**St Mary’s Hospital**

**Safeguarding policy and guidelines**

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**1. Introduction**

Safeguarding is everyone’s responsibility. At St Mary’s this includes trustees, staff, volunteers, visitors, and residents and their families. We all have a responsibility to each other to ensure that St Mary’s is a safe environment for all. This safety includes protection from all forms of abuse including physical, sexual, emotional and financial, and neglect.

Safeguarding concerns the particular care which needs to be taken for those who are less able to protect themselves namely adults at risk (otherwise known as vulnerable adults or adults in need of protection), and children under the age of 18.

The following guidelines outline St Mary’s procedures to minimise the risk of abuse or exploitation and to provide guidance in the event of a concern or an alleged incident. They should be read in conjunction with the References in the Appendix, copies of which are held by the Safeguarding Officer and Clerk to Trustees.

**2. Personnel and contacts**

**If there is concern that a child or adult is at imminent risk of serious harm the police should be called on the emergency number 999 immediately**

* Designated Safeguarding Officer

Sue Porter, Scheme Manager

[Susan.Porter@stmarysalmshouses.org.uk](mailto:Susan.Porter@stmarysalmshouses.org.uk)

Tel: 01243 783377 Mob 078701678

* Clerk to the Trustees

Ivan Western

[Ivan.Western@stmarysalmshouses.org.uk](mailto:Ivan.Western@stmarysalmshouses.org.uk)

Tel: landline 01243 783377

Mob: 0784 320 6458

* Revd Jack Dunn (Chair of Safeguarding Committee) Tel: 07960 512 433

Jack.Dunn@chichestercathedral.org.uk

* Chair of Trustees

Dean of Chichester Cathedral

* Custos

Email: custos@stmarysalmshouses.org.uk

Tel: 07919 092504

* Assistant Diocesan Safeguarding Officer

Julie Gross

julie.gross@chichester.anglican.org

Tel: 07467 955750

* West Sussex County Council Social Services Department:

Adult Safeguarding Concerns: 01243 642121

Children’s Access Point: 01403 229900

(Under normal circumstances the Safeguarding Officer will be responsible for reporting specific incidents to WSCC and liaising with the Diocesan Safeguarding Team as appropriate)

* Other agencies able to give advice or support:

Samaritans Tel: 116123

Age UK Tel: 0800 678 1602

Hourglass Tel: 0808 808 8141

(Previously Action on Elder Abuse)

**3. Definition of adult at risk (otherwise known as a vulnerable adult or an adult in need of protection):**

According to The Care Act 2014an adult at risk is any person who is aged 18 years or over who

* Has needs for care and support (whether or not the local authority is meeting any of those needs)
* Is experiencing, or is at risk of, abuse or neglect
* And as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it.

This mayinclude a person who:

* Is elderly and frail
* Has a mental illness including dementia
* Has a physical or sensory disability
* Has a learning disability
* Has a severe physical illness
* Is a substance misuser
* Is homeless

**4. Principles of adult safeguarding**

It is the policy of the Trustees, in accordance with the intentions of the Care Act 2014, that the following principles of safeguarding adults are followed:

* **empowerment** - presumption of person led decisions and informed consent
* **prevention** - it is better to take action before harm occurs
* **proportionality** - proportionate and least intrusive response appropriate to the risk presented
* **protection** - support and representation for those in greatest need
* **partnerships** - local solutions through services working with their communities
* **accountability** - accountability and transparency in delivering safeguarding.

Allegations of abuse (current or historic) will be viewed seriously and appropriate action will be taken. The Trustees will collaborate fully with the statutory and voluntary agencies concerned with child or adult abuse. The charity will not conduct any serious investigations on its own.

