



MEDTEMPS

SAFEGUARDING ADULTS AND CHILDREN

Medtemps LTD believes that Safeguarding adults is very important and that everyone should have the right to live a life free of harm and abuse. We also take a zero-tolerance approach to abuse and neglect. When abuse does take place, it must be dealt with swiftly, effectively and proportionately, ensuring the adult at risk retains as much control of the decision-making as possible.

Medtemps LTD will protect adults at risk by:

- Having a zero tolerance approach to abuse and neglect.
- Stopping or reducing the risk of abuse or neglect
- Ensuring that candidates who pose a risk of abuse are not recruited
- Supporting adults at risk
- Planning and monitoring services around each vulnerable service user
- prioritising actions to protect adults at risk from abuse
- recognise and reporting abuse and neglect
- ensuring that all locums are aware on how to deal with suspicion of abuse in a timely manor
- Managing challenging behaviour in positive ways and only using restraint in clearly defined circumstances and when it is safe and necessary to do so
- Managing incidents, accidents and safeguarding concerns proportionately, consistently and promptly and, where required, investigating them thoroughly;
- continually improve the protections in place in respect of adults at risk
- Ensuring that all staff receive management supervision that gives them the opportunity to reflect on their practice in relation to safeguarding
- Working effectively with partner organisations, with due regard for confidentiality;

Contractual obligations and local protocols

Medtemps LTD is aware that different commissioning authorities are likely to have their own safeguarding protocols. Based on this Medtemps LTD will ensure that all candidates are notified of this and that they comply with all processes and trainings etc. all candidates will be briefed on safeguarding protocol and would be provided with a copy upon request.

Abuse

Abuse is an act of harm or distress caused to individuals, which may be:

- A single or repeated act
- An act of neglect or a failure to act
- Multiple acts – for example where a person is being neglected and financially abused

Abuse can take place anywhere and may be:

- **Physical abuse** – in appropriate physical actions including assault, hitting and pushing.



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- **Domestic violence-** including threatening behaviour, violence or abuse (physical, sexual, financial or emotional) this would be between adults who are or have been intimate partners or family members regardless of gender or sexuality.
- **Sexual abuse-** this includes direct or indirect involvements of the vulnerable adult in sexual activity or relationships which they do not want or have not consented to. Or they cannot understand and lack the mental capacity to be able to give consent to. Or have been forced into as the other person is in a position of trust, power or authority. This could also include cases where the adult at risk has been forced into sexual activities.
- **Psychological abuse-** this could include actions that harm the effects on the person's emotional health including; mental distress, denial of basic human rights, such as self-expression, privacy and dignity. Undermining the adult at risk's self – esteem and their choices. Psychological abuse is the wilful infliction of mental suffering on an adult at risk by a person in a position of trust and power. It could include; Threats of harm or abandonment, deprived of contact, Humiliation, blaming, controlling, intimidation, coercion and bullying.
- **Financial or material abuse-** financial abuse is a criminal offence, including the use of a person's property, assets, income or any resources without their informed consent or authorisation. This includes theft, fraud, exploitation, pressure in connection with wills, inheritance or financial transaction is also seen as financial abuse. Misuse of property, possessions or benefits and enduring power of attorney, lasting power of attorney or appointeeship is also seen as financial abuse.
- **Modern slavery** - An Act to make provision about slavery, servitude and forced or compulsory labour and about human trafficking, including provision for the protection of victims; to make provision for an Independent Anti-slavery Commissioner; and for connected purposes.
- **Discriminatory abuse-** exists when values, beliefs or culture result in a misuse of power that denies opportunity to some groups or individuals. It can be a feature of any form of abuse of an adult, but can also be motivated because of age, gender, sexuality, disability, religion, class, culture, language, race or ethnic origin
- **Organisational abuse-** Organisational abuse is the mistreatment or abuse or neglect of an adult at risk by a regime or individuals within settings and services that adults at risk live in or use, that violate the person's dignity, resulting in lack of respect for their human rights.
- **Neglect or acts of omission-** person with responsibility for the care of an adult at risk fails to provide that care to the expected standard. This could include ignoring medication or physical needs, failing to allow access to services based on health, social care and educational services. Unintentional neglect could include carers not understanding the person's needs, not knowing about available services or their own needs prevent them from being able to give the care the person needs.



