

SAFEGUARDING CHILDREN & VULNERABLE ADULTS POLICY & PROCEDURE



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1. INTRODUCTION

"The support and protection of children cannot be achieved by a single agency.....every service has to play its part."

Lord Laming, Victoria Climbié Enquiry January 2003.

"Everyone has the right to live his or her life free from fear, violence or harm. All adults have the right to be protected from harm or abuse."

No Secrets - Department of Health 2000

Everyone who works for Mears Group Plc has a duty to safeguard and promote the welfare of children and vulnerable adults. "Safeguarding" incorporates not only the protection of children and vulnerable adults but also includes prevention of possible harm.

Mears Group carries out activities within the community and in people's homes and community establishments where children and/or vulnerable adults may be present. Staff have a duty to report any concerns they may have for the welfare of children and/or vulnerable adults.

It is also important that as a Company we have training and procedures in place to protect members of staff who work in homes or community establishments where children and/or vulnerable adults are present, as well as the children and/or vulnerable adults themselves.

Staff will have access to the following to support them in applying the aims & objectives of this policy:-

- Safeguarding procedure & guidance (appendices A & B of this document)
- Trained Safeguarding Officers for designated business areas
- HR Business Partners for designated business areas
- Shared central services HR Advisor team
- In house Legal Team
- Mears Assist (a confidential counselling service available to all staff)

2. AIMS AND OBJECTIVES

Mears Group Plc is committed to safeguarding the welfare of children and vulnerable adults when we come into contact with them through the services that we provide, directly or indirectly.

Our aim is to:-

- Safeguard children and vulnerable adults at risk.
- Reduce the likelihood of abuse.
- Help staff deal with suspicions or concerns that abuse is taking place.
- Take appropriate steps if abuse has occurred.

Our policy objectives are to ensure we:

- Raise awareness amongst our staff about abusive or potentially abusive situations in relation to children and vulnerable adults.
- Help our clients understand the role we can have in safeguarding.
- Work in close partnership with our clients to implement procedures for identifying and reporting cases, or suspected cases, of abuse to our clients or where appropriate, to third party agencies e.g. the police.
- Actively encourage good practice and lead by example whilst working with children and vulnerable adults.
- Practice safe recruitment in checking the suitability of staff to work with young children and vulnerable adults.

3. POLICY SCOPE

For the purpose of this policy:

A "child" is

Anyone who has not yet reached their 18th birthday. "Children" therefore means "children and young people" throughout, including unborn children. The fact that a child has reached 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital, in prison or in a young

offender's institution, does not change his or her status or entitlement to services or protection under the Children (Scotland) Act 1995.

A "vulnerable adult" is

A person age 18 or over who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation.

"Child abuse" is

The term used when an adult harms a child or a young person under the age of 18.

"Abuse" is

A violation of an individual's human and civil rights by any other person or persons.

"Types of abuse"

Types of abuse in this context are detailed in Appendix A and are taken from sources such as the Department of Health "No Secrets" guidelines

These may be updated from time to time in accordance with legislation or government guidelines.

Applicability:

This policy and procedure will be relevant to Mears Group Plc employees, apprentices, casual workers, students, volunteers (referred to generically as "staff"). In addition, those responsible for hiring agency or contract workers on behalf of Mears Group must ensure that the requirement for such individuals to be made aware of their responsibilities under this policy forms part of any contractual agreement.

N.B. Separate arrangements exist for subsidiaries of Mears Care (Holdings) Limited.

4. CONTEXT

Our commercial arrangements with our clients underpin the importance of working in partnership to safeguard and promote the wellbeing of children and vulnerable adults who are end users of our services.

We are committed to following guidelines from Local Authorities; Local Safeguarding Children's Boards and Local Safeguarding Adults Boards, which

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oversee multi agency work aimed at protecting and safeguarding children and vulnerable adults.

This policy also works in conjunction with a number of other policies and procedures which are as follows:-

- Safeguarding procedure & guidance (appendices A, B & C of this document)
- Recruitment and selection
- Code of conduct
- Disciplinary and Grievance
- Data Protection
- Induction
- Complaints
- Whistleblowing
- Disclosure & Barring Service (DBS) checks
- Incident Reporting

5. LEGISLATION & GUIDANCE

There is no single piece of legislation or set of guidelines that cover child protection or the protection of vulnerable adults. However this policy was developed with reference to the following:-

Children (Scotland) Act 1995

Children and Young People (Scotland) Act 2014

Protection of Children (Scotland) 2003

Criminal Justice (Scotland) Act 2003.

Protection of Children and Prevention of Sexual Offences (Scotland) Act 2005

Adult Support & Protection (Scotland) Act 2007 –

Sexual Offences (Scotland) Act 2009

Protection of Vulnerable Groups (Scotland) Act 2007.

Protection from Abuse (Scotland) Act 2001 or Domestic Abuse (Scotland) Act 2018

Prohibition of Female Genital Mutilation (Scotland) Act 2005

Forced Marriage etc. (Protection and Jurisdiction) (Scotland) Act 2011

The Adults with Incapacity (Scotland) Act 2000

Human Rights Act 1998

Social Care (Self-Directed Support) (Scotland) Act 2013

Sexual Offences Act 2003 (There are separate provisions for Scotland)

The Nationality, Immigration and Asylum Act 2002.

The Asylum and Immigration (Treatment of Claimants) Act 2004.

The UK Action Plan on Tackling Human Trafficking (2007).

Public Interest Disclosure Act 1998 (as subsequently incorporated into The Employment Rights Act 1996)

Department of Health "No Secrets: guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse 2000"

What to do if you are Worried a Child is being Abused 2006

Information Sharing: Guidance for practitioners and managers by HM Government 2009

Equality Act 2010

This is not an exhaustive list and further guidance is available from Scottish Children's Reporter Administration - <https://www.scra.gov.uk>

6. PARTNERSHIP WORKING AND THE SHARING OF INFORMATION

As a provider of front line services Mears Group Plc supports the sharing of information and will work in partnership with the client (and where appropriate with statutory agencies e.g. the police), to help with the safeguarding of children and vulnerable adults.

When sharing information Mears Group Plc will have regard to the Data Protection Act 1998 and **General Data Protection Regulation (GDPR)** (Regulation (EU) 2016/679) will ensure that information is shared and stored correctly. [The internal Information Security team within the Mears Group Plc assists in all compliance and governance matters in this regard]. Mears Group Plc has a policy statement on Data Protection which is available on the Company intranet.

Mears Group Plc will ensure that any concerns raised in relation to abuse or exploitation of children or vulnerable adults will be dealt with discreetly and sensitively with the staff member or individual raising the concern, and the information passed to our client or statutory agencies e.g. the police, will be done so in accordance with contractual, statutory and regulatory requirements. All information in relation to such a concerns will be kept secure and any communication on the matter will be done in a secure manner. In addition, Mears Group Plc will make sure that any information shared is necessary, proportionate, relevant, accurate and timely.

If there is any doubt as to whether the information should be shared, advice can be sought from the Information Security Team within Mears Group Plc. The Legal Team is available to provide assistance where necessary.

Further guidance on how to share information legitimately can also be found at https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/277834/information_sharing_guidance_for_practitioners_and_managers.pdf

7. SAFER RECRUITMENT

Mears Group has a robust recruitment checking and vetting process including verification of the candidates' identity, employment references and the right to work in the UK checks.

In addition, when recruiting for a position of trust Mears Group Information Security team will use the Disclosure & Barring Service (DBS) check to assess the

candidates' suitability for the post. Any existing employee who is offered a new position within Mears Group Plc will also be required to undertake a new DBS application if the post involves greater access to, or responsibility for vulnerable groups, or working with a different client group, regardless if they have been subject to a previous DBS application. Mears Group Plc Board have confirmed that all existing Mears Group employees, who have previously undertaken a DBS application relevant to their current post, will be required to undertake a self-declaration on a three-yearly basis.

Mears Group Plc complies fully with the DBS Code of Practice and undertakes to treat all candidates fairly and not to discriminate unfairly against any subject of a DBS certificate on the basis of conviction or other information revealed. Mears Group has a policy statement on Disclosure & Barring Service checks which is available on the Company intranet.

In line with current legislation the majority of our current posts do not require standard or enhanced checks. This is regularly reviewed however and employees will have a standard or enhanced check if required.

8. REPORTING A SAFEGUARDING CONCERN

It is not the responsibility of Mears Group staff to decide whether a child or vulnerable adult is being abused but it is the responsibility of all staff to be aware of and alert to indicators of abuse and to report all concerns and suspicions immediately, in accordance with the approved procedures.

Mears Group has a safeguarding procedure which details how staff can report concerns/suspensions of abuse and has appointed a number of Safeguarding Officers to help deal with any concerns raised by staff, volunteers, contractors or Board Members. The procedure is detailed in Appendix B and is also available on the Company Intranet.

9. TRAINING

All managers have responsibility for identifying safeguarding training needs for their staff, contractors and volunteers, relevant to their roles.

An overview of safeguarding is provided as part of the Mears Group Corporate Induction, relevant to job roles.

Staff who are front line and those staff appointed as Safeguarding Officers will receive more in depth training.

Refresher training will be provided at regular intervals.

Safeguarding Officers and the Learning & Development team are jointly responsible for maintaining records of all safeguarding training undertaken by staff. All managers are responsible for ensuring that new staff, contractors and volunteers are made aware of their safeguarding responsibilities during the induction process.