**5. Types of abuse**

The Department of Health in its ‘No Secrets’ 2000 report suggests the following as the main types of abuse:

* **Physical abuse** - including hitting, slapping, pushing, kicking, misuse of medication, restraint, or inappropriate sanctions.
* **Sexual abuse** - including rape and sexual assault or sexual acts to which the vulnerable adult has not consented, could not consent or was pressured into consenting.
* **Psychological abuse** - including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks.
* **Financial or material abuse** - including theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.
* **Neglect and acts of omission** - including ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.
* **Discriminatory abuse** - including 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 and hate crime.
* **Domestic abuse** -Home Office Definition 2004-‘Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are, or have been intimate partners or family members, regardless of gender or sexuality.’

Churches in the UK are now also beginning to recognise:

* **Spiritual abuse –** a form of emotional or psychological abuse characterised by coercive and controlling behaviour in a religious context
* **Self-neglect**

The 2014 Care Act further identifies self-neglect as a possible safeguarding issue. However this is a complex area bound up as it is with the capacity and wishes of the individual. In the first instance concerns around self-neglect should be referred to the Scheme Manager to assess and take action as is necessary.

**6. Procedures to be followed in the case of suspected abuse**

**If there is concern that a child or adult is at imminent risk of serious harm the police should be called on the emergency number 999 immediately.**

Any resident who has concerns that they or another resident is being abused should consider contacting one of the following as soon as possible:

* The Designated Safeguarding Officer – the Scheme Manager
* The Clerk to Trustees
* The Custos
* The Diocesan Safeguarding Team

(Contact Details as in Section 2)

The charity will then implement its policy and procedures, in conjunction with other agencies, to resolve matters.

Any allegation of abuse will be handled sympathetically and sensitively whilst ensuring that no commitment or agreement is given at the outset. At this stage it is important to ensure that the individual is not in direct contact with the alleged abuser and that sensitivity is used when handling the situation.

The following actions will be taken by the charity in all cases of reported or suspected abuse:

* Ensure that the individual is safe, immediately calling the emergency services for assistance if necessary
* Ascertain the basic facts:
* Name of individual
* Date, time and place of the alleged abuse
* The whereabouts of the alleged abuser
* Whether the individual is aware that you will be sharing this information with others
* Details of the disclosure – record the individual’s own words rather than your thoughts or opinions
* The physical/emotional state of the individual including any observations about capacity
* Any physical injuries
* Record all the above information as soon as practicable using the form at Annex A. Be specific and factual in your records.
* Inform the Designated Safeguarding Officer as soon as possible. It is their responsibility to assess the nature of the allegation to report to the relevant authorities, such as Social Services, and to keep the board of Trustees fully informed at all times.
* If the Designated Safeguarding Officer is not available the Clerk, Chair of Safeguarding Committee, or Chair of Trustees should be contacted.
* Give a copy of your written record to the Safeguarding Officer, and keep a copy for yourself.
* Maintain confidentiality at all times. Both the alleged abuser and the person who is thought to have been abused have the right to confidentiality. Any possible criminal investigation could be compromised through unauthorised information being released. Confidential information may need to be shared with statutory agencies who will in turn also respect the privacy of the individual.

The Designated Safeguarding Officer will discuss the matter with the Clerk to Trustees or the Chair of the Safeguarding Committee and will proceed to gather information. If appropriate, a meeting will be arranged to include the Clerk, Chair of Trustee Safeguarding Committee, and Assistant Diocesan Safeguarding Officer, to establish the facts and agree actions. A full record of the meeting will be made.

After considering all the facts the Designated Safeguarding Officer will decide whether the incident should be reported to the Local Authority Safeguarding Department. If the police or other emergency services were called, the incident must be reported to the Authority.

Any serious incidents of this nature, which are reported to the Local Authority, must also be notified to the Charity Commission by the Clerk to Trustees.

The Board of Trustees will be updated on all safeguarding incidents (with as much detail as is appropriate) at each Trustees’ meeting.