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- **Self-neglect-** is a behavioural condition in which an individual neglect to attend to their basic needs, such as personal hygiene, appropriate clothing, feeding, or tending appropriately to any medical conditions they have.

Adult at risk and Consent

Adult at risk is an individual aged 18 or above who needs care and support and is unable to protect themselves against abuse or neglect. It's always essential to consider whether the adult at risk can give informed consent.

In principle, if an adult at risk who has mental capacity does not want any action taken, their wishes should be respected, **but** there are two key exceptions to this, namely where:

- There is a duty of care to intervene, for example, a crime has been or may be committed.
- There is a public interest, for example, not acting will put other adults or children at risk.

Enquiry

An enquiry establishes whether any action needs to be taken to stop or prevent abuse or neglect and, if so, what action and by whom the action is taken.

- **Enquiry Lead** The agency that leads an adult safeguarding enquiry. This will often be the local authority safeguarding board – refer to the local safeguarding protocols file.
- **Enquiry Officer**
The member of staff who undertakes and coordinates an enquiry.
- **SAM (Safeguarding Adults Manager)**
A SAM is the person who manages, makes decisions, provides guidance and has oversight of safeguarding concerns that are raised to a local authority.

Registered managers

Each registered manager is the person responsible for dealing with any safeguarding concerns in any branch for which they are registered, to the extent that this aligns with any local safeguarding protocols in place.

If further support is needed, the ultimate responsibility for safeguarding matters lies with the group safeguarding lead, Mahya Damigah (clinical governance manager).

All employees

All employees having contact with service users or line management responsibility for such employees must:

- Recognise the signs and symptoms of possible abuse and take part in ongoing trainings.



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- Ensure immediate safety and protection of the adult at risk
- Adhere to this policy and procedures and know their role and responsibility under it.
- Act in timely manor
- Be willing to make a report to the police where needed and if a crime has been committed, act to preserve the evidence.

- Inform line manager and seek advice and support from the local authority and colleagues.
- Know how to make a direct referral according to local safeguarding protocols (if specking to the manager will cause delays)
- Make clear and factual records of any concerns they have, and the action taken.
- Understand their obligation to put the best interests of service users over all other interests when it is known or suspected that they are being abused;

Managers

Managers must:

- Provide leadership in respect of safeguarding practice, setting an example to those they line manage;
- Ensure that alleged victims of abuse are made safe;
- Ensure that any employee who may have caused harm is not in contact with service users or others who may be at risk (e.g. whistle-blowers);
- Ensure that appropriate information is provided in a timely way;
- Know what services are available and how to access help and advice for the adult at risk;
- Make staff under their line management aware of their duty to report any allegations or suspicions of abuse to their line manager, or if the line manager is implicated, to another responsible person or directly to the local authority, and that they know how to do this;
- Operate and facilitate safe recruitment practices and routinely take up and check references;
- Fulfil their legal obligations in respect of the Disclosure and Barring Service;
- Adhere to and operate within the group's whistle-blowing policy and support staff who raise concerns;
- Meet their responsibilities under relevant national social care regulations in respect of safeguarding adults at risk;
- Be familiar with and ensure that agreed safeguarding procedures are evidenced in practice in the services under their control;
- Make safeguarding referrals where appropriate in accordance with locally agreed protocols;
- Support employees as appropriate during any safeguarding process;
- Take part in ongoing training in safeguarding practice and ensure that staff receive such training as well;
- Co-operate with other relevant local organisations on matters relating to abuse and protection, recognising that safeguarding is everyone's responsibility



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- Understand the implications of any investigations into their own conduct concerning possible abuse of service users;
- Understand the implications of being found guilty of misconduct by causing harm or injury to service users or putting them at risk of being harmed or injured.

Safeguarding protocols file

Medtemps LTD will maintain a local safeguarding file, which must be accessible to all staff and must include the following information:

- The contact details of the appropriate adult safeguarding referral point
- A copy of this policy and its procedures;
- Any agreed local protocols and procedures.

