



Daughters of Charity (Republic of Ireland)

Safeguarding Adults (Vulnerable Persons) Policy & Procedures

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Policy and Procedure Authorisation

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Foreword

"You are the light of the world. A city set on a hill cannot be hidden" (Mt 5:14). Our Lord Jesus Christ calls every believer to be a shining example of virtue, integrity and holiness. All of us, in fact, are called to give concrete witness of faith in Christ in our lives and, in particular, in our relationship with others.

Pope Francis

Vos Estis Lux Mundi

7th June 2019

*To ensure a culture of inclusion, transparency and openness
throughout the
Irish Province of the Daughters of Charity
this Safeguarding Adults (Vulnerable Persons) Policy and Procedures
will be disseminated and its implementation supported
by the provision of relevant education and training*

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SAFEGUARDING ADULTS (VULNERABLE PERSONS) POLICY & PROCEDURES

1. INTRODUCTION

The Daughters of Charity have a special care for the Vulnerable Persons among us, imitating the gentleness of Christ our Redeemer who ‘did not break the bruised reed’ (Is. 42:3). We recognise the right of Vulnerable Persons to live their lives free from any form of abuse. As a Congregation we recognize our moral and legal obligation to protect Vulnerable People within our Congregation and in our ministries from any form of abuse. Procedures in this Policy provide clear guidance on how we relate to Vulnerable Persons to prevent abuse happening.

The Daughters of Charity are an International Congregation, and this policy is to be interpreted and applied in accordance with the relevant legislation of each jurisdiction in which we reside. However, while upholding the importance of the guidelines that support this policy, they must be applied in the context of a caring and humane response to the needs of Vulnerable Persons. To ensure that our Vulnerable Persons Policy is robust and comprehensive we have formulated it around an eight-standard framework¹.

2. STATEMENT OF POLICY

As Daughters of Charity we have a special care for the Vulnerable among us. We recognise and support the right of Vulnerable Persons under our care to live their lives free from any form of abuse irrespective of where it occurs or who is responsible. We will respond appropriately to all concerns, suspicions and allegations of abuse raised with us. We accept all civil and ecclesiastical requirements governing how we should treat Vulnerable Persons, and we commit ourselves to complete compliance with the policy set out here.

This Policy and Procedures has been developed in line with the Health Information and Quality Authority (HIQA) and the Mental Health Commission (MHC) National Standards for Adult Safeguarding 2019, the HSE Final Draft Adult Safeguarding Policy 2019 (yet to be implemented), the HSE Safeguarding Adults at Risk of Abuse National Policy and Procedures 2014, as well as legislation related to safeguarding.

As a Congregation, we accept and recognise our responsibilities to inform ourselves of the issues that cause harm to adults and to establish and maintain a safe, person-centred environment. We will strive to safeguard adults at risk of abuse and will report concerns of abuse in line with best practice and national policy requirements.

In his Apostolic Letter “Vos Estis Lux Mundi” Pope Francis stresses the importance of protecting vulnerable people and putting in place “concrete and effective” actions that involve everyone in the Church, to ensure the effectiveness of the Church’s mission.

We accept all civil and ecclesiastical requirements governing how we should treat adults, and we commit ourselves to compliance with the policy set out here.

¹ See Appendix 1

3. SCOPE AND PURPOSE OF POLICY

The **scope** of this Policy is broad-ranging and in practice it will be implemented via a range of Procedures. This Policy applies to all Sisters of the Congregation, Employees and Volunteers in our places of Residence and Ministry who care for Vulnerable Persons.

The **Purpose** of this Policy is to help protect Vulnerable Persons from harm by:

- Setting out the Principles and Procedures which must underpin all our contact with them
- Providing a framework for how our members, staff and volunteers should relate to members of the Congregation who are Vulnerable in one or more recognised ways
- Creating a climate in which all our members may live in mutual respect and where differences in strengths and vulnerabilities are accepted.

4. PRINCIPLES AND VALUES UNDERPINNING THIS POLICY

We respect the rights and entitlement of Vulnerable People in every aspect of their lives, especially in the following key areas:

1. **The right to live in safety:** this entails being free from abuse or fear of abuse by others.
2. **Access to information and knowledge:** Vulnerable Persons are entitled to information allowing them to make informed choices.
3. **Choice:** Vulnerable Persons should have opportunities to choose independently from a range of options.
4. **Confidentiality:** there must be appropriate management of sensitive information about Vulnerable Persons.
5. **Consent:** Vulnerable Persons must be supported in making their own decisions, while acknowledging that gaining consent depends on the capacity of the person to understand and accept the issue on which consent is being sought.
6. **Dignity and Respect:** Vulnerable Persons must be given the same respect and dignity as other people.
7. **Fulfilment:** Vulnerable Persons should have the opportunity to engage in activities enabling them to fulfil their ability and potential.
8. **Independence:** Vulnerable Persons should have as much control as possible over their lives while being safeguarded against unreasonable risks.
9. **Privacy:** A Vulnerable Person must be free from all unnecessary intrusion into their affairs. A balance is maintained between the individual's safety and the safety of others.

5. KEY DEFINITIONS

The majority of adults can protect themselves and may simply need advice or guidance. Others may require support to protect themselves and require plans to reflect actions which reduce the risk of potential abuse. A minority of people cannot protect themselves adequately from abuse

and will require an additional protection. Safeguarding should also be viewed as responding to concerns to prevent abuse from occurring.

As Daughters of Charity we recognise that there are a number of adults who may be described as being "at risk of abuse".

Adult at Risk of Abuse: For the purpose of this policy the definition of an adult "at risk of abuse" is aged 18 years or over, who is:

- At risk of experiencing abuse, neglect, or exploitation by a third party and
- Lacks mental or physical capacity to protect themselves from harm at this time in their lives.

Abuse: Abuse is a single or repeated act, or omission, which violates a person's human rights or causes harm or distress to a person. For the purposes of this policy, abuse is understood to mean abuse by a third party.

Harm: The impact of abuse, exploitation or neglect on the person. Harm arises from any action, whether by a deliberate act or an omission, that may cause impairment of physical, intellectual, emotional, or mental health and wellbeing.

These definitions are aligned with the Final Draft HSE Adult Safeguarding Policy (2019) which is due to be implemented.

6. CONSENT AND CAPACITY

It is important that Daughters of Charity, employees and volunteers understand the issues of consent and capacity in order to establish an individual's ability to give meaningful consent.

Consent is a clear indication of a willingness to participate in an activity or to accept a service. The person may signal consent verbally, by gesture or in writing. Decisions with more serious consequences will require more formal consideration of consent and appropriate steps should always be taken to ensure that consent is valid.

The consent of an adult is considered valid **ONLY** if:

1. He/she has the capacity to consent, i.e. he/she can understand and weigh up the information needed to make the decision
2. Sufficient information has been given to him/her, in an appropriate way, on which to base the decision
3. Consent has been given on a voluntary basis that is free from coercion or negative influence

If any of these three factors is absent, consent cannot be considered to be valid.

No other person such as a family member, friend or carer (and no organisation) can give or refuse consent on behalf of an adult who lacks capacity to consent unless they have formal legal authority to do so.

Any doubts or concerns about whether the consent of a person is valid, or whether he/she has the capacity to consent, they should bring this to the attention of the Provincial Leader, who will seek professional advice and consult with the relevant statutory authorities if there are safeguarding concerns.

7. THE ASSISTED DECISION MAKING (CAPACITY) ACT 2015

The Assisted Decision-Making (Capacity) Act 2015 was signed into law on the 30th of December 2015. The Act reforms Ireland's Capacity legislation which has been in place since the 19th century. It establishes a modern statutory framework to support decision-making by adults who have difficulty in making decisions without help.

Once the Act is commenced in its entirety, it will impact on the approach to consent and capacity and this policy will need to be reviewed and updated in line with the phased commencement of the Act.

The Act changes the law from the current all or nothing status approach to a flexible functional definition, whereby capacity is assessed only in relation to the matter in question and only at the time in question. If a person is found to lack decision-making capacity in one matter, this will not necessarily mean that s/he also lacks capacity in another matter. The Act recognises that capacity can fluctuate in certain cases.

The Decision Support Service is set up within the Mental Health Commission to support decision-making by and for adults with capacity difficulties. The Director of the Decision Support Service will supervise and handle complaints against decision-making assistants, co-decision makers, decision-making representatives, attorneys of enduring powers and designated healthcare representatives. Codes of practice for specific groups will promote awareness of the legislation among the general public.

8. CONFIDENTIALITY AND ITS LIMITATIONS

Sisters, employees and volunteers should treat all information relating to concerns, allegations or suspicions around the abuse of an Adult, as confidential. This information should only be communicated on a need-to-know basis and, in most circumstances, with the consent of the Adult.

However, Sisters, employees and volunteers should be clear that in circumstances where they have concerns about an individual's safety and welfare, or the safety of others, they should pass on information, in line with this policy and procedure, which they may have been told in confidence.

All records relating to issues, concerns or allegations of a safeguarding nature will be maintained and stored securely.

9. SHARING INFORMATION WITH STATUTORY AGENCIES

Data protection legislation including the General Data Protection Regulation (the GDPR) and the Data Protection Act 1988 to 2018 (together the "Legislation") provide rules which apply to the collection, use and processing of personal information concerning individuals ("data subjects").

In adult safeguarding, situations arise where the sharing of information does not always require consent to process the personal data of the adult. In these situations, certain conditions are met and there is a legal basis for processing such personal data.

A person raising a safeguarding concern should, as appropriate, be informed that disclosures of information to others, including An Garda Síochána and the HSE, can occur where certain considerations pertain including situations where:

- An adult at risk is the subject of repeated abuse
- The risk of further abuse exists
- There is reason to believe that a crime may have been committed
- There is a risk of abuse to another adult at risk of abuse
- There is reason to believe that the person alleged to be causing concern is a risk to themselves/others
- There is an existing legal obligation to report such as Criminal Justice (Withholding of Information on Offences against Children and Adults) Act 2012

While respecting an adult's right to self-determination, situations can arise where information is suggestive of abuse and/or a crime, although the adult with decision-making capacity has indicated that they do not wish for a safeguarding intervention or wish to make a statement of complaint. If the threat or the risk of abuse is of a serious nature to the adult or another person, the Safeguarding Manager can consult with the HSE Safeguarding and Protection team for advice and guidance.

When sharing information regarding a concern of abuse, it is essential to be clear whether the adult is at immediate and serious risk of abuse. If this is the case, it is essential to outline the protective actions to be taken and already in place. The will and preference of the adult at risk, where these have been, or can be ascertained, must be included.

10. ROLES & RESPONSIBILITIES – SAFEGUARDING ADULTS AT RISK OF ABUSE

The Daughters of Charity, their employees and volunteers have a duty to protect adults from any form of abuse. Such responsibility requires that members of our Congregation, staff and volunteers follow the guidance outlined in this Safeguarding Policy. Each of our Provinces has appointed designated persons with special responsibility for different aspects of this ministry as follows:

The Provincial Leader has the following responsibilities:

1. To ensure that our Provincial Structure to safeguard adults at risk of abuse with whom we interact, is working effectively.
2. To ensure that implementation of this policy is regularly monitored and reviewed.
3. To liaise with the Safeguarding Manager and make decisions on specific concerns.
4. Review on a quarterly basis all concerns or allegations of abuse and their current status.
5. Ensure that service providers have in place arrangements to support the implementation of this Policy as specified in the service agreement/contract.

The Safeguarding Manager has the following responsibilities:

1. To receive, respond to, manage and record all concerns or allegations of abuse regarding adults from start to finish in an appropriate and swift manner, and ensure that all the relevant information is collated.
2. To ensure all reporting obligations are met, both internally, and to any relevant statutory authorities.
3. To provide regular information on the progress of any enquiry to the Provincial Leader and others as appropriate.
4. To liaise with statutory agencies for the purposes of safeguarding adults at risk of abuse e.g. HSE, An Garda Síochána.

The Safeguarding Committee has the following responsibilities:

1. To ensure that appropriate and on-going training is provided for all involved with the care of adults.
2. To ensure the recruitment of staff to care for adults is done in line with good recruitment practices.
3. The creation, maintaining and monitoring of a safe environment for adults.
4. Ensuring that sufficient resources are allocated to ensure that the policy can be effectively implemented.
5. Providing an update report to the Provincial Leader annually.

The role of all personnel

1. Promote the welfare of adults in all interactions.
2. Be aware of, and comply with, this Safeguarding Adults at risk of Abuse Policy.
3. Support an environment in which Adults are safeguarded from abuse or abusive practices through the implementation of preventative measures and strategies.
4. Avail of any relevant training and educational programmes.
5. Be aware of the signs and indicators of abuse.
6. Support adults to report any type of abuse or abusive practice.
7. Ensure that any concerns or allegations of abuse are reported in accordance with policy.

11. SAFEGUARDING STRUCTURE



12. RECRUITMENT AND SELECTION PROCEDURES

As Daughters of Charity, we consistently apply a thorough and clearly defined method of recruiting staff and volunteers, in line with legislative requirements and best practice.

The Daughters of Charity implement a robust Safe Recruitment and Vetting Policy and Procedures document which is in line with legislative requirements, Church guidelines and best practice. The requirements listed apply to all members of Religious Congregations, staff, and volunteers who through their ministry have regular and necessary contact with children and adults.

