

# Adult at Risk Policy (Adult Safeguarding)

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## 1. Introduction

The purpose of this policy is to ensure the safeguarding of our patients. This means protecting the health, well-being and human rights of adults at risk, enabling them to live safely, free from abuse and neglect.

## 2. Other Related Policies & Procedures

- Adults at risk procedures
- Child protection policy
- Child protection procedures

## 3. Responsibilities

The law protects those who, because they have a physical or mental disability or a dependency on institutional services, are at risk from acts of maltreatment. It requires that any act, known or suspected, be investigated and that protective services are offered to those victims of abuse. (Department of Health, 2015. Care Action 2014. London: TSO)

Within any care setting there is the potential for abuse or accusations for abuse to arise. Mildmay Hospital is accountable for ensuring that there are “reliable systems, processes, and practices in place to keep people safe and to safeguard them from abuse and neglect” (CQC, 2015. Statement on CQC’s roles and responsibilities for safeguarding children and adults, London: Care Quality Commission). This policy and the associated procedure aims to address these issues and in doing so offer practical guidance on what procedures to follow should a case of abuse be suspected.

The policy relates to all staff, volunteers, patients, relatives and significant others, visitors and any services relating to Mildmay Hospital.

## 4. Aims

Safeguarding is everyone’s responsibility and aims to protect people’s health, wellbeing and human rights, and enable them to live free from harm, abuse and neglect.

## **The aims of adult safeguarding are to:**

- Stop abuse or neglect wherever possible
- Prevent harm and reduce the risk of abuse or neglect to adults with care and support needs
- Safeguard adults in a way that supports them in making choices and having control about how they want to live
- Promote an approach that concentrates on improving life for the adults concerned
- Raise public awareness so that communities as a whole, alongside professionals, play their part in preventing, identifying and responding to abuse and neglect
- Provide information and support in accessible ways to help people understand the different types of abuse, how to stay safe and what to do to raise a concern about the safety or well-being of an adult; and address what has caused the abuse or neglect.

The Care Act 2014 sets out the first-ever statutory framework for adult safeguarding, stating that Local Authorities are required to make enquiries into allegations of abuse or neglect. Safeguarding is mainly aimed at people with care and support needs who may be in vulnerable circumstances and at risk of abuse or neglect by others. In these cases, local services must work together to identify those at risk and take steps to protect them.

Local authority statutory adult safeguarding duties apply equally to those adults with care and support needs regardless of whether those needs are being met, regardless of whether the adult lacks mental capacity or not, and regardless of setting.

The support and protection of vulnerable adults cannot be achieved by a single agency. Every service has a responsibility. The hospital staff are not responsible for making a diagnosis of adult abuse and neglect, however, they are responsible for sharing concerns appropriately and referring to the relevant agency responsible for carrying out an assessment of need based on the safeguarding allegations.

## **5. Safeguarding Principles**

### **Mildmay recognises the following safeguarding principles:**

- **Empowerment:** Empowerment is about people being supported and encouraged to make their own decisions and provide informed consent. Empowerment:
- **Prevention:** Members of staff play a key role in preventing abuse and in taking positive action on suspicion of abuse or neglect.
- **Proportionality:** An important aspect of a person-centred approach to safeguarding is that services should act proportionately to the risk that is identified.

- Protection - the management of abuse allegations: When an allegation of abuse is made, the primary consideration must be to ensure the immediate and ongoing safety of the service user.
- Partnership: Partnership working is the cornerstone of effective safeguarding practice. In addition to working in close partnership with adults at risk, it is essential that professionals from different agencies are able to work together and coordinate their responses to safeguard adults at risk and prevent harm, abuse or neglect from occurring.
- Accountability and transparency in delivering safeguarding: Adults at risk should be aware of the actions that professionals are intending to take, what their role is within safeguarding, and they should be confident that professionals are also aware of each other's roles.

## 6. Safer Recruitment

The Criminal Records Bureau (CRB) and Independent Safeguarding Authority (ISA) functions have now merged to create the Disclosure and Barring Service (DBS). The hospital recruitment process recognises that it has a responsibility to ensure that it undertakes appropriate criminal record checks on applicants for any position within the hospital that qualifies for either an enhanced or standard level check. Any requirement for a check and eligibility for the level of check is dependent on the roles and responsibilities of the job.

Mildmay Hospital recognises that it has a legal duty to refer information to the DBS if an employee has harmed, or poses a risk of harm, to vulnerable groups and where they have dismissed them or are considering dismissal. This includes situations where an employee has resigned before a decision to dismiss them has been made.

## 7. Board Responsibilities

Ultimate responsibility for ensuring the Adults at Risk Policy rests with the Board of Trustees. Responsibility is delegated by the Board to the Chief Executive Officer.

The Board will ensure sufficient time and financial resources are available to implement this policy which will be formally adopted and recorded in the minutes of a meeting of the Board of Trustees.

The Board will review this policy at least every two years.

## 8. Change History Record

Issue	Description of Change	Approval	Date
1.0	Initial issue	Board of Trustees	28 <sup>th</sup> March 2019
1.1	Minor changes	Board of Trustees	27 <sup>th</sup> November 2020
1.2	Review	Board of Trustees	29 <sup>th</sup> September 2022
1.3	Review & Additions	Board of Trustees	May 2024

**Signed by (the Chief Executive & Chair of Board):**

**Chief Executive Officer**

Name: Geoff Coleman

Signature:

Date:

**Chair**

Name: The Very Reverend John Richardson

Signature:

Date: