBS Checks

GYC's operations do not currently fall within the scope of "regulated activities" with vulnerable adults that would require a staff member or volunteer to hold an enhanced DBS check.

According to the latest DBS guidance, the regulated activities for vulnerable adults are:

- The provision of healthcare by a healthcare professional or under the supervision of a healthcare professional.
- Providing personal care (e.g. physical assistance with eating or drinking, washing, using the toilet, or dressing);
- Providing social care.
- Providing assistance with their money (e.g. managing banking, paying bills, handling cash, shopping on their behalf);
- Providing assistance with their affairs (e.g. holding Power of Attorney, acting as Independent Mental Health Advocate).
- Providing conveyance to adults for reasons of age, illness or disability to, from or between, where they receive healthcare, personal care or social work.

Further information on regulated activities can be found at:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/216900/Regulated-Activity-Adults-Dec-2012.pdf

Should DBS guidance on regulated activities change, or should GYC's operations change to bring our services within their remit, this policy must be updated immediately, appropriate procedures put in place and prompt action taken to ensure GYC meets its legal obligations.

Recognising the Signs and Symptoms of Abuse

All staff and volunteers must undertake appropriate training and refreshers in Safeguarding; our current provision is to use the certified online training courses provided by Newcastle Safeguarding Children Board, in this case "Safeguarding Adults".

GYC will not be limited in their view of what constitutes abuse or neglect, as they can take many forms, and the circumstances of an individual case will always be considered.

Forms of Abuse include:

Discrimination

Including forms of harassment, bullying, slurs, isolation, neglect, denial of access to services or similar treatment because of race, gender and gender identity, age, disability, religion or because someone is lesbian, gay, bisexual or transgender. This includes racism, sexism, ageism, homophobia or any other form of hate incident or crime.

Domestic Abuse or Violence

Including an incident or a pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse by someone who is, or has been, an intimate partner or family member, regardless of gender or sexual orientation. This includes psychological/emotional, physical, sexual, and financial abuse; so-called 'honour 'based violence, forced marriage or Female Genital Mutilation (FGM).

Financial or Material

Including theft, fraud, internet scamming, exploitation, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

Modern Slavery

Encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.

Neglect and Acts of Omission

Including ignoring medical, emotional or physical care needs, failure to access appropriate health care and support or educational services, and withholding of the necessities of life, such as medication, adequate nutrition and heating.

Organisational (sometimes referred to as Institutional)

Including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in a person's own home. This may range from one-off incidents to ongoing ill-treatment. It can be through neglect or poor professional practice due to the structure, policies, processes and practices within an organisation.

Physical

Including assault, hitting, slapping, pushing, burning, misuse of medication, restraint or inappropriate physical sanctions.

Psychological (sometimes referred to as Emotional)

Including 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 support networks.

Sexual

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

It also includes sexual exploitation, which is exploitative situations, contexts and relationships where the person receives "something" (e.g. food, accommodation, drugs, alcohol, mobile phones, cigarettes, gifts, money) or perceived friendship/relationship as a result of them performing, and/or another or others performing sexual acts.

Self-Neglect

Includes a person neglecting to care for their personal hygiene, health or surroundings or an inability to provide essential food, clothing, shelter or medical care necessary to maintain their physical and mental health, emotional well-being and general safety. It includes behaviour such as hoarding.

Responding to People who have Experienced or are Experiencing Abuse How to respond if you receive an allegation:

- Reassure the person concerned.
- Listen to what they are saying.
- Record what you have been told/witnessed as soon as possible.
- Remain calm and do not show shock or disbelief.
- Tell them that the information will be treated seriously.
- Do not start to investigate or ask detailed or probing questions.
- Do not promise to keep it a secret.

It is not for staff to decide whether or not a suspicion or allegation is true. All suspicions or allegations must be taken seriously and dealt with according to this procedure.

If you witness abuse or abuse has just taken place, the priorities will be:

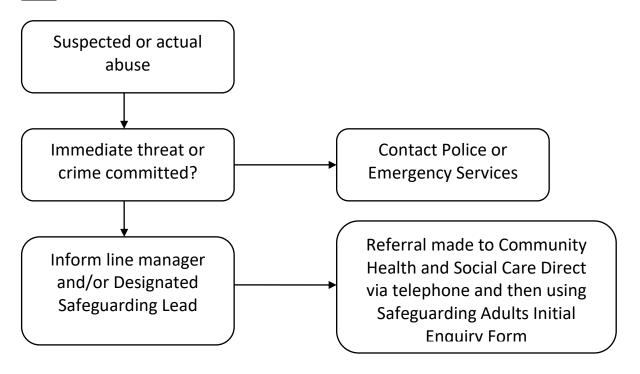
- To call an ambulance if required.
- To call the Police if a crime has been committed.
- To preserve evidence.
- To keep yourself and others safe.
- To inform the **Designated Safeguarding Lead**.
- To record what happened using an incident record form (see appendix). Record the incident on My Concern Safeguarding Software.