The Congregation recognises the importance of putting in place safe recruitment and selection procedures to minimise the opportunity for unsuitable people to work or volunteer with adults.

13. RECOGNITION OF ABUSE²

All Sisters, employees and volunteers must be clearly informed about what constitutes harm/abuse of an adult and must be able to recognise the signs of harm/abuse. There are several forms of abuse, any or all of which may be perpetrated as the result of deliberate intent, negligence or lack of insight and ignorance. A person may experience more than one form of abuse at any one time. The following information provides definitions, examples and indicators of abuse (not exhaustive), with which all must be familiar:

Physical Abuse

Definition: The use of physical force, the threat of physical force or mistreatment of one person by another which may or may not result in actual physical harm or injury.

Sexual Abuse

Definition: Any behaviour (physical, psychological, verbal, virtual/online) perceived to be of a sexual nature which is controlling, coercive, exploitative, harmful or unwanted towards another person.

Emotional/Psychological Abuse (including Bullying and Harassment)

Definition: Behaviour that is psychologically harmful to another person and which inflicts anxiety or mental distress by threat, humiliation or other verbal/non-verbal conduct.

Financial or Material Abuse

Definition: The unauthorised and improper use of funds, property or any resources including pensions, or others statutory entitlements or benefits. Financial abuse involves an act or acts where a person is deprived of control of their finances or personal possessions or exploited financially by another person or persons.

² Appendix 2

Organisational Abuse

Definition: The mistreatment of people brought about by poor or inadequate care/support or systemic poor practices that affect the whole care setting. This can occur in any organisation or service, within and outside Health and Social Care provision. Organisational abuse may occur within a culture that denies, restricts or curtails privacy, dignity, choice and independence. It involves the collective failure of a service provider or an organisation to provide safe and appropriate services and includes a failure to ensure that the necessary preventative and/or protective measures are in place. It can occur when an individual's wishes and needs are sacrificed for the smooth running of a group, service or organisation.

Neglect

Definition: The withholding of or failure to provide appropriate and adequate care and support which is required by another person. It may be through a lack of knowledge or awareness, or through a failure to take reasonable action given the information and facts available to them at the time.

Discriminatory Abuse

Definition: Unequal treatment, harassment or abuse of a person based on age, disability, race, ethnic group, gender, gender identity, sexual orientation, religion, family status or membership of the travelling community.

Online or Digital Abuse

Definition: An abusive or exploitative interaction occurring online or in a social media context.

Human trafficking/Modern Slavery

Definition: Human trafficking/modern slavery involves the acquisition and movement of people by improper means, such as force, threat or deception, for the purposes of exploiting them. It can take many forms, such as domestic servitude, forced criminality, forced labour, sexual exploitation and organ harvesting.

(Refer to Appendix 2 which sets out examples and indicators for each type of abuse).

Abuse can happen in many different contexts or settings including the following:

- **Familial Abuse** - Abuse by a family member.
- **Professional Abuse** - Misuse of power and trust by staff, health and social care professionals and a failure to act on suspected abuse, poor care practice or neglect.
- **Stranger Abuse** - Abuse by someone unfamiliar to the adult

- **Abuse between Peers** - Harm perpetrated upon one adult by another adult. In relation to the response to such a context, it is important to consider contextual factors such as impact, intent, decision making capacity, behaviour support and any other relevant arrangements.

It is recognised that abuse can happen at any time, in any setting and therefore this policy has provided a procedural process for all to respond and report their concerns of abuse or the risk of abuse. These procedures are outlined below.

14. SAFEGUARDING PRINCIPLES IN PRACTICE

The 11 fundamental safeguarding principles, as set out by the HSE and adopted by the Daughters of Charity Congregation are that:

1. Safeguarding is everyone's responsibility.
2. Everyone must have a 'zero tolerance' approach to any form of abuse.
3. The duty to report safeguarding concerns rests with the person who has the concern.
4. There should be no delay in reporting a safeguarding concern.
5. It is necessary to ensure the immediate safety of the adult at risk of abuse.
6. There should be no delay in implementing a Safeguarding Protection Plan.
7. Good collaborative working is central to safeguarding. All parties should share relevant information that is known to them, within the rules of data protection and confidentiality.
8. Any information about an adult at risk of abuse must be managed appropriately and shared/processed on the basis of "necessity" with the HSE/HSE funded services and relevant statutory authorities.
9. Safeguarding should be founded on an approach where the adult is at the heart of all decisions and actions.
10. A health or social care professional already known to the adult at risk of abuse, or assigned to them, should be involved in the management of the concern, where possible and appropriate.
11. Considerations of capacity and consent are central to adult safeguarding. The right of a person to make decisions and remain in control of their life must be respected.

These principles guide our response to concerns or allegations of abuse.

15. RESPONDING TO CONCERNS OR ALLEGATIONS OF ABUSE TO ADULTS AT RISK

Being alert to potential abuse plays a major role in ensuring that adults are safeguarded, and it is important that all concerns about possible abuse are reported.

Concerns or allegations of abuse may come to light in one of several ways:

- Direct observation of an incident of abuse;
- Disclosure by the adult themselves;
- Disclosure by a relative/friend;

- Observation of signs or symptoms of abuse;
- Anonymous reporting;
- Concerns raised through a complaint process;
- During the course of engagement with the adult.

Abuse can take place anywhere. If unsure that an incident may constitute abuse or warrants actions, the Safeguarding Manager is available for consultation.

Remember:

- Safeguarding is everyone's responsibility.
- Everyone must have a zero-tolerance approach to any form of abuse.
- The duty to report safeguarding concerns rests with the person who has the concern.
- There should be no delay in reporting a safeguarding concern.
- It is necessary to ensure the immediate safety of the adult at risk of abuse.

Steps to be taken on the same day when concerns come to light are:

The following are key responsibilities and actions for anyone who has/have a concern in relation to the abuse or neglect of an adult at risk of abuse.

I. Take Immediate Action to Protect

Take immediate actions to safeguard anyone at immediate risk of harm including seeking, for example, emergency medical assistance or the assistance of An Garda Síochána, as appropriate.

II. Listen, Reassure and Support

If the adult at risk of abuse has made a direct disclosure of abuse or is upset and distressed about an abusive incident, listen to what he/she says and ensure he/she is given the support needed. It is important to engage with the adult in their preferred communication method. Advise the adult of the concern as you understand it and always seek to ascertain his/her will and preference.

III. Report & Inform

For all concerns of abuse of adults at risk of abuse the Safeguarding Manager must be notified of the concern on the same day, with a clear written record to be completed without delay. The Safeguarding Manager will refer any concern of abuse of an adult at risk of abuse to the HSE Safeguarding and Protection Team and/or An Garda Síochána.

