



OP	Safeguarding Policy	1
-----------	----------------------------	----------

		Last review date	Review Frequency	Next review date
Approved by policy committee		12th December 2018	Annually	12 th December 2019
Website (yes/no)	Yes			

Aim of the Policy

The aim of this policy is to set out the:

- a. Principles and values underlying the Scotts Project Trust's (the Trust) approach to the safeguarding of its service users
- b. Ways in which the Trust does this
- c. Steps taken to avoid abuse or harm taking place
- d. Actions taken to deal with abuse or harm if it occurs.

The Trust believes that its service users must be safeguarded from all forms of abuse and harm. It recognises that it must at all times protect its service users and identify and deal with specific instances of abuse or harm if they occur, following the required procedures and best practice guidance.

The Trust always aims for the very best quality of care and will not be satisfied with anything that falls short of this. It takes every possible action to prevent abuse/harm from occurring, but in the event abuse/harm does occur the Trust deals with it as promptly and effectively as possible.

Definition of Abuse

Abuse may consist of a single act or related acts. It may be physical, verbal or psychological, it may be an act of neglect or an omission to act, or it may occur when a vulnerable adult at risk is persuaded to enter into a financial or sexual transaction to which he or she has not consented, or cannot consent.

The Trust recognises that abuse or harm of service users may take the following forms:

Physical abuse or harm- including hitting, slapping, scratching, pushing or rough handling, kicking, misuse of medication, restraining without justifiable reasons, inappropriate sanctions including deprivation of food, clothing, warmth and health care needs and female genital mutilation.

Sexual abuse or harm- including rape, attempted rape, sexual assault, sexual



harassment, sexual acts to which the vulnerable adult at risk has not consented, or could not consent or was pressured into consenting, sexual activity which takes place when the adult is unaware of the consequences or the risks involved and non-contact abuse eg voyeurism, pornography.

Psychological abuse or harm - including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, deliberate denial of religious or cultural needs, isolation or withdrawal from services or supportive networks, forced marriage, failure to provide access to appropriate social skills and educational development training and faith abuse.

Exploitation - including unfairly manipulating someone for profit or personal gain, modern slavery, human trafficking, radicalisation

Financial or material abuse or harm- including theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits

Neglect and acts of omission- including ignoring medical or physical care needs, failure to access equipment for functional independence, failure to provide access to appropriate health and, social care or educational services, withholding of the necessities of life, such as medication, adequate nutrition and heating, failure to give privacy and dignity, professional neglect.

Discriminatory abuse or harm- including race, sex, culture, religion, politics, that is based on a person's disability, age, sexuality, gender identity and other forms of harassment, slurs or similar treatment, hate crimes.

Self-harm-including cutting, burning, biting, head banging and hitting, taking personal risks, neglecting oneself, pulling out hair, substance abuse, eating disorders, over dosing and self-poisoning.

Institutional abuse- including poor management of medical conditions, poor standards of cleanliness, lack of privacy, dignity, respect, support and choices.

Bullying as a form of abuse/harm

All service users have the right to be treated with dignity and respect. Bullying of any vulnerable adult is harmful; it causes distress and can lead to accidents, illness, non-participation, social isolation and low achievements. Bullying is a form of abuse, whatever its origin.

Bullying is defined as any unsolicited or unwelcome act or acts which humiliate, intimidate or undermine the individual involved. The Trust will not tolerate any form of bullying. The Senior Managers will take every step to prevent and eliminate the bullying of any of their service users in line with the Trust's general safeguarding policies and procedures.



When appropriate, every effort will be made to resolve the situation with the parties concerned involving the victim of bullying, the bully or bullies, their families and advocates. It is acknowledged that some service users may engage in bullying behaviour, which will be addressed as any other bullying issue. The priority for the Trust is always to keep a victim safe from further bullying and to reduce the bullying behaviour of the perpetrator if the person is also subject to service provision. The object of this is to protect the victim and to support the bully to modify his or her behaviour.

Staff who observe or can identify that a service user is being bullied by or is bullying another service user should immediately report the matter to their Senior Manager or another Senior Manager, who will investigate the situation with the individuals concerned and their representatives. All bullying will be investigated and addressed using the following formal safeguarding procedures, which are described below.