10. ACCOUNTABILITY AND MONITORING

Corporate responsibility for ensuring that Mears Group fulfils its safeguarding duties is the responsibility of the Mears Board.

The Safeguarding Officers who are suitably trained will be responsible for:

- Ensuring their contact details are accurate and up to date and are clearly displayed within each branch
- Establishing and maintaining contact with our clients' safeguarding officer(s)
- Ensuring they have accurate and up to date contact details for our clients' safeguarding officer(s)
- Receiving and recording information regarding any children or vulnerable adult protection concerns raised
- Working with Branch Managers, HR and Legal, advise staff on the application of this policy
- Acting as the point of contact & liaising with our clients and/or the relevant statutory agencies as appropriate, regarding any safeguarding concerns
- Maintaining an up to date knowledge of safeguarding legislation and codes of practice ensuring that staff training methods and content are updated to reflect any changes
- Participating in the review of this policy and procedure

All members of staff must ensure they are familiar with the safeguarding procedures relevant to the area in which they work and must ensure the activities

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they are involved in during the course of their work are carried out in accordance with this policy and procedure.

All Managers are responsible for ensuring that the services they provide are carried out in a way that is consistent with the aims and objectives of this policy.

The Policy Owner will lead the review of this policy every 2 years and will ensure it is updated more often, if required by changes in legislation.

11. FURTHER INFORMATION

For further information, guidance and support on the implementation of this Safeguarding Children and Vulnerable Adults Policy & Procedure please contact your Safeguarding Officer, HR Business Partner, HR Advisor Team, HR Legal Team or the Group HR Director

APPENDIX A — TYPES OF ABUSE

“Abuse” includes violence, harassment, threatening conduct, and any other conduct giving rise, or likely to give rise, to physical or mental injury, fear, alarm or distress. Appendix A clearly states the types of Abuse.

Abuse may consist of a single act or repeated acts. It may be an act of neglect or an omission to act.

Abuse can occur in any relationship and it may result in significant harm to, or exploitation of, the person subjected to it.

Children and/or vulnerable adults may be abused in a family or in an institutional or community setting, by those known to them or, more rarely, by a stranger, for example via the internet. They may be abused by an adult or adults, or another child or children. Some of our service users have complex and multiple needs so it is possible they may be both victims and perpetrators.

The following is a description of types of abuse. The list is not exhaustive. Further information and advice is available from the Safeguarding Officers.

Physical abuse

Physical abuse may involve hitting, shaking, slapping, pushing, kicking, throwing (in the case of children), poisoning, burning or scalding, drowning, suffocating, misuse of medication, restraint or inappropriate sanctions. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces illness in a child or vulnerable adult.

Sexual abuse

Sexual abuse may involve forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration [for example, rape or oral sex] or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse [including via the internet]. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Sexual abuse of vulnerable adults includes rape and sexual assault or sexual acts to which the vulnerable adult has not consented, or could not consent or was pressured into consenting.

Sexual exploitation

Sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. Child sexual exploitation can occur through the use of technology without the child's immediate recognition; for example being persuaded to post sexual images on the Internet/mobile phones without immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person's limited availability of choice resulting from their social/economic and/or emotional vulnerability.

Sexual exploitation of vulnerable adults includes any actual or attempted abuse of a position of vulnerability, differential power, or trust, for sexual purposes, including but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another.

Emotional/Psychological abuse

In the case of a child this may:

- Include persistent emotional maltreatment such as to cause severe and persistent adverse effects on the child's emotional development.
- Include conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.
- Include not giving the child opportunities to express their views, deliberately silencing them or making fun of what they say or how they communicate.
- Feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction.
- Involve seeing or hearing the ill-treatment of another.
- Involve serious bullying [including cyber bullying], causing children frequently to feel frightened or in danger, or the exploitation or corruption of children.

Some level of emotional abuse is involved in all types of maltreatment of a child, though it may also occur alone.

Psychological abuse of vulnerable adults may include emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, stalking, verbal abuse, isolation or withdrawal from services or supportive networks.

Self-Harm

Children and vulnerable adults who self-harm must be considered under the safeguarding procedure.

Female Genital Mutilation (FGM)

Female Genital Mutilation (FGM) is the partial or total removal of external female genitalia for non-medical reasons. It's also known as female circumcision, cutting or sunna. Religious, social or cultural reasons are sometimes given for FGM. However, FGM is dangerous and it is a criminal offence to perform FGM in this country or to take someone abroad with the intention of making them undergo FGM.

Specific information, advice and support on FGM is available from the NSPCC FGM helpline: **0800 028 3550** or email fgmhelp@nspcc.org.uk

Neglect and acts of omission

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- Provide adequate food, clothing and shelter [including exclusion from home or abandonment];
- Protect a child from physical or emotional harm and danger;
- Ensure adequate supervision (including the use of inadequate caregivers);
- Ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs

In the case of vulnerable adults it may 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, adequate nutrition and heating.

Financial or material abuse (vulnerable adults)

This may include theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

Discriminatory abuse

This may include race, sex, culture, religion, politics, that is based on a person's disability, age or sexuality and other forms of harassment, slurs or similar treatment, hate crime.

Institutional abuse

Institutional abuse although not a separate category of abuse in itself, requires specific mention simply to highlight that children or adults placed in any kind of care home or day care establishment are potentially vulnerable to abuse and exploitation. This can be especially so when care standards and practices fall below an acceptable level as detailed in the contract specification.

Multiple forms of abuse

Multiple forms of abuse may occur in an ongoing relationship or an abusive service setting to one person, or to more than one person at a time, making it important to look beyond single incidents or breaches in standards, to underlying dynamics and patterns of harm. Any or all of these types of abuse may be perpetrated as the result of deliberate intent and targeting of vulnerable people, negligence or ignorance.

Domestic abuse

Government definition of Protection from Abuse (Scotland) Act 2001 or Domestic Abuse Act 2018.

Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality.

This can encompass, but is not limited to, the following types of abuse:

- psychological
- physical
- sexual
- financial
- emotional

Controlling behaviour is: a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

Coercive behaviour is: an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim."

It is important to recognise that children or vulnerable adults may be the victims of domestic abuse themselves or be affected by it occurring within their household. This is likely to have a serious effect on their physical and mental wellbeing. Where this is the case then safeguarding procedures apply.

Terrorism/ Radicalisation

Children and/or vulnerable adults may be at risk of radicalisation and of being drawn into terrorist or radicalisation activity. Where there are concerns this may be the case then safeguarding procedures will apply.

Modern Day Slavery

Can be defined as, but not limited to: -

Forced labour – any work or services which people are forced to do against their will under threat of mental or physical punishment or through coercion.

Debt bondage or bonded labour – when people borrow money they cannot repay and are required to work to pay off the debt.

Human trafficking – involves transporting, recruiting or harbouring people for the purpose of exploitation (e.g. financial, sexual etc)

Child slavery – child slavery occurs when a child is exploited for someone else's gain. It can include child trafficking, child soldiers, child marriage and child domestic slavery.

Forced and early marriage – when someone is married against their will and cannot leave the marriage (child marriages can be considered slavery).

Should it be identified that an SU is a victim of Modern Day Slavery the Safeguarding procedures will apply.

APPENDIX B - PROCEDURE

It is not the responsibility of Mears Group staff to decide whether or not abuse has taken place. We do however have a responsibility to act if there is a concern about the welfare or safety of a child or vulnerable adult and to pass those concerns to our clients (or in some cases to statutory agencies e.g. the police).

Mears Group operates confidential reporting systems so that anyone (service users, staff, students, contractors and the general public) who suspects that abuse is taking place, or is concerned, can bring this to our attention (refer to Whistleblowing and Complaints Procedures). Mears Group will act upon information received through these channels, as per this procedure.

Alternatively, the following may indicate that a child or vulnerable adult is being harmed or is at risk:

- Observations or signs and symptoms of abuse.
- Allegations or reports made by another person.
- An allegation or "cry for help" by a child or vulnerable adult saying that they are being mistreated.
- An admission or "cry for help" from somebody who says they are harming a child or vulnerable adult.

WHAT TO DO:

When a child wants to confide in you, do:

- Be accessible and receptive, give them time and attention
- Listen carefully, and do not directly question the child
- Take it seriously
- Allow the child to give a spontaneous account; do not stop a child who is freely recalling significant events
- Reassure children they are right to tell, but that you will have to tell other professional people in order to access the correct support.
- Reassure the child that you are glad they have told you, they have not done anything wrong, explain what you are going to do next, and that you will need help to keep the child safe.
- Make careful records of what is said - immediately. Including timing, setting and people present, the child's presentation as well as what was said. It is important to remember that notes/recordings could be called in evidence as part of any police investigation or court proceedings therefore notes should not be disposed of. Use the child's own words where possible.
- Maintain professional confidentiality

Don't:

- Panic
- Speculate or jump to conclusions
- Try to get the child to disclose
- Confront or accuse anyone
- Promise to keep it a secret

When a vulnerable adult discloses abuse or an incident occurs, do:

- Ensure immediate safety
- Intervene early
- Treat information seriously
- Listen carefully, stay calm
- Preserve evidence wherever possible
- Make a written record of the incident, allegation or concern
- Fill out an Incident Report
- Maintain professional confidentiality

Don't:

- Panic
- Speculate or jump to conclusions
- Confront or accuse anyone
- Ask leading questions (use TED - "Tell me, Explain, Describe")
- Promise to keep it a secret

In the case of a gradual build up of concern, keep a record of events as they occur, noting the date and time, any conversation with the child or vulnerable adult, parents, carers or any other person. The significant contact database is designed for this purpose and should be kept in the address details case file.