If the person allegedly causing the concern is a staff member, volunteer or a member of the Congregation then the Provincial Leadership must additionally be informed as well as the Safeguarding Manager. The Safeguarding Manager will refer any concern of abuse of an adult at risk of abuse to the HSE Safeguarding and Protection Team and/or An Garda Síochána. The

Daughters of Charity will cooperate with the HSE Safeguarding and Protection Team and/or An Garda Síochána.

If a Sister, who may be an adult at risk of abuse, receives services from the HSE, a Private Provider or Contractor and a cause for concern arises with regard to the Sister in relation to a staff member (including a volunteer), the Safeguarding Manager will inform and report the matter to the Safeguarding Coordinator of the Employee's organisation. However, the Safeguarding Manager is required to be kept informed, on the basis of necessity, regarding decisions and outcomes in respect of the safeguarding and protection plan.

IV. Response to Possible Crime

Where there is a concern that a criminal offence may have taken place, or a crime may be about to be committed, contact An Garda Síochána immediately.

V. Record and Preserve Evidence

Preserve evidence through recording and take steps to preserve any physical evidence (if appropriate).

If the safeguarding adult concern also raises a concern over the safety or welfare of a child TUSLA and/or An Garda Síochána must be notified, in accordance with the Children First National Guidance for the Protection and Welfare of Children.

Follow Up Actions

As soon as possible on the same day, make a detailed written record of what you have seen, been told, or have concerns about, and who you reported it to. Where possible try to make sure anyone else who saw or heard anything relating to the concern of abuse also makes a written report.

The written record should include details of:

- When the disclosure was made, or when you were told about/witnessed this incident/s;
- Who was involved and any other witnesses, including other adults at risk of abuse and staff;
- Exactly what happened or what you were told, using the person's own words, keeping it factual and not interpreting what you saw or were told;
- Any other relevant information, for example previous incidents that have caused you concern.

Remember to:

- Include as much detail as possible;
- Make sure the written account is legible and of a photocopyable quality;
- Make sure you have printed your name on the report and that it is signed and dated;
- Keep all records confidential, storing them in a safe and secure place until needed.

The Safeguarding Manager must ensure the care, safety, and protection of the adult at risk of abuse and any other adults potentially at risk, where appropriate. He/she must check with the person reporting the concern as to what steps have been taken (as above) and initiate any other appropriate measures.

The Safeguarding Manager will refer any concern of abuse to the HSE Safeguarding and Protection Team, who will take referrals directly from the public, within one working day. The Safeguarding and Protection Team will conduct the Safeguarding Initial Assessment (SIA) and safeguarding planning, where a person has no assigned health or social care professional.

If a complaint or allegation of abuse concerns an employee, the Congregation will invoke the relevant HR policies and procedures which apply without delay to ensure that the employee is afforded due process. The application of the appropriate HR policy /procedure in respect of an employee against whom an allegation or complaint has been made is a separate process from the taking of any timely safeguarding measures that may be necessary for the safety and welfare of the adult.

If a complaint or allegation of abuse concerns a member of the Congregation, the Daughters of Charity will invoke the relevant procedures which will be applied without delay, and it is a separate process from the taking of any timely safeguarding measures that may be necessary for the safety and welfare of the adult.

16. GUIDANCE WHEN RESPONDING TO A CONCERN OF ABUSE/NEGLECT

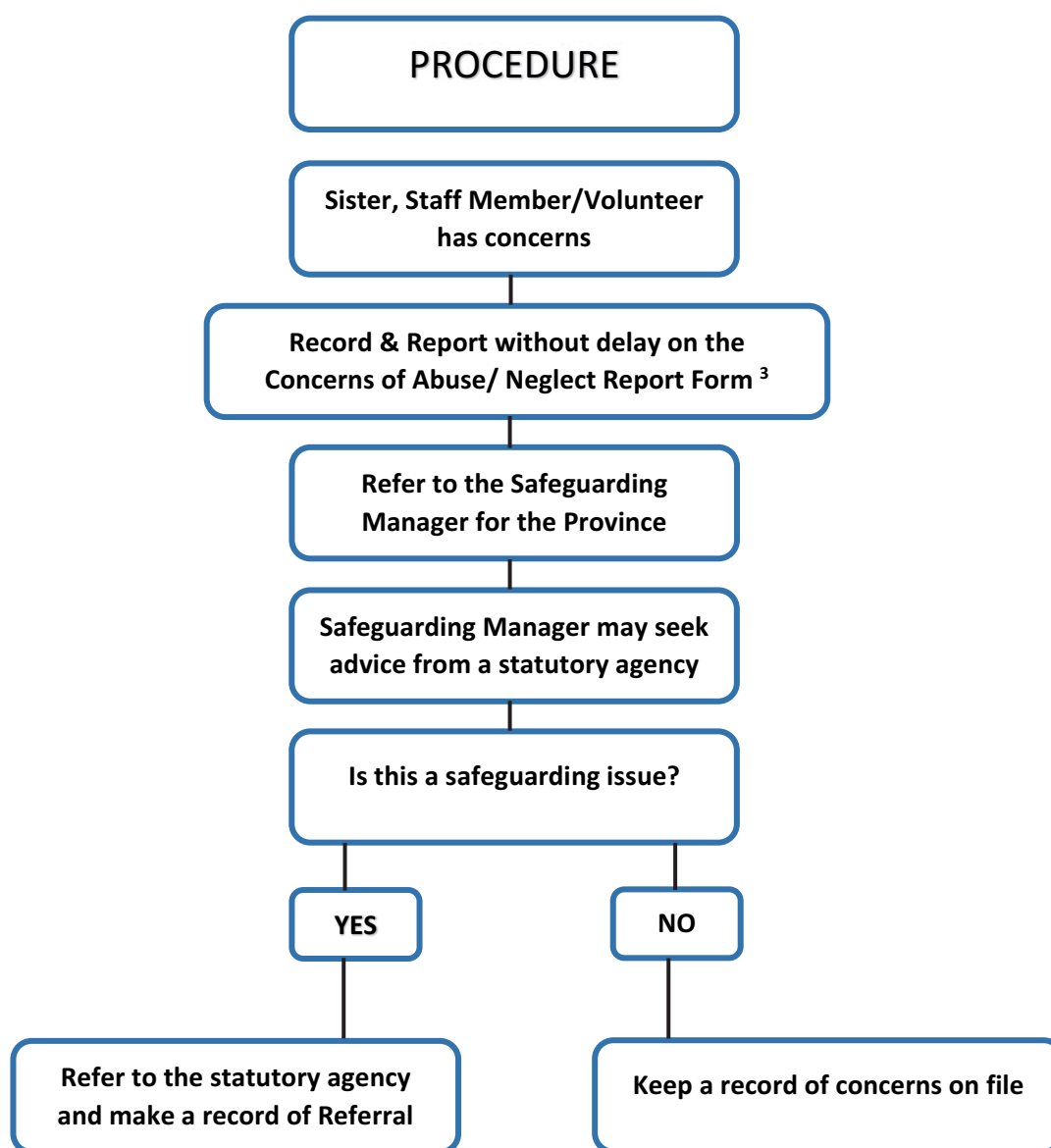
Do:

1. Stay Calm
2. Listen and hear
3. Express concern about what has happened
4. Reassure the person – tell them that they did the right thing in telling you
5. Let the person know that the information will be taken seriously and give information about what will happen next
6. If urgent medical/police help is required, call the emergency services
7. Ensure the immediate safety of the person
8. Be aware that medical and forensic evidence might be needed
9. Record what you have seen or what you have been told in writing, and include as much detail as possible
10. Date and sign the report
11. Report the matter to the Safeguarding Manager on the same day, without delay

Do Not:

1. Stop someone disclosing to you
2. Make judgements, appear shocked or display negative emotions
3. Promise to keep secrets
4. Press the person for more details or make them repeat the story
5. Pass any information to anyone who does not have a legitimate need to know
6. Contact the person who may have caused the harm
7. Attempt to investigate yourself
8. Leave details of your concern on a voice mail or by email
9. Delay in reporting the matter

17. REPORTING PROCEDURE IF YOU HAVE A CONCERN ABOUT ABUSE OR NEGLECT OF AN ADULT AT RISK OF ABUSE (FLOWCHART)³



18. RECORDING REQUIREMENTS

It is important that all concerns or allegations of abuse including the risks and risk-reducing measures are recorded and kept under review. Some degree of risk-taking is an essential part of fostering independence. In a culture of positive risk taking, risk assessment should involve everyone affected, including adults, Sisters, employees, carers and volunteers.

Accidents, incidents and near misses, particularly where these recur, may be indicators of organisational risks including a risk to safeguarding which needs to be managed and recorded.

³ See Appendix 3

It is important that accidents, incidents or near misses which involve adults are reported to the Local Leader or Manager or those with decision making responsibilities who will determine how the matter should be taken forward and an incident report form, including a detailed outline of the incident/accident/near miss, should also be completed.

19. RESPONSE TO ALLEGATIONS AGAINST A SISTER, STAFF MEMBER OR VOLUNTEER

If a complaint or allegation of abuse concerns an employee, the Congregation will invoke the relevant HR policies and procedures which apply without delay to ensure that the employee is afforded due process. The application of the appropriate HR policy /procedure in respect of an employee against whom an allegation or complaint has been made is a separate process from the taking of any timely safeguarding measures that may be necessary for the safety and welfare of the adult.

If a complaint or allegation of abuse concerns a member of the Congregation, the Daughters of Charity will invoke the relevant procedures which will be applied without delay, and it is a separate process from the taking of any timely safeguarding measures that may be necessary for the safety and welfare of the adult.

Responses will include the following:

1. Initially details of the incident will be recorded by the Safeguarding Manager who will inform the Provincial Leader.
2. The Safeguarding Manager will establish if the concern relates to a safeguarding issue; whether there are reasonable grounds for concern and whether to report the concerns directly to the relevant statutory authorities.
3. The Safeguarding Manager will take whatever steps are necessary to ensure the safety of any adult at risk of abuse
4. Following consultation, and if agreed with the statutory authorities, the Sister, Employee, Volunteer will be informed by the Safeguarding Manager, that an allegation has been made against her/him. It may be necessary to take protective measures which may include suspending the employee or other disciplinary measure in accordance with Employee Policy. Suspension is a neutral act to allow the investigation to proceed and to remove the Employee/Volunteer from the possibility of any further allegation.
5. Where the concerns or allegations relate to possible abuse by an Employee or Volunteer, internal disciplinary procedures in line with the Disciplinary Policy of the Province which do not compromise any other investigations being conducted by the statutory authorities should commence.
6. If the concerns or allegations relate to a Daughter of Charity, the Provincial Leader will require the Sister to stand aside from ministry to allow any investigation to proceed.
7. A written record of meetings and consultations will be compiled by the Safeguarding Manager and a case file will be opened and stored securely in Provincial office.

20. CODE OF BEHAVIOUR

The philosophy of the Daughters of Charity is that a Code of Behaviour is made available to all employees, Sisters, volunteers and others who may occupy either a part or full time position within a service or ministry providing support and care to vulnerable people.

Principles underlying the Code of Behaviour can be summarised by values of honesty, impartiality and integrity which are maintained by a high level of personal performance carried out in a responsible manner. These values are about serving the common good of both the organisation and the persons who avail of its services. They set out a clear framework within which all personnel must contribute to a caring culture, the standards expected and ways in which staff and volunteers can achieve professional and personal job satisfaction.

The Daughters of Charity, Employees and Volunteers encounter Vulnerable Persons in a range of situations and locations. The Daughters of Charity Code of Behaviour sets out a clear expectation of how Sisters, employees, volunteers and everyone who uses its services, or visits its premises should relate to each other in a mutually respectful way.

All employees and volunteers are expected to:

1. Treat each vulnerable person with dignity, care, acceptance and respect.
2. Adopt an approach whereby vulnerable persons are treated fairly and equally.
3. Build up and develop the trust and confidence of vulnerable persons.
4. Maintain good time-keeping and acceptable dress code standards.
5. Refrain from making personal calls during work hours except in an emergency.
6. Perform duties with efficiency, diligence and courtesy.
7. Discharge responsibilities conscientiously, impartially, with honesty and within the law.
8. Be accountable for the quality of their work, taking responsibility for improving and updating knowledge and skills.
9. Support colleagues, treating each with respect while maintaining cordial relationships.
10. Deal with the public promptly, fairly and attend to arranged appointments.
11. Ensure any action taken maintains public confidence in the performance of the organisation's function and the good name of the Congregation, service, or ministry.
12. Assist, as required, staff or volunteers whose first language is not English.
13. Decline to give Media interviews and avoid making public statements relating to Services without prior consultation with the Province Leader.
14. Seek approval prior to the publication of any data/ reports or information about the organisation.
15. Within the limits of their responsibilities, assist in promoting a positive profile of the Service and Congregation, when this is appropriate and if satisfactory management structures are in place.

Sisters, Employees and Volunteers are expected to show behaviour towards Vulnerable Persons that incorporates the following:

1. In Relation to Personal Care:

- Give high priority to each individual receiving assistance by providing a person-centred approach in which rights are recognised and health and wellbeing promoted.

- Ensure that physical contact is person-centred and appropriate to the task required.
- Understand and implement a Care Plan where required to do so.
- Provide personal and intimate care sensitively and with respect for the individual's dignity and privacy.
- Seek to defuse a challenging situation.

2. In Relation to Beliefs and Practices:

- Be open to and aware of diversity in the beliefs and practices of Vulnerable Persons and their families.
- Be aware of the difficulties posed by language barriers and other communication difficulties.
- Avoid any form of discrimination against Vulnerable Persons who have different cultural backgrounds and beliefs.
- Use the procedures in this Policy to report any discrimination by others against vulnerable persons.
- Report any concerns to their Line Manager/Safeguarding Manager.

3. In Relation to Financial Matters:

- Maintain records of Vulnerable Person's personal allowances, receipts and expenditure as appropriate.
- Never derive personal gain when using the Vulnerable Person's money on his/her behalf.
- Never borrow money from, or loan money to, a Vulnerable Person.
- Never accept any gifts or favours from a Vulnerable Person that could reasonably give the impression that you are providing someone with preferential treatment, or which could influence your professional integrity.
- Report suspicions of financial abuse.

4. In Relation to Self-Integrity:

- Report any inappropriate use of images of a Vulnerable Person in photographs or other medium.
- Report any inappropriate or dangerous behaviour about a vulnerable person on the Internet /Website/ camera/ mobile phone or other devices.
- Encourage vulnerable persons to tell someone if they encounter anything that makes them feel unsafe or threatened.
- Encourage full participation of those receiving care and assist them to reach independence according to their ability and potential while protecting them from danger and harm.
- Protect vulnerable persons from every form of abusive behaviour and report to the Safeguarding Manager if disclosures of abuse are made.

Sisters, Employees or Volunteers should avoid:

- Taking a Vulnerable Person to his/her home.
- Taking a Vulnerable Person alone on a car journey, when to do so would pose a risk to either one.

Sisters, Employees or Volunteers should never:

- Abuse, neglect, harm or place at risk of harm, vulnerable persons, whether by omission or commission.
- Make inappropriate comments/jokes about, or to, a vulnerable person.
- Form inappropriate relationships with vulnerable persons.
- Inappropriately share personal details of vulnerable persons and their families.
- Photograph/video a vulnerable person even by mobile phone, without the person's valid written consent.

Breaching the Code of Behaviour is a serious issue which will be investigated and may result in disciplinary action, and ultimately dismissal.

It is important to note that the primary aim of the Code of Behaviour is to protect the safety of all participants, employees and volunteers while they utilise or work in the Service, including during all events and activities that may be arranged for the social well-being of vulnerable persons. Adherence to the Code of Behaviour assists in minimising the risk of harm and abuse to vulnerable adults as well as helping to protect all staff and volunteers from unfounded accusations.

21. LEGISLATION / STANDARDS / GUIDANCE**Criminal Justice Legislation**

An Garda Síochána must be informed if it is suspected that the concern or complaint of abuse may be criminal in nature; this may become apparent at the time of disclosure or following the outcome of the preliminary assessment.

The Criminal Justice (Withholding of Information on Offences against Children and Adults) Act 2012

The Criminal Justice (Withholding of Information on Offences against Children and Adults) Act 2012 came into force on 1st August 2012. It is an offence to withhold information on certain offences against children and adults from An Garda Síochána.

The Domestic Violence Act 2018

The Domestic Violence Act 2018 replaces the Domestic Violence Act 1996 and the Domestic Violence (Amendment) Act 2002 and brings in positive and significant changes. Existing provisions on domestic violence are brought together in one piece of legislation to make the legislation easier to use.

National Vetting Bureau (Children and Adults) Acts 2012-2016

Under these Acts it is compulsory for employers to obtain vetting disclosures in relation to anyone who is carrying out relevant work with children or vulnerable adults. The Acts create penalties for persons who fail to comply with their provisions. Statutory obligations on employers in relation to Garda vetting requirements for person working with children and vulnerable adults are set out in the Acts.

Assisted Decision Making (Capacity) Act 2015

This Act has yet to be fully commenced. This Act will have significant implications for the provision of safe person-centred approaches, based on respecting the individual rights of each person. The Act will support decision making and maximising a person's capacity to make

decisions, whilst the legislation also seeks to safeguard an individual's right to participate in decisions that affect their life, where they may lack or do lack capacity to make decisions unaided.

The Health Act (2007)

This Act gave the legislative basis for the formation of HIQA and provides direction in regard to related matters.

22. RELATED POLICIES

Within the Congregation there are other policies which link with this Safeguarding Adults at Risk of Abuse Policy. This is a demonstration of how embedded we intend safeguarding to be within our ethos and structures and of how we intend it to inform all our procedures relating to adults. These other Policies include:

- Dignity & Respect
- Anti-bullying
- Whistleblowing
- Data-Protection
- Health & Wellbeing
- Mediation
- Complaints

There is a difference between a complaint and a concern of abuse. Some complaints might raise concerns of abuse and such situations are required to be addressed by this Safeguarding Adults at Risk of Abuse Policy and Procedure.

23. ANONYMOUS AND HISTORICAL CONCERNS

All concerns or allegations of abuse must be reported to the Safeguarding Manager, regardless of the source or date of occurrence. Critical issues for consideration include:

- The significance/seriousness of the concern/complaint.
- The potential to obtain independent information.
- Potential for ongoing risk.

In relation to historical complaints the welfare and wishes of the person and the potential for ongoing risk will guide the intervention. Any person who is identified in any complaint, whether historic or current, made anonymously or otherwise, has a right to be made aware of the information received. The HSE Safeguarding and Protection Teams and TUSLA Child and Family Agency can advise and guide on the most effective course of action, depending on the level of current risk to adults and children.

Appendix 1

THE STANDARDS AROUND WHICH OUR POLICY IS FORMULATED

STANDARD 1

The Congregation has a Safeguarding Adults (Vulnerable Persons) Policy supported by robust procedures.

STANDARD 2

The Congregation consistently applies a thorough and clearly defined method of recruiting staff and volunteers in line with legislative requirements and best practice.

STANDARD 3

Effective and relevant training must be provided for all involved in the care of Vulnerable Persons in our communities.

STANDARD 4

The Congregation has clearly defined procedures for raising awareness of, responding to, recording and reporting, concerns about actual or suspected incidents of abuse.

STANDARD 5

The Congregation operates an effective procedure for assessing and managing risks with regard to safeguarding vulnerable persons.

STANDARD 6

There are clear procedures for receiving comments and suggestions, and for addressing concerns and complaints to the Congregation.

STANDARD 7

The Congregation has a clear policy on the management of records, confidentiality and sharing of information.

STANDARD 8

There is a written code that outlines behaviour expected of all involved with the Congregation including visitors.

Appendix 2

HSE Resource: Definitions and Categories of Abuse

Definitions and Categories of Abuse

The following table provides definitions, examples and indicators of abuse, (not exhaustive) with which all staff members must be familiar.