Training for front-line staff and managers

All Medtemps LTD locums will receive training in their obligations under this policy during induction and at least annually thereafter. As a minimum, training will address:

- Preventing abuse and neglect;
- Indicators of abuse and neglect;
- Responding appropriately to suspected, alleged or actual abuse or neglect; and
- Reporting suspected, alleged or actual abuse or neglect.

Training regarding adult safety is a requirement as part of the registration process for Medtemps LTD and all candidates are unable to work without this training.

Recruitment

Strategies for safer recruitment of staff, including vetting requirements, are addressed in a separate policy on recruitment and selection.

Immediate action in all cases

The employee must:

- Assess the immediate risk and act to ensure that the adult is in no immediate danger;
- Where emergency medical treatment is needed, dial 999 for an ambulance;
- If a crime has been or may have been committed, avoid disturbing or moving articles that could be used in evidence, and secure the scene, e.g. by locking the door to a room;
- If possible, make sure that others are not at risk

Where the adult at risk makes a disclosure

If an adult at risk tells an employee that they are being abused or are at risk of abuse, the employee must:



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- Assure them that they are taking them seriously;
- Listen carefully to what they are saying and get as clear a picture as possible, but avoiding asking too many questions at this stage;
- Never promise complete confidentiality. They should explain that they have a duty to inform their manager and that their concerns may have to be shared with others who could have a role in helping to protect the adult at risk;
- Reassure them that they will be involved in decisions about what will happen;
- Explain that steps will be taken to protect them from further abuse;
- If they have specific communication needs, provide appropriate support and information;
- Avoid being judgemental or jumping to conclusions.

Making a record of a crime

You must consider the below:

- The date and time of the incident
- Where there any witnesses
- The appearance and behaviour of the adult at risk, including any injuries
- Exactly what the adult at risk said,

sexual abuse

priority is to meet the urgent medical and welfare requirements of the adult at risk. Employees should:

- Preserve any potential forensic evidence, and record word for word the disclosure made by the adult at risk;
- Note that any sexual activity that is not freely consented to is criminal and must therefore be reported immediately to the police before any internal investigation/interview.
- Note that sexual relationships or activity between staff and a service user are always abusive and can lead to disciplinary proceedings as well as criminal proceedings.
- There may be safeguarding adults' referrals that involve sexual innuendo or remarks that will not result in a criminal investigation; however, all referrals that indicate any form of sexual abuse require a risk assessment, intelligence gathering and appropriate information sharing with relevant partners.

Raising the concern

The employee should inform their line manager immediately of their concern (or, outside normal office hours, the manager on duty).

If the employee is concerned that their line manager has abused an adult at risk, they should contact a senior manager in the organisation or the Duty Officer at the local authority.



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In the unlikely event that the employee cannot contact their line manager and there is a high-risk situation or where the employee has already raised their concerns with a line manager and no action has been taken, the employee has the authority to refer the matter directly to the Adult Safeguarding referral point in line with local protocols.

Action by the manager receiving the concern

The manager should decide without any delay on the most appropriate course of action, they should:

- an immediate evaluation of the risk to the adult at risk;
- Take any further reasonable and practical steps to safeguard the adult at risk;
- Consider referring to the police if a crime is suspected (if they have not already been called);
- Arrange any necessary emergency medical treatment where this has not already been done (for offences of a sexual nature, police advice should be sought);
- Refer the matter to the local authority Emergency Duty Team if an immediate protection plan is needed;
- Refer the matter in any case to the local authority, in accordance with the local safeguarding protocols;
- Arrange for a member of staff to attend to the person causing the harm if they are also an adult at risk.
- Make sure that other service users are not at risk.
- They may also speak to the adult at risk in a safe and private setting. Giving them information about the safeguarding adults process and how it could help them., informing them how they will be kept secure and informed.

Making a safeguarding adults referral

The line manager is able to make a referral if they believe that the adult at risk has the capacity to make their own decisions about their own safety and wants this to happen. Or the adult at risk has been assessed and is unable to make a decision about their own safety.

A crime may have been committed against the adult at risk and it would be in their best interest if a referral was made. This may be because the adult at risk is at high risk of abuse etc.