It may not always be advisable to share concerns or allegations of abuse with a parent or carer. Always seek advice from the Safeguarding Officer before discussing the matter with anyone, to ensure that if an investigation is necessary it is not jeopardised in any way.

Reporting Suspicions or Allegations:

You may be worried about reporting concerns, suspicions or allegations. You may be uncertain whether there is really evidence of abuse or not. There may turn out to be an innocent explanation for what has occurred. However, if you have concerns that a child or vulnerable adult is suffering harm, or is likely to suffer harm, it is very important you share this with the Safeguarding Officer without delay.

If the Safeguarding Officer is unavailable contact your Line Manager or the HR Advisor team at Gloucester Head Office. They will be able to advise and support you in a confidential and objective way. Please remember that whilst talking informally to others may also be helpful, you must retain the boundaries of confidentiality at all times.

Where an allegation is not deemed to be a safeguarding matter the Mears Group complaint process will be followed.

Where it is deemed to be a safeguarding matter, the Safeguarding Officer (or their substitute) will record the issue on the contact database or via the incident reporting procedure. He or she will also inform the client. Your Line Manager and Safeguarding Officer, in partnership with the client, will agree next steps such as the collation of any additional information, the involvement of any relevant statutory agencies or Local Authorities, appropriate measures to be taken etc.

The Safeguarding Officer will continue to act as main point of contact with the client and will provide advice and support until the matter is fully resolved.

Victim Consent

In cases affecting 16 year olds or above, the victims' consent will generally be sought to actions being taken regarding safeguarding. The Safeguarding Officer will advise on this, taking into account the following:

In cases affecting 16 and 17 year olds or above, the consent of the young person will generally be sought. There are cases however, where gaining consent may not be immediately possible, for example if the risk is deemed high and the young person is not available to gain consent from. However, all safeguarding concerns will be reported even if the young person does not give consent.

The presumption is that adults have mental capacity to make informed choices about their own safety and how they live their lives, unless there is a reason to doubt a person's capacity to make decisions. Issues of mental capacity and the ability to give informed consent are central to decisions and actions in Safeguarding Adults at Risk. All interventions need to take into account the ability of adults to make informed choices about the way they want to live and the risks they want to take. All decisions taken in the Safeguarding Adults process must comply with the The Adults with Incapacity (Scotland) Act 2000

It is always essential in safeguarding to consider whether the adult at risk is capable of giving informed consent. If they are, their consent should be sought. This may be in relation to whether they give consent to:

1. a Safeguarding Adults investigation from our client going ahead in response to a concern that has been raised to a staff member from the Mears Group. Where an adult at risk with capacity has made a decision that they do not want action to be taken and there are no public interest or vital interest considerations, their wishes must be respected. The person must be given information and have the opportunity to consider all the risks and fully understand the likely consequences of that decision over the short and long term.
2. the recommendations of an individual protection plan being put in place by our client.
3. an interview from our client
4. certain decisions and actions taken during the Safeguarding Adults process with the person or with people who know about their abuse and its impact on the adult at risk.

If, after discussion with the adult at risk who has mental capacity, they refuse any intervention from the client, their wishes will be respected unless:

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

If a person appears to have given consent to an activity that may be abusive - if consent to abuse or neglect was given under duress, for example, as a result of exploitation, pressure, fear or intimidation, or if the person is under duress not to give consent to any investigation or action this should also be taken into account. This apparent consent / non-consent should be disregarded.

Even if the person refuses consent to actions being taken regarding safeguarding, this must be recorded on the customer contact data base.

Minimising the risk of abuse by staff or false allegations against staff it is essential that care is taken to minimise the possibility for abuse and misunderstanding and misinterpretation. False allegations are rare but general good practice will help prevent them. The following list includes behaviour that staff working where there are children should **never** engage in:

- Physical violence towards a young person;
- Kissing children;
- Rough or sexually provocative games;
- Making sexual comments;
- Inviting or allowing children into their home;

- Giving a child a lift in their car except in emergencies (unless it is part of their job);
- Letting allegations, made by anyone, go unacknowledged, unresolved or not acted upon.

Staff accused of abuse

If a Mears Group staff member is accused of abuse the Line Manager needs to communicate this with the relevant Operational or Functional Director. Where it is deemed a safeguarding incident, the staff member will immediately be suspended without prejudice pending investigation, asked to leave the premises of the project and not make contact with other staff members. Suspension does not imply wrong doing but offers protection to both the staff member and service user whilst an investigation takes place. Mears Group Human Resources department will lead the investigation internally and where appropriate refer to the Disciplinary Policy and Procedure.