**7. How to respond to a disclosure**

The person receiving the information about a disclosure should:

* Remain calm and in control, but do not delay in taking action. If a child or adult at risk discloses abuse there is a requirement to share the information with statutory authorities. Do not promise confidentiality or to ‘keep it a secret’. If necessary, call the emergency services.
* Use the first opportunity you have to say that you will need to share the information with others. Make it clear you will only tell the people who need to know and should be able to help. If on hearing this the individual chooses not to continue, accept this and, if appropriate, give them details of an agency such as Age UK, Hourglass or the Samaritans where they can talk confidentially to someone. (See details in Section 2)
* If an adult, not defined as an adult at risk, discloses abuse you should obtain their consent before sharing information with other agencies unless there is a risk to other adults or children.
* Listen carefully to what is being said. Allow the person to tell you ‘at their own pace’ and only ask questions for clarification. Do not ask leading questions. For example, ‘What happened?’ is acceptable but not ‘Were you hit?’
* Reassure the individual that they did the right thing in telling someone.
* Tell the individual what you are going to do next. Reassure them that they will receive continued support.
* Record and report the disclosure following procedures above (Section 6).

**8. Procedures for safe employment – Recruitment**

St Mary’s carries out a full best practice, recruitment process, which includes the following: • advertisement of the role.

• a job description and person specification for the role

• the development and use of an application form specific to the charity

• a shortlisting process that is documented and objective

• an interview by a panel (ie by more than one person)

• notes from the interview which are used to inform an objective selection decision

• formal rejection of unsuccessful candidates

• a formal written offer of employment

Once an appointment decision is taken, this will then be supplemented by appropriate pre-appointment vetting checks, including all of the following:

• verification of identity and right to work in the UK

• verification and/or declaration that an applicant is not legally disqualified from acting in the role

• verification of qualifications which are required for the post or which influence the appointment decision

• scrutiny of education and employment history to identify any gaps or periods spent outside the UK

• the receipt of references which the charity deems to be satisfactory

• a DBS disclosure, the result of which the charity considers satisfactory (level dependent on the role., i.e eligible for an enhanced or standard DBS check)

• a check of the Children’s Barred List or the Adults’ Barred List (if the role is eligible for this check)

Nobody who has a conviction for, or caution about, an offence against a child or adult will be able to hold a post or be a volunteer in a position that will bring them into contact with either.

All paid staff and volunteers should have clear roles established in the form of job descriptions explaining to whom an individual is accountable, those whose work they supervise and a description of that work. All staff should be aware of the St Mary’s Safeguarding Policy and Guidelines and of their own responsibilities in maintaining a safe and secure environment for residents, staff and visitors.

**9. Procedures for safe employment - Training**

St Mary’s uses the Social Care Institute for Excellence (SCIE) to provide all levels of Safeguarding training. The level required is dependent on role and previous experience but at a minimum.

Initially the courses should be completed within the first three months of employment with refreshers taking place at least every three years. The Clerk will maintain a record of safeguarding training which has been delivered.

The recommended training modules for staff and Trustees are as follows:

|  |  |
| --- | --- |
| All staff including Custos and Clerk | * Safeguarding Briefing as part of Induction * Completion of the SCIE Safeguarding Children and Adults an introduction training course. |
| Scheme Manager | * Safeguarding Briefing as part of Induction * Completion of the SCIE Safeguarding Children and Adults an introduction training course. * Safeguarding adults training course for managers and newly appointed safeguarding leads |
| Deputy Scheme Manager | * Safeguarding Briefing as part of Induction * Completion of the SCIE Safeguarding Children and Adults an introduction training course. * Safeguarding adults for housing staff training course |
| Trustees | * Trustees are recommended to undertake the SCIE Safeguarding Children and Adults Introductory Course. * Trustees will also be encouraged to take opportunities to develop their knowledge and understanding of their responsibility for safeguarding within the Charity by engaging with appropriate sources of learning * Sources of useful information on the role of Trustees in Safeguarding include : [Safeguarding training for charity trustees by SCIE (soundcloud.com)](https://soundcloud.com/user-884310192/safeguarding-training-for-charity-trustees) and [Safeguarding for charities and trustees - GOV.UK (www.gov.uk)](https://www.gov.uk/guidance/safeguarding-for-charities-and-trustees) |

Records of staff training will be held and updated by the Clerk, who will also inform individuals and their line manager when further training or updating is required and report to the Safeguarding Committee annually.