All situations of abuse or alleged abuse will be discussed with the Designated Safeguarding Lead. If anyone feels unable to raise their concern with the Designated Safeguarding Lead or feels their concern has not been dealt with appropriately, then concerns can be raised directly with Community Health and Social Care Direct (see Contact details).

Making a Safeguarding Referral

All Safeguarding Adult referrals should be made by telephone initially to the **Gateshead Adult Social Care Direct** team. The phone number is **0191 433 7033**, open 24 hours a day, 7 days a week.

The telephone call should be followed up **in writing** to the Adult Social Care Direct team outlining concerns using a Safeguarding Adults Initial Enquiry Form (formerly the SAMA1 form): https://www.gatesheadsafeguarding.org.uk/article/9180/Report-concerns-about-an-adult



Managing Allegations Against Staff or Volunteers

If anyone makes an allegation of abuse against a member of staff or volunteer:

- The allegation will be recorded on an Incident record form (appendix). Any
 witnesses to the incident should sign and date the entry to confirm it.
- The allegation must be reported to the Community Health and Social Care team. If a
 criminal offence is thought to have occurred, then the police will be informed, and
 GYC will act upon their advice. Any telephone reports to the Community Health and
 Social Care team will be followed up in writing within 48 hours.
- Following advice from the Community Health and Social Care team, suspending the member of staff or volunteer may be necessary pending a full investigation of the allegation.
- If appropriate, GYC will make a referral to the Disclosure and Barring Service.

RECORDING AND MANAGING CONFIDENTIAL INFORMATION

Information about Safeguarding Adults issues should be shared only with those who need to know. For further information, please see GYC's Data Protection policy.

All allegations/concerns should be recorded on an **Incident Record** form and on My Concern Safeguarding Software. The information should be factual and not based on opinions; record what the person tells you and what you have seen and witnessed if appropriate.

This information will be secured in a locked filing cabinet / or encrypted folder in the organisation, depending on the format in which the information is reported. Access to this information will be restricted to the Designated Safeguarding Lead and the Trustee responsible for Safeguarding.

Disseminating/ Reviewing Policy & Procedures

This Safeguarding Adults Policy and Procedure will be clearly communicated to all staff, including trustees, paid staff, volunteers, sessional staff, agency staff, and anyone working on behalf of GYC. The Designated Safeguarding will be responsible for ensuring that this is done.

Extremism and Radicalisation

GYC recognises that some vulnerable adults may be at risk of radicalisation and being drawn into extremism. There are many reasons why a vulnerable person might be at risk from radicalisation, e.g.:

- Feeling alienated or alone;
- Seeking a sense of identity or individuality;
- Suffering from mental health issues such as depression;
- Desire for adventure or wanting to be part of a larger cause;
- Associating with others who hold extremist beliefs.

Signs of Radicalisation

Signs that a vulnerable adult might be at risk of radicalisation include:

- Changes in behaviour, for example becoming withdrawn or aggressive;
- Claiming that terrorist attacks and violence are justified;
- Viewing violent extremist material online;
- Possessing or sharing violent extremist material.

All members of staff are required to complete online training in Prevent Duty as part of their induction training programme, and a record of the training is retained in their personnel file.

If a member of staff or volunteer suspects that a vulnerable is at risk of becoming radicalised, they will record any relevant information or observations on an **Incident Record** form, and refer the matter to the Designated Safeguarding Lead.

Where deemed appropriate, the Designated Safeguarding Lead will contact the Police on the non-emergency number (101) or the anti-terrorist hotline on 0800 789 321. For urgent concerns, the Lead will contact the Police using 999.

Female Genital Mutilation

Under the Female Genital Mutilation Act 2013, it is an offence to:

- To subject a girl or woman to FGM in the UK;
- To assist a girl to perform it on herself;
- For UK nationals or permanent residents to perform FGM abroad;
- Or to assist anyone to perform FGM abroad.