Such an allegation will be reported through the relevant channels as per the process outlined in this document.

Where a staff member is accused of abuse, support around this will be offered to them from Mears Assist.

For further information, guidance and support on the implementation of this Safeguarding Children and Vulnerable Adults Policy & Procedure please contact your Safeguarding Officer, HR Business Partner, HR Advisor Team or the Legal Department.

Appendix C - Safeguarding AASC Contract Specific

It is acknowledged that Authority Service Users are more likely to have single or multiple safeguarding issues. All staff in contact with Service Users will be trained to recognise safeguarding issues and will be empowered to report to their manager who will follow the safeguarding procedure. Mears recognises and is committed to prevention and protection as well as reactive responses when a safeguarding situation arises.

All staff members are aware of the Safeguarding Policy & Procedure, they are aware of the line management reporting process should they suspect that an SU has specific needs or is at risk, staff are also aware of the identity of the Safeguarding Officer for their specific region and how to report any incident or seek advice from them, please make reference to – **Mears Group: Accident, Incident, Occurrence Reporting and Investigation procedure.**

Mears Group will identify Safeguarding Officers in each region where any staff member can seek further clarification on any safeguarding matter that they may have in relation to a specific service user.

Where we identify a safeguarding concern in relation to an SU who has a specific need or be at risk, they will be allocated a Residential Welfare Manager and create a record of this on our IT system VECO. Any action / referral / signposting will be noted on VECO. The regional managers will be designated safeguarding officers for their area and be responsible for monitoring any safeguarding issues locally with the Residential Welfare Manager (eg daily and / or at 1-2-1s depending on the issue). The Safeguarding officer at the SDC using VECO records, will notify the Authority of the need or risk identified and the action that they intend to take, including referral to external agencies, LA, NHS (Health) or Third Sector. The RWM will continually update the SU's VECO record with any additional information/referrals made etc and also close any incidents on VECO as necessary.

Service Users Experience – IA Accommodation; Health/Welfare

A Service User (SU) record will be created on VECO upon arrival at IA accommodation, this will include all relevant information in relation to the SU's including but not limited to medical; cultural; religious; family make up. As part of this record Mears staff will ensure that any safeguarding concern/issues raised are clearly identified within the SU record and will include details of any investigation, referrals made and outcomes. The VECO record will be updated regularly with any relevant amendments or changes in circumstances. Training will be provided in relation to VECO – see Mears Training manual to confirm full details of training provided.

Within 24 hours of arriving at the IA accommodation SU's will complete an induction. As part of this induction process the Service Users (SU) will complete a Welfare Needs

Assessment. If and when the Authority makes us aware that they have submitted a referral on a SU's behalf in relation to a specific need or risk, we will ensure that the SU's VECO record will be update to reflect this referral and ensure the RWM assigned to the SU will monitor the referral to ensure that it is acted upon and will inform the Authority via the SDC of any update on the referral and any outcomes we are made aware of.

If there should be a medical incident throughout the SU's stay in the accommodation, Mears staff will follow the **Medical Incident Process** along with the **GP Registration Process** ensuring that all medical needs are met. If urgent medical attention is required on arrival at IA or DA accommodation, staff will follow the "**Medical Assistance Process**" – See relevant process map.

During the induction process, the SU will also be provided with literature in their given language to ensure they fully understand information provided, which will be regionally specific, along with a Service User Handbook and will include:

- Information sheet (with important telephone contacts for support)
- Local area information including GP's, Hospital and Pharmacy details
- Guides and advice leaflets (Abuse, LGBT, Hate Crime; Domestic abuse etc.)

The Welfare Needs Assessment document will identify:-

Support with personal care needs for example: Glasses/Contact Lenses; Hearing Aid; Dentures; Moving & mobility arrangements; specialist equipment required; Continence needs etc.

Medical Requirements: Including prescriptions required; mental and physical health issues/concerns. The staff member complete the Welfare Needs Assessment will advise SU to attend screening appointments with Health who can arrange any medical follow up appointments; diagnosis of physical or mental health conditions and provide advice on prescriptions etc.

Cultural/Spiritual Needs: Identify any additional needs or requirements in relation to the SU's religious or spiritual beliefs

Whilst in DA or IA accommodation each SU will be provided with an initial screening by the Health provider, at which point any medical or care needs that have not been discussed through the Welfare Needs Assessment will be picked up and appropriate referrals made to specialist agencies or medical professionals. We do add a second layer of screening when the SU reaches DA and then notify the Authority, asking for a decision on suitability, followed by fortnightly visits.

SAFEGUARDING CHILDREN & VULNERABLE ADULTS POLICY & PROCEDURE



We will provide the necessary transport or cost of transport as and when required to ensure that the SU is transported to the LA operated accommodation in a safe, secure and sensitive manner, this may be via our transportation service and will follow the transport process map, which all staff will be aware of.