**10. Note on Child Safeguarding**

This policy deals primarily with the safeguarding of adults. Particular guidance on Child Safeguarding can be obtained from the West Sussex Child Safeguarding Board, and from the Diocese of Chichester Safeguarding Team.

**11. Publication, revision and circulation of policy**

* A copy of the Policy will be held in the Office of St Mary’s Hospital and will be available to read at all times in the residents’ lounge and via the website. A summary of who to contact will be displayed on noticeboards throughout St Mary’s Hospital and included in the welcome pack for residents
* Copies of the policy will be held by the Scheme Manager
* The Safeguarding Policy will be revised and approved annually.

**12. Approval**

**This policy has been approved for issue by the Board of Trustees of St Mary’s Hospital**

Signature:................................................................................

Name:.....................................................................................

Position:……………………………………………………………………………………………….

Date:.......................................................................................

This policy will be reviewed annually

Date for next review May 2024

**References:**

1. Home Office Code of Practice [Safe from Harm] (1993)
2. Safeguarding Vulnerable Groups Act 2006
3. Protection of Freedom Act 2012
4. House of Bishops Policy -Promoting a safe Church 2006
5. House of Bishop’s Policy for Safeguarding – update 2015
6. The Care Act 2014: Safeguarding Adults

**ANNEX A**

**RECORDING CONCERNS or REPORTS OF ABUSE**

**(See example on next page)**

|  |  |  |
| --- | --- | --- |
| **Date:** | | |
| **Name of person reporting alleged abuse:**  **Role** | | |
| **Details of person who may have been subject to abuse:**  **Name**  **D.O.B**  **Address:** | | |
| **When and where the incident occurred.**  **What has happened? What was the context?**  **What did the individual say? (Use their own words where possible)**  **Any observations about the individual’s state/capacity?** | | |
| **What action did I take?**  **Is the individual aware that this information may need to be shared with other agencies?** | | |
| **Signed** | **Position/Role** | **Date** |

**NB Give a copy to the Safeguarding Officer. Keep a copy yourself.**

**Annex B**

**Example of effective recording of safeguarding concerns**

|  |  |  |
| --- | --- | --- |
| **Date:** | | |
| **Name of person reporting alleged abuse:**  **Role:** | | |
| **Details of person who may have been subject to abuse:**  **Name**  **D.O.B**  **Address:** | | |
| **When and where the incident occurred.**  **What has happened? What was the context?**  **What did the individual say? (Use their own words where possible)**  **Any observations about the individual’s state/capacity?**  AS has been a resident at SMH for 7 years. She is physically frail and her short-term memory is poor, however she is able to look after herself physically without support.  At 10.00 am today (23.06.2018) I called on AS in her flat for her daily check. She appeared anxious and distressed and she immediately told me that she is worried about her grandson because he is ‘always hard up’ and she thinks he may be gambling. She told me that he repeatedly asks her for money and has recently borrowed her bankcard ‘for safe keeping’. When she asked for her card back last night, he became angry and she said he ‘pushed me out of the way’ as he left. AS became tearful saying that she does not want her grandson to get into trouble but she does not know how to sort this out.  AS has a bruise on her right forearm. Without her bankcard she has no access to her bank account; she has a small amount of cash in her flat. AS is aware that other services may need to become involved and she agrees to this. | | |
| **What action did I take?**  I reassured AS that she was right to tell me about this difficulty. I told her that I would discuss this with our Safeguarding Officer to decide what needs to happen next. I encouraged AS to call the Scheme Manager if she needs support and advice given if Scheme Manager is not available, and to let us know if her grandson is planning to visit again.  At 11.30am I spoke to the Safeguarding Officer and emailed her a copy of this report.  **Is the individual aware that this information may need to be shared with other agencies?** Yes | | |
| **Signed** | **Position/Role** | **Date** |

**NB Give a copy to the Safeguarding Officer. Keep a copy yourself.**