Identifying Abusers - Those who Harm Adults at Risk

The Trust seeks to protect those who use its services from possible abuse or harm from all sources whilst in the Trust's care, which include:

- a. the staff and management
- b. volunteers and trustees
- c. visiting health and social care practitioners and other official visitors
- d. service users' friends and relatives
- e. people who have contact with service users while they are temporarily outside the Trust's premises
- f. other service users.

The Role and Accountability of Staff in Relation to Abuse

The Trust requires all its staff to:

- a. provide service users with the best possible care
- b. seek to prevent any abusive/harmful action in relation to service users
- c. report anything they witness which is or might be abusive/harmful
- d. co-operate in every possible way in any investigation into alleged abuse
- e. participate in training activities relating to abuse or harm and protection from



harm.

The CEO and Senior Managers are responsible for:

- a. developing the systems and structures within which it is possible to deliver the best possible care
- b. encouraging a culture and ethos that is intolerant of any sort of abuse/harm
- c. producing and regularly reviewing and revising as necessary the policies and procedures to prevent and deal with abuse/harm
- d. operating personnel policies which identify actual or potential abusers, dealing appropriately with each case and, if necessary, excluding any person who has been identified as a potential or actual abuser from contact with services users while the case is investigated.
- e. providing training for staff in all aspects of safeguarding
- f. investigating any allegation of abuse/harm speedily and sympathetically
- g. implementing improvements to procedures if an investigation into alleged abuse/harm reveals deficiencies in the way in which the Trust operates
- h. collaborating with all other relevant agencies in combating abuse/harm and improving the safeguarding and protection of service users
- i. liaising with the relevant Adults' Safeguarding Authority teams and following their guidance and instructions where applicable, including the issues arising from multi-agency involvement.
- j. In the case of either of the regulated services (St Peters Row and Supporting Independence Service) reporting the matter to CQC as required under its regulations.

The Trustees are responsible for: Reporting serious safeguarding incidents to the Charity Commission

Recruitment Practices

The Trust takes great care in the recruitment of staff, and in complying with all relevant legislation, regulations and national guidance, as set out in The Trust's Recruitment Policy and co-operates in all initiatives regarding the sharing of information on care workers who are found to be unsuitable to work with adults at risk. The Trust ensures that all new staff employed and new volunteers have been checked against DBS criminal records and barred lists in line with The Trust's Recruitment Policy and The Disclosure and Barring Service Policy.



Preventing Abuse from Occurring

The Trust is committed to seeking to prevent abuse/harm of service users from occurring, including by:

- a. setting out and making widely known the procedures for responding to suspicions or evidence of abuse/ arm
- b. operating personnel policies which ensure that all potential staff and volunteers are rigorously checked, by the taking up of references and clearance through DBS criminal records and barred list checks, with equivalent checks for staff employed from overseas
- c. incorporating material relevant to abuse/harm into staff training at all levels
- d. maintaining vigilance concerning the possibility of abuse/harm of service users from whatever source
- e. encouraging among staff, service users and all other stakeholders a climate of openness and awareness that makes it possible to pass on concerns about behaviour that might be abusive or that might lead to abuse/harm
- f. devising systems that minimise the risk of abuse of service users by other service users by understanding and dealing appropriately with any form of aggression.
- g. maintaining robust procedures for regulating any contact the staff need to have with service users' property, money or financial affairs
- h. communicating concerns to the appropriate officers of the Local Adults' Safeguarding Authority, and the Care Quality Commission and the Charity Commission in line with current policies and authoritative professional guidance
- i. helping service users as far as possible to avoid or control situations or relationships that would make them vulnerable to abuse or harm.

Identifying Actual or Possible Abuse

The Trust aims to identify any instances of actual or possible abuse/harm involving our service users by all possible means including:

- a. fostering an open and trusting communication structure so that staff, service users and others feel able to discuss their concerns with someone authorised to take action



- b. ensuring that all staff and service users know to whom they may turn to for advice and action if they become aware or suspect that abuse or harm is occurring
- c. encouraging staff to recognise that a commitment to the highest possible standards of care must, when necessary, overrule loyalty to colleagues individually or corporately
- d. making it clear to staff that failing to report incidents or suspicions of abuse is itself abusive and may lead to disciplinary or criminal proceedings
- e. operating systems of management, supervision, internal inspection and quality control that have the potential to reveal abuse or harm where it exists.