Transportation of Vulnerable Service Users / Service Users with specific / special needs - To ensure that we are able to identify the varying needs of different Service Users, it is vital that we have in place a team of appropriately trained Service Delivery Centre staff who will be responsible for assessing each individual accurately, promptly and for a variety of differing needs when allocating a vehicle. The training will also be delivered to all drivers who are responsible for the transportation of Service Users.

Residential Welfare Managers/Housing Managers – IA/DA

As in paragraph 1.2.5.1 Schedule 2; section 1 SU's will be provided with a Housing Manager (HM) and Residential Welfare Manager (RWM) (where necessary) See job descriptions to confirm roles and responsibilities and also Mears Training Manual which will ensure RWM and HM have the ability to identify and address any safeguarding issues/concerns or needs of the SU.

The HM role, will also include fortnightly property inspections in DA accommodation (see **Property Inspection Process Map**). As part of this inspection their role will be to ensure the well-being of the service user. If they should identify or if the SU discloses a Safeguarding concern, issue, risk or need the HM will refer onto the Residential Welfare Manager Team to ensure that the SU is provided with appropriate support, advice and assistance. The RWM will then arrange a follow up visit to further discuss this with the SU.

During fortnightly property inspections Housing Managers will also complete a basic welfare form, identifying any safeguarding / potential issues that may arise during conversations with SU or that the HM witnesses, they will then refer the SU onto the Residential Welfare Manager(unless the need is urgent and will refer straight to the regional manager.) The RWM will arrange a follow up visit and if necessary refer or signpost as needed. The RWM will continue visits throughout the SU's stay in DA accommodation as and when required. The HM will refer onto RWM who will inform SDC who in turn will inform the Authority of any specific safeguarding issues or concerns raised. They will also keep up to date and accurate records off all communications on VECO, including attaching any welfare forms that may be completed any referrals made and the conclusion of such referrals, this will ensure a clear and conscience audit trail. Safeguarding will be a standing agenda item on each local officer's 1-2-1 / performance review.

During the follow up visits, the RWM will discuss and get the required consent to enable them to make relevant referrals, they will then be responsible for referring SU onto the

necessary agency e.g. Migrant Help; Health or third sector agency (relevant to the SU's needs).

There is a responsibility to ensure that SU's who are at risk or with specific needs are referred onto relevant Local Authority teams for a care and support assessment. This need should be identified as part of the screening process delivered by the Health provider at the IA accommodation and any requirement for care or support whilst in DA accommodation will be recorded on the SU's record on VECO and updated regularly by the RWM as and when necessary. The RWM allocated to the SU will make relevant referrals to Local Authority and ensure this is followed up until such time as a care and/or support assessment is undertaken and recommendations are implemented.

As part of this process the RWM will liaise with relevant LA staff to ensure the SU fully understands the process and if and when they are transported to their LA operated accommodation the SDC will follow the transport process, which includes reference to attending medical related appointments etc. As part of the transport process the SDC will ensure that the transport provided meets the SU's needs and requirements.

The RWM will continue with regular visits with the SU, ensuring that the referrals have been followed up by the agency and concerns/needs are being addressed. They will ensure that VECO records are update will all relevant information in relation to referrals and outcomes.

Allocation of IA/DA Accommodation where Services Users require adaptations or special requirements

On information received from the Authority in relation to the SU's, specific needs or notification there is a risk or special requirement, when allocating suitable accommodation, this could include if sharing a room or accommodation is suitable. SDC and the IA and DA teams will take into account any specific requirements, whether medical, cultural or religious when allocating the SU accommodation.

SDC, IA and DA teams will follow the Allocation Process when determining suitable accommodation for SU, this process will also be followed if the SU is being relocated to other accommodation as per Annex C.

As part of the RWM job role there is a responsibility to ensure that SU's who are at risk or with specific needs are referred onto relevant Local Authority teams for a care and support assessment.

The location of Accommodation for Service Users in a Specified Region; and the information to be shared with Local Authorities and RSMPs to support their planning and activities.

Specific DA requirements can be anticipated from the moment a Service User moves into IA. We note that Service Users could have physical disabilities who will need adaptations to the Accommodation before dispersal, or subject to Bail Accommodation, for which we

could only allocate DA within a restricted location. Our DA Managers and Initial Accommodation Manager will be working closely, to deal with such specific requirements and ensure they are fulfilled prior to sending the Accommodation Proposal to the Authority. This process and proactive attitude will reduce the rejections of our Accommodation Proposals and will minimise inconvenience for Service Users.