⊕ Type of Abuse: Physical

Definition The use of physical force, the threat of physical force or mistreatment of one person by another which may or may not result in actual physical harm or injury.

Examples Physical abuse includes hitting, slapping, pushing, shaking, burning, scalding, pulling hair, kicking, exposure to heat or cold, force-feeding, misuse of medication, inappropriate restraint or sanctions.

Physical abuse includes all forms of physical force contact which results in harm to another person including excessive force in the delivery of personal care, forced feeding, rough handling, unwarranted physical pressure (gripping, squeezing) shaking, misuse of incontinence wear, hitting with a weapon or implement, misuse of medication, failing to give medication, poisoning, restricting activities or forcing activities.

Includes inappropriate deprivation of liberty (e.g. being locked in/forced confinement in an area), denied treatment or experiencing threat of physical violence.

Indicators Unexplained signs of physical injury – bruises, cuts, scratches, burns, sprains, fractures, dislocations, hair loss, missing teeth. Unexplained/long absences at regular placement. Service user appears frightened, avoids a person, demonstrates new atypical behaviour; asks not to be hurt.

⊕ Type of Abuse: Sexual

Definition Any behaviour (physical, psychological, verbal, virtual/online) perceived to be of a sexual nature which is controlling; coercive, exploitative, harmful, or unwanted towards another person.

Examples Abusive acts of a sexual nature include but are not limited to rape and sexual assault, indecent exposure, intentional touching, fondling, molesting, sexual harassment or sexual acts to which the adult has not consented, or could not consent, or to which he or she was compelled to consent.

Sexual violence and abuse can take many forms and may include non-contact sexual activities, such as indecent exposure, stalking, grooming. It may involve physical contact, including but not limited to non-consensual penetrative sexual activities or non-penetrative sexual activities, such as intentional touching (known as groping), exposure of the sexual organs and any sexual act intentionally performed in the presence of another without their consent. Examples of behaviours include inappropriate touch anywhere, masturbation of either or both persons, penetration or attempted penetration of the vagina, anus or mouth, with or by a penis, fingers or other objects. Exposure to pornography or other sexually explicit and inappropriate material enforced witnessing of sexual acts, sexual media harassment. Inappropriate and sexually explicit conversations, remarks, threats, intimidation, inappropriate looking/ touching, sexual teasing/innuendo, grooming, taking sexual photographs/video footage, making someone watch sexual acts/ pornography, making someone participate in sexual acts. Includes digital/ social media and online sexual abuse/ production of sexual images.

Female genital mutilation (FGM) is considered a form of both physical and sexual abuse.

Indicators Trauma to the genitals, breast, rectum, mouth, injuries to face, neck, abdomen, thighs, buttocks, STIs and human bite marks.

An adult demonstrates atypical behaviour patterns such as sleep disturbance, incontinence, aggression, changes in eating patterns, inappropriate or unusual sexual behaviour and anxiety attacks.

Indicators of sexual exploitation would include poor concentration, withdrawal, sleep disturbance. Other indicators include excessive fear/apprehension of, or withdrawal from, relationships. Fear of receiving help with personal care and reluctance to be alone with a particular person could also be indicators.

⊕ **Type of Abuse: Emotional/Psychological** (including Bullying and Harassment)

Definition Behaviour that is psychologically harmful to another person and which inflicts anxiety or mental distress by threat, humiliation or other verbal/non-verbal conduct.

Examples Emotional or psychological abuse includes failing to value the individual, abuse of power in which the perpetrator places their opinion/view/judgement as superior to the individual, harsh value judgements, conveying to the individual that they are worthless, unloved, inadequate, or a nuisance.

Abusive acts of a psychological nature include, but are not limited to threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks, patronising approaches to care and support for example 'elder speak' or spoken to like a child, intolerance of religious beliefs, intolerance of cultural beliefs, and in the case of married/cohabiting couples denying the right to shared and appropriate accommodation.

Failure to show interest in or provide opportunities for a person's emotional development or need for social interaction.

Outpacing – where information /choices are provided too fast for the adult to understand, putting them in a position to do things or make choices more rapidly than they can tolerate.

Denying the individual the opportunity to express their views in a manner which is comfortable to them, deliberately silencing them or ignoring them or their communications written or spoken, making a subjective comment about the way an individual chooses to express themselves, imposing unrealistic expectations on the individual.

Behaviours include deprivation of liberty, persistent criticism, sarcasm, humiliation, hostility, intimidation or blaming, shouting, cursing or invading someone's personal space. Unresponsiveness, not responding to calls for assistance or deliberately responding slowly to a call for assistance.

Includes risk of abuse via technology.

Indicators Mood swings, incontinence, obvious deterioration in health, sleeplessness, feelings of helplessness/hopelessness, extreme low self-esteem, tearfulness, self-abuse or self-destructive behaviour.

Challenging or extreme behaviours; anxious, aggressive, passive or withdrawn.

The carer-person in need of care relationship may be vulnerable to abuse in both directions, neither deliberate but can be very harmful. Co-dependent relationships need to be considered as a new phenomenon with adults at risk of abuse and a potential risk from relatives with mental health or addiction issues.

⊕ Type of Abuse: Financial or material abuse

Definition

The unauthorised and improper use of funds, property or any resources including pensions, or others statutory entitlements or benefits.

Financial abuse involves an act or acts where a person is deprived of control of their finances or personal possessions or exploited financially by another person or persons.

Examples

This may include theft, coercion, fraud, undue pressure in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits. It may also involve the misuse of power of attorney, and not contributing to household costs where this was previously agreed.

Misusing or stealing the person's property, possessions or benefits, mismanagement of bank accounts, cheating the service user, manipulating the service user for financial gain or putting pressure on the service user in relation to wills property, inheritance and financial transactions.

Examples include theft, fraud, exploitation, the misuse of property, possessions, bank accounts, grants, cash or benefits; internet scamming, phone scamming, putting someone under pressure in relation to their financial arrangements or property, including wills; denial of access to money or property, not contributing to household costs, use of bank and credit cards without permission, running up debts, forged signatures, deliberately overcharging for services activities/required treatments/therapies.

Indicators

No control over personal funds or bank accounts, misappropriation of money, valuables or property, no records or incomplete records of spending, discrepancies in the service user's internal money book, forced changes to wills, not paying bills, refusal to spend money, insufficient monies to meet normal budget expenses, etc.

⊕ Type of Abuse: Organisational

Definition

The mistreatment of people brought about by the poor or inadequate care or support or systemic poor practices that affect the whole care setting

This can occur in any organisation or service, within and outside Health and Social Care provision. Organisational abuse may occur within a culture that denies, restricts or curtails privacy, dignity, choice and independence. It involves the collective failure of a service provider or an organisation to provide safe and appropriate services and includes a failure to ensure that the necessary preventative and/or protective measures are in place.