Procedures for when abuse has occurred or is alleged to have occurred

If abuse/harm is clearly occurring, has occurred, or is alleged to have occurred, the Trust takes swift action to limit the harm to service users and to deal with the abuse or harm or alleged abuse or harm, as follows.

Initial procedures

1. Staff who have witnessed a situation in which a service user is in actual or imminent danger of abuse/harm, or to whom actual or alleged abuse/harm is reported, must respond appropriately and must ;
 - a. make sure that the service user is safe from further abuse/harm
 - b. assess whether the emergency services are required
 - c. actively listen to the service user or their representative
 - d. offer support and reassurance to the service user
 - e. establish the basic facts of the allegation
 - f. as soon as possible make careful notes which constitute a full record of the nature of the abuse/harm or allegation of abuse/harm and any other relevant information. This should include a note of dates, time and persons present.
 - g. take all necessary precautions to preserve forensic evidence
 - h. immediately report the abuse/harm or allegation of abuse/harm to their



Senior Manager or in the absence of their Senior Manager or where the abuse or harm or allegation of abuse/harm involves their Senior Manager to the CEO or to another Senior Manager.

- i stay calm.
3. Staff must not;
 - a. be judgmental or voice their own opinion
 - b. be dismissive of the concern or ignore the allegation
 - c. investigate or interview beyond that which is necessary to establish the basic facts
 - d. disturb or destroy forensic evidence
 - e. ask leading questions
 - f. make promises including in relation to confidentiality
4. The Senior Manager/CEO must immediately take any further action necessary to provide protection, support or additional care to a service user who has been abused/ harmed or is alleged to have been abused/harmed and, where appropriate, to support the alleged abuser.
5. The Senior Manager/CEO will discuss with the person who has been or is alleged to have been abused/harmed what actions they consider to be appropriate. In some circumstances the service user may request that the information is kept secret. In such cases the Senior Manager/CEO will explain sensitively that staff have a responsibility to refer all allegations of abuse/harm to the Local Adults' Safeguarding Authority. Assurance will be given that the allegation will only be disclosed to the people who need to know about it.
6. Where possible the consent of the person who has been or is alleged to have been abused/harmed will be obtained before sharing personal information with third parties. However, in some circumstances, obtaining consent may be neither possible nor desirable as the safety and welfare of the service user is the priority.
7. The Senior Manager, as designated adult safeguarding lead, will then alert the Care Manager of the victim of the abuse/harm or alleged abuse/harm, and if the perpetrator / alleged perpetrator is a service user, their care manager will also be informed. The Senior Manager will then alert the Local Adults' Safeguarding Authority and follow its procedures and guidance from that point onwards. This includes the completion of a KASAF stage one form and a Regulation 18 notification form.
8. The Senior Manager will then inform the Trustees. Where appropriate, the Trustees will report the incident to the Charity Commission.
9. The Senior Manager must take all reasonable steps to seek to ensure



that there is no further risk of the victim being abused/harmed by the perpetrator /alleged perpetrator.

10. The Senior Manager must ensure that the needs of the victim of the abuse/harm or alleged abuse/harm, including any special or additional care, support or protection or for checks on health or wellbeing, are met at the outset and subsequently throughout the proceedings. Where appropriate, the Senior Manager must also take steps to support the alleged perpetrator.
11. If the perpetrator /alleged perpetrator is a staff member and there is sufficient evidence that abuse/harm has or might have occurred, the Senior Manager will suspend that person from duty in line with the Trust's disciplinary policy. The Senior Manager will receive guidance on the steps to be taken following the Local Adults' Safeguarding Authority strategy meeting, which will be held following the reporting of the abuse or alleged abuse/harm.
12. If the evidence is insufficiently strong to warrant suspension, the staff member, against whom the allegation has been made, will be instructed not to have further unsupervised contact with any service users until the matter is resolved.