In the event that the Authority rejects an Accommodation Proposal, we will review the Authority's objections and look for further guidance and instructions on how to rectify the issues in a timely manner. Where we will be unable to comply with the Authority's requirements immediately, we will source and allocate a Temporary Dispersal Accommodation for the Service User, until all necessary adaptations or measures have been completed and the Authority has agreed that we can now safely relocate the Service User into a DA.

We are aware that all DA is to be provided within the specified region and will comply with all requirements set in Schedule 2, Section 2.4, by ensuring the allocated Accommodation is appropriate for the needs of Service Users. We note the necessity of considering all relevant factors, including:

- The availability and concentration of DA of the required configuration, size and design

- The cultural compatibility of the environment, including the proximity of others speaking the same language, people of the same nationality, culture or religion

- The capacity of local health, education and other support services

- The absence of any reported social tension incidents at the time of allocation

- The level of risk of increased social tension if Service User numbers increase within the relevant area

VECO will capture relevant information related to Service Users, such as age, language, religion, medical needs and food preferences, which will be critical for the SDC when allocating Accommodation. VECO will allow insight of others living at the same Accommodation and if this would be appropriate for the new Service User.

Partnership Working/Liaising with Local Authorities

If an SU is identified as requiring a referral to LA teams for care and or support assessments, our RWM will build relationships with said LA and / or appropriate referring agencies and will refer SU onto appropriate agencies following their given referral process (these referral processes may be different dependent on the region where the SU is allocated their property). All information in relation to the referral will be added to sensitive notes within the SU's VECO record and the Authority will be notified of the referral as stated in 1.2.5.2.

SAFEGUARDING CHILDREN & VULNERABLE ADULTS POLICY & PROCEDURE



As part of the RWM and Senior Management role, there will be a requirement to attend multi-agency forums and case conferences for complex SU's in relation to ensuring safeguarding and wellbeing of SU's with specific needs or those at risk are investigated and monitored to a suitable conclusion. HM/RWM and partnership managers will build relationships with LA, they will attend the DA properties with LA or relevant health provider as and when this is requested to ensure they will have access to the property and the SU.

These forums will include agencies from the statutory and voluntary sectors representing health, education, LGBTI, children etc and will continue for the term of the AASC contract. It will be the RWM's and Senior Management's responsibility to ensure that we attend these on a regular basis. These forums may differ from region to region.

As part of the RWM job role, there is a responsibility to ensure that SU's who are at risk or with specific needs are referred onto relevant Local Authority teams for a care and support assessment. The RWM will liaise with the SU and the Health provider staff to ensure that access to the SU accommodation will be provided and that SU is kept fully update on the progress of their assessment in a manner in which they fully understand e.g. specific language, sign language, brail etc.

The RWM will also attend regular case conferences with all agencies including health providers and Migrant Help as and when required for more complex cases.

Safeguarding Specific Training

Mears Group training manual contains the training package provided to all staff. There is safeguarding specific training that will be undertaken by IA/DA Team and any other relevant staff to provide them with the knowledge to assist the SU and ensure they are confident in identifying SU's at risk or with specific needs. Training undertaken will be logged by our training team and refresher training provided as needed. Anyone off or specific changes will be part of a briefing/cascade arrangement. Safeguarding will be a standing agenda item at regular team meetings and 1:1's, where issues and "lessons learned" can be shared. This approach to safeguarding should keep this current and relevant and in line with the Authorities Safeguarding strategy and meets accepted good practice

The safeguarding training will be regional specific and reflect the differences in legislation throughout the UK. The qualification gained is **ProQual Level 2 Award in Understanding the PREVENT and Safeguarding Strategies** and will include the following:-

- Adults at Risk
- Children at Risk – Stranger Danger
- Risk Factors for Abuse

- Who can be an abuser?
- The 4 R's – Recognise, Respond, Refer, Record
- Types of Abuse
 - Physical
 - Emotional Abuse
 - Sexual
 - Neglect
 - Sexual Exploitation
 - Female Genital Mutilation
 - Financial Abuse
 - Domestic Abuse
 - 'Honour Based' Violence
 - Modern Slavery
 - Human Trafficking
 - Discriminatory Abuse
 - Hate Crime
 - Organisational Abuse
 - Cyber Bullying
 - Self-Harm
 - Suicide
 - Drug and Alcohol Abuse / Dependency
 - PDST
 - Peer on Peer Abuse
 - Barriers to adults reporting
 - Barriers to children reporting

The training needs of staff will be reviewed on a regular basis, with emphasis given to annual updating of specific training requirements. It is recognised that safeguarding issues are changing as the SU profile changes, training will be reviewed and updated to reflect this. Each staff member has a training log and CPD as part of their HR record, which will ensure that training is up to date and relevant to the Authority's safeguarding strategy. Staff and managers are sent reminders stating that the training is due to expire and refresher training is required. The enforcement of this is managed by the Mears Learning team.