Not making a safeguarding adults referral

As the manager you should not make a referral if:

- The service user has capacity to withhold consent and does not want a referral to be made
- There is no vital interest in making a referral
- There is no public interest in referring



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If a decision is taken not to refer, a clear record must be made of the concern, the adult at risk's decision and of the decision not to refer, with reasons. A record should also be made of what information and advice the adult at risk was given. The records should be included in the safeguarding records file.

Repeated allegations

All allegations of abuse should be taken seriously, regardless of whether the adult at risk (or another person) has made repeated allegations that have been investigated and are unfounded. Each allegation must be responded to and documented under these procedures.

Where repeat allegations are made by someone other than the adult at risk, there is no foundation to the allegations and further investigation is not in the interests of the adult at risk, procedures for dealing with multiple unfounded complaints apply.

Supporting employees after referral

- an employee who raises a safeguarding concern;
- Supporting relevant employees to contribute to a safeguarding adults process;
- Ensuring that any employees delivering a service to the adult at risk are kept up to date on a need-to-know basis and do not take actions that may prejudice the investigation.

Statutory notification

In England, adult safeguarding cases that have been referred must be notified to the CQC – a form is at http://www.cqc.org.uk/publications.cfm?fde_id=16215

In Northern Ireland, any allegation of abuse by an employee or any suspected or actual abuse that has been reported to the police must be notified to the RQIA without delay (and in any event within twenty-four hours).

In Wales, any incident reported to the police or which causes serious injury to a service user must be notified to the CSSIW.

Outcomes and closure

An adult safeguarding process may be dropped at any time with no need for further action. Otherwise, once a safeguarding investigation (and usually a case conference) has taken place, the lead agency will reach a conclusion on the outcome of the case. This outcome should be fed back to the alerting manager and recorded.

Different types of outcome may include:

Not substantiated -Where it is decided that the evidence does not suggest that abuse or neglect have occurred, the case may be said to have not been substantiated and is therefore closed.



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Not determined or inconclusive- In some instances, a case cannot proceed because of lack of evidence, but the investigating body may feel that it ought not to conclude definitively that there was no abuse or neglect. In such cases, they may reach an outcome that the investigation was inconclusive.

Substantiated or partially substantiated - Where it is decided that the evidence suggests that abuse or neglect have occurred, the case may be said to have been substantiated (or partially substantiated where only certain allegations are upheld).

Notification of closure -If a case has been referred to the lead agency, but after a period of three months there has been no notification of the outcome of the case, the manager should seek further information from the relevant officer.

Disciplinary action- Abuse or neglect of an adult at risk is gross misconduct for the purposes of the group's disciplinary policy and procedure. Any employee suspected of abusing or neglecting an adult at risk should therefore face disciplinary action and, where the abuse or neglect is substantiated, dismissal.

DBS referrals- The Safeguarding Vulnerable Groups Act (SVGA) 2006 places a duty on employers of people working with children or vulnerable adults to make a referral to the DBS where a person has been dismissed or otherwise removed from working with children or adults at risk (or would or may have if the person had not left or resigned etc.)

Making a referral

The process and forms for making a referral are detailed at <https://www.gov.uk/government/publications/dbs-referrals-form-and-guidance>.

Adult safeguarding Position Report (Northern Ireland)

In line with regional guidance, group companies in Northern Ireland are required to produce an annual Position Report on adult safeguarding. A report will be written in respect of each operating company by the regional management team with the support as required of local safeguarding champions and the Group Safeguarding Lead. The report will offer an up to date summary of adult safeguarding arrangements and activity in the preceding twelve months, highlighting any cases and any resulting organisational learning.

Medtemps LTD will put in place arrangements to audit compliance with this policy and its procedures – refer to separate quality assurance policy.

Further information and advice

In the first instance, managers and employees can seek advice on safeguarding issues from the safeguarding lead. Further information is also available from:

- Action on Elder Abuse (www.elderabuse.org.uk)
- Age UK (www.ageuk.org.uk)



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- Disclosure and Barring Service (DBS) (www.gov.uk/government/organisations/disclosure-and-barring-service)
- Social Care Institute for Excellence (www.scie.org.uk)