Organisational abuse can be brought about by poor or inadequate care or support services, or systematic poor practice that affects the whole care setting. It can occur when an individual's wishes and needs are sacrificed for the smooth running of a group, service or organisation.

Examples

It can be a one-off incident or repeated incidents; it can be neglect or poor standards of professional practice, which might be because of culture, structure, policies, processes or practices within the organisation. Systematic and repeated failures culturally inherent within the organisation or service may be considered as organisational abuse.

It can result in a failure to afford people the opportunity to engage socially and be involved in hobbies/activities that are meaningful to them, which in turn results in a failure for their psycho-social needs to be met.

It can occur when service users are treated collectively rather than as individuals. Service user's right to privacy and choice not respected. Staff talking about the service users personal or intimate details in a manner that does not respect a person's right to privacy.

Indicators

Inflexible regimes and rigid routines which violate the dignity and human rights of the adults and place them at risk of harm.

Lack of, or poor-quality staff supervision and management. High staff turnover. Lack of training of staff and volunteers. Poor staff morale. Poor record keeping. Poor communication with other service providers. Lack of personal possessions and clothing, being spoken to inappropriately, etc. Weak governance of staff and breaches of professional codes of practices can be indicatives of institutional abuse. The absence of visitors, family and friends discouraged from visiting, lack of flexibility and choice for service users.

⊕ Type of Abuse: Neglect

Definition The withholding of or failure to provide appropriate and adequate care and support which is required by another person. It may be through a lack of knowledge or awareness, or through a failure to take reasonable action given the information and facts available to them at the time.

Examples Neglect and acts of omission include ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life such as medication, social activities, leisure/ educational opportunities or adequate nutrition and heating. Neglect includes ignoring need, either physical or medical, knowing that a need exists, but choosing to not address that need, thereby leaving the person at risk of deterioration in health and wellbeing.

Neglect includes withdrawing or not giving help that an adult needs causing them to suffer for example malnourishment, untreated medical conditions, unclean physical appearance, improper administration of medication or other drugs, being left alone for long periods when the person requires supervision or assistance. Neglect also includes not meeting the social, psychological or spiritual needs and not addressing required environmental factors/adaptations to adequately meet the needs of the adult.

Indicators Poor personal hygiene, dirty and dishevelled in appearance e.g. unkempt hair and nails. Poor state of clothing. Non-attendance at routine health appointments for example dental, optical, chiropody, social isolation. Whilst there is a positive duty to provide care when in receipt of state carer's allowance there is no legal obligation on carers to continue in the caring role. Assessment of indicators needs to be mindful of identifying carer stress where the carer cannot cope or manage with the responsibilities.

⊕ Type of Abuse: Discriminatory

Definition Unequal treatment, harassment or abuse of a person based on age, disability, race, ethnic group, gender, gender identity, sexual orientation, religion, family status or membership of the travelling community.

Examples Being treated differently by individuals, family, organisations or society because of any of the above. Assumptions about a person's abilities or inabilities. Not speaking directly to the person but addressing an accompanying person.

Indicators Isolation from family or social networks. Indicators of psychological abuse may also be present.

Type of Abuse: Human trafficking/Modern Slavery

Definition Human trafficking/modern slavery involves the acquisition and movement of people by improper means, such as force, threat or deception, for the purposes of exploiting them. It can take many forms, such as domestic servitude, forced criminality, forced labour, sexual exploitation and organ harvesting.

Examples Victims of human trafficking/ modern slavery can come from all walks of life; they can be male or female, children or adults, and they may come from migrant or indigenous communities. Any concerns that an adult at risk may be a victim of human trafficking/modern slavery must be reported to An Garda Síochána.

Indicators People who have been trafficked may believe that they must work against their will. Victims may be unable to leave their work environment and show signs that their movements are being controlled. Victims may show fear or anxiety. They may be subjected to violence or threats of violence against themselves or against their family members. They may suffer injuries that appear to be the result of an assault.

➔ Type of Abuse: Online or Digital Abuse

Definition An abusive or exploitative interaction occurring online or in a social media context.

Examples Includes risk of abuse via technology including exposure and uploading of inappropriate abusive material without consent. Includes digital/social media and online sexual abuse/ production of sexual images, online financial abuse, theft of personal information and persuasion towards self-harm.

Indicators Becoming withdrawn, suddenly behaves differently, anxious, clingy, depressed, aggressive, problems sleeping, eating disorders. The exploitation on an online or digital platform can have a serious impact on the victim. This impact can result in the victim soiling their clothes, taking unnecessary risks, missing education/ training, changing eating habits, developing obsessive behaviours, having nightmares, increasing drug/alcohol usage.

Appendix 3**CONCERNS OF ABUSE / NEGLECT REPORT FORM****PLEASE ANSWER ALL RELEVANT QUESTIONS AS FULLY AS YOU CAN:**

Location:	
Name of Adult at Risk:	
Age/Date of Birth:	
Gender:	
Name of Carer(s) (if known):	
Home Address (if known):	

PLEASE COMPLETE THOSE SECTIONS BELOW THAT ARE RELEVANT:

1. DISCLOSURE BY THE ADULT AT RISK
When was the disclosure made (dates and times)?
Who did the Adult at Risk make the disclosure to?

What did the Adult at Risk actually say?

2. INDICATORS

Describe any signs or indicators of abuse (with times and dates):

Has the Adult at Risk alleged that any particular person caused the harm? If so, please record details, and the relationship, if any, to the adult below:

3. CONCERNS EXPRESSED BY ANOTHER PERSON ABOUT AN ADULT AT RISK

Record the concerns that were passed to you (with dates and times) and if possible, ask the person who expressed the concerns to confirm that the details as written are correct.

4. DETAILS OF ANY IMMEDIATE ACTION TAKEN E.G. FIRST AID

--

5. HAS THE ADULT AT RISK EXPRESSED ANY RESERVATIONS ABOUT YOU TALKING TO THE LINE MANAGER OR SAFEGUARDING MANAGER ABOUT THE MATTER?

--

6. DOES THE ADULT AT RISK HAVE ANY PARTICULAR NEEDS E.G. COMMUNICATION, ETC.

--

SIGNATURES

To be signed by the person reporting the concern:

Name: _____

Job title: _____

Signed: _____ **Date:** _____

Date received and actioned by Line Manager:

Name: _____

Signed: _____ **Date:** _____

Date received and actioned by Safeguarding Manager:

Name: _____

Signed: _____ **Date:** _____

ACTION TAKEN BY LINE MANAGER / SAFEGUARDING MANAGER

Signed: _____ **Date:** _____