Investigating alleged abuse

Usually an investigation will be carried out or led by a member of an external agency in line with the action plan determined by the initial strategy meeting convened by the Local Adults' Safeguarding Authority. However if a Senior Manager, as Designated Vulnerable Adult Protection Lead, is required to carry out an investigation the following guidance should be followed.

1. The appointed Senior Manager as investigating officer, will usually consult the person who has been or who is alleged to have been abused/harmed to hear their account of what has occurred and their views about what action should be taken, involving the service user's relatives or representatives if that is appropriate and in line with the wishes of the service user.
2. The appointed Senior Manager, as investigating officer, is expected to take into account in his or her conduct of the investigation:
 - a. the fears and sensitivity of the person who has been or is alleged to have been abused/harmed
 - b. any risks of intimidation or reprisals
 - c. the need to protect and support witnesses
 - d. any confidentiality or data protection issues



- e. the possible involvement of other agencies, including the Police, Local Adults' Safeguarding Authority and CQC
- f. the obligation to keep the person who has been or is alleged to have been abused/harmed and in specific instances the perpetrator/alleged perpetrator informed on the progress of the investigation.
3. The appointed Senior Manager as investigating officer will assure the person who has been or is alleged to have been abused/harmed that they will be taken seriously, that their comments will, as far as possible, be treated confidentially, although confidentiality cannot be guaranteed, that they will be protected from reprisals and intimidation, and that they will be kept informed of actions taken and of the outcome.
4. The appointed Senior Manager, as investigating officer, will consider whether the person who has been or is alleged to have been abused/harmed needs independent help or representation in presenting their evidence and, in conjunction with other Senior Managers if necessary, will arrange for the appropriate help or support to be made available. The Senior Manager, as investigating officer, will likewise consider the needs of the alleged perpetrator if he/she is a service user.
5. If the person who has been or is alleged to have been abused/harmed expressly states a wish that no further action should be taken, the appointed Senior Manager as investigating officer will consider whether:
 - a. a danger to others exists from not investigating further
 - b. in the light of that assessment it is possible to follow the person's wishes
 - c. in any case precautionary measures should be taken to protect others from the possibility of abuse from the same source.
 - d. The person who has been or who is alleged to have been abused/ harmed will be informed of what is to happen.
6. Where an investigation is instigated, the appointed Senior Manager, as investigating officer, will proceed, as discreetly and confidentially as possible, to look into all aspects of the situation.
7. The investigation will include interviewing the alleged perpetrator the staff involved in the incident up to that point, hearing and assessing evidence from any others who might be in a position to supply information, exploring every other possible source of evidence, maintaining appropriate contact with any other agencies involved, and, if necessary, seeking expert advice on any technical aspects of the situation which are outside the knowledge or expertise available within the Trust.
8. Any staff member from whom evidence is taken will be assured that they



will be dealt with in a fair and equitable manner and informed of their employment, legal and procedural rights.

9. The person who has been or is alleged to have been abused/harmed, and where that person has consented, their relatives and/ or representatives and the care manager will at all times be kept as fully informed as possible of the progress of the investigation.
10. The investigation will be carried out as quickly as possible and the findings presented to the Local Adults' Safeguarding Authority, which will then decide what further action to take.

Following the investigation

1. If it seems from any investigation that on the balance of probabilities abuse/ harm did indeed take place, the Senior Manager will, if the abuser is a staff member, initiate and carry through proceedings according to the Trusts disciplinary policy or, if the abuser is not a staff member, take action to involve other responsible bodies.
2. If abuse/ harm is proved against a staff member, the Senior Manager will initiate appropriate action, which is most likely to be dismissal and referral to the Disclosure and Barring Service to prevent them from being employed further in regulated activity with at risk adults and/or children.
3. Other employment sanctions could apply depending on whether there might have been mitigating or extenuating circumstances. In some cases retraining could be appropriate.
4. The person who has been or is alleged to have been abused/harmed and where consent has been given their relatives and /or representatives will be informed of the outcome of the investigation, of any further action taken or proposed to be taken and will be consulted about whether any redress or apology would be appropriate and helpful to them. Where, in all the circumstances, the relevant Senior Manager deems it to be appropriate, the service user will be asked if they feel safe as a result of the investigation.
5. At all stages of the process, a careful written record will be kept of all actions taken, paying particular attention to the sensitivity of the abused/harmed service user.
6. The Senior Manager will produce a report of the investigation and outcomes and send a copy of this to the CEO and the Trustees. The Trustees will report the incident to the Charity Commission.
7. In the case of either regulated service (St Peter's Row and Supporting Independence Service) the Senior Manager will inform CQC of the outcome, and a copy of the report will be sent to them.