Safeguarding women at risk of harm through FGM poses specific challenges because the individuals or families involved may give no other cause for concern with regard to their responsibilities or relationships. However, there remains a duty for all professionals to act to safeguard women at risk of FGM. Any member of staff or volunteer who has information that a vulnerable adult is potentially or actually at risk of significant harm should immediately inform the Designated Safeguarding Lead, who will inform Adult Social Care services and the police according to their statutory responsibility.

All staff at GYC are required to complete the online training 'Female Genital Mutilation: Recognising and Preventing FGM 'via Virtual College as part of their induction training programme, and a record of this training to be stored on their personnel file.

Roles & Responsibilities of the Designated Safeguarding Lead

The roles and responsibilities of the named person are to:

- Ensure that all staff and volunteers are aware of what they should do and who they should go to if they have concerns that an adult at risk may be experiencing, or has experienced abuse or neglect;
- Ensure that concerns are acted on, clearly recorded and referred to Community
 Health and Social Care Direct or to the allocated social worker/care manager where
 necessary;

- Follow up on any safeguarding adults referrals and ensure the issues have been addressed;
- Manage and have oversight over individual complex cases involving allegations against an employee, volunteer, or student, paid or unpaid;
- Consider any recommendations from the safeguarding adult's process;
- Reinforce the utmost need for confidentiality and ensure that staff and volunteers are adhering to good practices concerning confidentiality and security. This is because it is around the time that a person starts to challenge abuse that the risks of increasing the intensity of abuse are greatest;
- Ensure that staff and volunteers working directly with service users who have experienced abuse or who are experiencing abuse are well supported and receive appropriate supervision;
- Ensure staff and volunteers are given support and afforded protection, if necessary, under the Public Interest Disclosure Act 1998: they will be dealt with fairly and equitably, and they will be kept informed of any action that has been taken and its outcome.

If it is appropriate and there is consent from the individual, or there is a good reason to override consent, such as risk to others, a referral will be made to the Community Health and Social Care Direct team. If the individual experiencing abuse does not have the mental capacity to consent to a referral, a best interest decision will be made on their behalf.

In line with 'Making Safeguarding Personal 'principles, the Designated Safeguarding Lead should try to seek the views of the adult (or an appropriate representative) about what they would like to happen as a result of the concern. This will help to inform the multi-agency Safeguarding Adults Enquiry.

The Designated Safeguarding Lead should refer to the Gateshead (or other local authority) Safeguarding Adults Board multi-agency policy and procedures. It may also take advice from Community Health and Social Care Direct and/or the Safeguarding Adults Unit and/or other advice-giving organisations such as the Police (see useful contacts below).

Safeguarding Contact Information

GYC Safeguarding Leads & Safeguarding Partners

GYC Safeguarding Lead lead is Valerie Ender, who can be contacted on 07758671339 Email: valerie@gatesheadyouthcouncil.org.uk GYC deputy Safeguarding Lead Sue Adams can be contacted on 07880600599. Email: sue@gatesheadyouthcouncil.org.uk

Trustee Safeguarding Lead Sue Adams contact details above.

GATESHEAD:

Adult Social Care Direct

Phone: 0191 433 7033

Email:adultsocialcaredirect@gateshead.gov.uk

Available: 24 hours a day, 7 days a week.

In an emergency - Dial 999

NEWCASTLE:

Community Health and Social Care Direct

Phone: 0191 278 8377

Available: Monday-Friday, 8am-6pm

Out of Hours Service: 0191 278 7878 (for emergency social care needs)

Safeguarding Adults Unit

Phone: 0191 278 8156

Available: Monday – Friday, 9.30am-4pm

Please note that this is an advice service ONLY. All referrals should be raised with

Community Health and Social Care Direct.

Northumbria Police

Phone: 101

Ask for Local Area Police Station or Protecting Vulnerable Persons (PVP) Team.

SAFEGUARDING ADULTS INCIDENT RECORD FORM

Your Name		
Your Position		
Details of Person at Risk Name, DOB, Address (if known)		
Other Relevant Details About Person at Risk Physical & Mental Health, Communication Difficulties, Disabilities etc.		
Details of Concerns, Allegations or Incident E.g. A disclosure made to you by person at risk; disclosure or concerns from a third party; your own concerns.		
Date & Time of Concerns, Allegations or Incident		
Details State exactly what you observed or were told, and how you responded. Provide as much information as possible, including any other witnesses. Where possible, use the person's own words.		
Action Taken So Far (If Applicable)		

Signature......Date......Date....

Signature of DCSM......Date......Date.....