Planning further action

At the end of an incident involving actual or alleged abuse/harm, Senior Managers and the CEO will review what has happened with a view to assessing whether the Trust or its management has been in any way culpable, ineffective or negligent, learning lessons for the way the Trust should operate in the future, and passing on any appropriate information to other agencies.

If necessary the Trust's policies, procedures and training arrangements will be modified in response to any material that has emerged from the incident or the investigation. The Trust might carry this out with advice and guidance from the Local Adults' Safeguarding Board.

Contacts and sources of assistance

<p>Adult Safeguarding Authority Kent Adult Social Services Brenchley House, County Hall Maidstone, Kent, ME14 IRF Tel: 03000 416161</p>	<p>Local Authority Safeguarding Unit Montague House, 9 Hanover Road, Tunbridge Wells Kent ,TN1 1EY Tel: 01892 515045</p>
<p>Police 1 Pembury Road, Tonbridge, Kent, TN9 2HS. Tel: 101 and ask for the adult protection officer. Or 01622 690690</p>	<p>The Care Quality Commission Citygate ,Gallowgate Newcastle upon Tyne, NE1 4PA. Tel: 03000 616161</p>



	Advocacy for All 241 Main Road, Sidcup, Kent. DA14 6QS. Tel: 020 8300 9666
Respond 3 rd Floor 24-32 Stephenson Way, London. NW1 2HD. Tel: 0207 383 0700	

Record Keeping

The Trust ensures that all details associated with allegations of abuse/harm are recorded clearly and accurately. The records are kept securely with due regard to the principles of General Data Protection Regulations and the Data Protection Act 2018 and the Trusts rules on confidentiality are carefully followed. Reports are made as required to CQC and other Safeguarding agencies involved.

Referrals to DBS Barred Lists

In the event of having evidence that a staff member in question is guilty of misconduct by harming or putting at risk of harm a service user or other person at risk, during the course of their work, the Trust will comply with its legal requirement to refer a member of staff to the DBS barred lists following the procedures issued by the DBS and in line with The Trust's Disclosure and Barring Service Policy.

Training

All members of staff receive regular Safeguarding training. Training in the recognition of signs of abuse or harm is integral to staff carrying out their responsibilities under this policy. Senior managers, the CEO and representatives of the Trustees will receive further training in leading Adult Safeguarding.



Outside Contractors, Groups and Organisations

The Trust would prefer all contractors, groups, and organisations that use its premises or services, or organisations that are funded by the Trust to provide services, to have an acceptable Safeguarding Policy in place and in any event, as a minimum requirement, all such organisations must accept in writing and apply the standards as outlined in this policy.

Policy Statement

This policy is written to show the commitment of the Trust to protect its service users from abuse or harm in line with its legal requirements and best safeguarding practice guidance. It reflects in particular:

Regulation 13: Safeguarding Service Users from Abuse and Improper Treatment of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

The statutory guidance for the Care Act 2014 (Chapter 14: Safeguarding), which describes the duties and responsibilities of local authorities and its partner organisations to protect adults with care and support needs from abuse, neglect and other sources of harm.

More specifically, it also reflects the Multi Agency Adult Protection Policy Protocols and Guidance for Kent and Medway (Revised April 2016)

The Trust shares and is committed to the vision of the local safeguarding authority, which is to empower and protect adults who are at risk of abuse and neglect, as defined in legislation and statutory guidance.

The Trust understands that the local safeguarding arrangements and development follow government strategy based on:

- Empowerment- supporting people to make decisions and have a say in their care
- Protection- Support and representation for those in greatest need
- Prevention- It is better to take action before harm occurs
- Proportionality- Safeguarding must be built on proportionality and a consideration of people's human rights



- Partnership- Local solutions through services working with their communities
- Accountability- Safeguarding practices and arrangements should be accountable and transparent.

The policy and accompanying procedures are produced in line with local Safeguarding Authorities' guidance and procedures.

The Trust seeks to work in line with the Local Adults' Safeguarding Authority policies and procedures and guidance from the Care Quality Commission (CQC). It recognises

the importance of government and national guidance *and* seeks to comply in all respects with current safeguarding legislation and regulations.

The Trust recognises that service users who lack mental capacity to consent to care and support are particularly vulnerable to abuse, harm and exploitation. Accordingly, it is mindful of the need to follow the principles and practice guidance that has accompanied the Mental Capacity Act 2005. These apply particularly to investigations of possible abuse or harm in which it is important to seek means of ascertaining the experiences and views of any victim or indeed alleged perpetrator who might lack capacity, e.g. by seeking the services of independent advocates.

The Trust recognises that anyone who might need the help of an independent advocate when engaged in safeguarding enquires and plans is entitled to one (as legislated for by the Care Act 2014). It will always support a person to have advocacy help where required in line with the Trusts Advocacy Policy.

Whenever the Trust identifies that a service user living at St Peter's Row is being, or risks being, deprived of their liberty, the Registered Manager will apply to the local authority for authorisation for the deprivation of liberty.

Where a service user receives care / support from the Supporting Independence Service, which has been arranged by the Local Authority, the Court of Protection must authorise the deprivation of their liberty. See Appendix 1 for The Deprivation of Liberty Safeguards.

Clarification of terms used

1. In this policy reference is made to 'service user' which for the purpose of this policy refers to any person in receipt of services provided by the Trust.
2. Reference is made to the 'Senior Manager.' For clarification this includes the



term 'Registered Manager' which is used for the Senior Managers of the CQC registered services; that is residential care at St Peter's Row, and Supporting Independence Service which is delivered at the Oaks and Willows. The Development Centre Senior Manager is an unregistered position.

3. Reference is made to 'Manager' which for the purpose of this policy refers to any other manager employed by the Trust.
4. Reference is also made to 'staff' which for the purposes of this policy refers to everybody who works in a paid or voluntary capacity for or on behalf of the Trust
5. In each service the Senior Managers are the Designated Adult Safeguarding Leads and the team leaders at St Peter's Row and Supporting Independence Service and the Senior Support Worker at the Development Centre are the Deputy Adult Safeguarding Leads.
6. Reference is made to 'the CEO' which for the purposes of this policy refers to the Chief Executive Officer employed by the Trust. The C.E.O is a Designated Adult Safeguarding Lead.

Principal Care Quality Commission related legislation relevant to this Policy.

- 1) Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Part 3)- Regulation 13: Safeguarding service users from abuse and improper treatment**
- 2) Care Quality Commission (Registration) Regulations 2009 (Part 4) – Regulation 18**



Appendix 1

The Deprivation of Liberty Safeguards

St Peter's Row

Whenever the Trust identifies that a service user is being, or risks being, deprived of their liberty, the Registered Manager will apply to the local authority for authorisation for the deprivation of liberty.

Anyone with a concern, for example, a family member, can apply to the Local Authority to trigger an assessment if they have asked the Trust to apply for an authorisation but it has not been done.

Where the Local Authority approves the planned care it will grant an authorisation. In such cases, a representative will be appointed to support the service user and look after their interests.

The Trust, in partnership with the local authority, must then:

- make regular checks to see if the authorisation is still necessary
- remove the authorisation where it is no longer necessary
- provide the person who has an authorisation and their representative with information about the authorisation and their rights and entitlements

Where conditions are attached to the authorisation issued, for example, steps to be taken to keep contact with family or to ensure cultural or faith-based needs are met, then the Trust will ensure that they are.

The Supporting Independence Service.

Where a service user receives care / support from the Supporting Independence Service, which has been arranged by the Local Authority, the Court of Protection must authorise the deprivation of their liberty.

Anyone who feels that a deprivation of liberty is required can ask the Local Authority to seek authorisation from the Court of Protection.