

Policy	Safeguarding Vulnerable Adults Policy and Procedures
Effective Date	1 January 2017
Date Last Reviewed	January 2023
Authorised by	Trustees Meeting
Scheduled Review Date	January 2024
Supersedes	All previous Policies and/or Statements

PURPOSE

To ensure The Harrogate Choral Society (HCS), including the Halcyon Singers, Beati and the Polyphonic Choir is able to keep adults with whom it works safe; and to act appropriately to any allegations, reports or suspicions of abuse.

SCOPE

This policy applies to all Officials, Trustees and volunteers who come into contact with adults at risk through the course of their work.

POLICY STATEMENTS

This policy and its associated procedures have been designed to ensure the welfare and protection of any adult who accesses services provided by HCS.

HCS will not tolerate the abuse of adults at risk in any of its forms.

HCS is committed to:

- Managing its services in a way which minimises the risk of abuse occurring
- Supporting adults who are at risk, experiencing or have experienced Abuse; and
- Working with adults at risk and other agencies to end any abuse that is taking place

In achieving these aims HCS will ensure:

- That all Officials, Trustees and volunteers have access to and are familiar with this safeguarding adult policy and procedures and their responsibilities within it
- Concerns or allegations of abuse are always taken seriously
- The Mental Capacity Act is used to make decisions on behalf of those adults at risk who are unable to make particular decisions for themselves
- Where possible all relevant personnel receive training in relation to safeguarding adults at an appropriate level
- That service users, their relatives or informal carers have access to information about how to report concerns or allegations of abuse
- There is a named HCS Lead Person / Trustee to promote safeguarding awareness and practice within the organisation

This policy and its associated procedures has been developed to be consistent with the Joint Safeguarding Adults Multi-Agency Policy and Procedures for West Yorkshire, North Yorkshire and the City of York, which can be referred to for additional guidance at www.nypartnerships.org.uk/sab

Training

At a minimum, this will be completion of the Making Music approved Safeguarding for Music Groups online basic safeguarding awareness training (Child Protection Company). This will be regularly updated. The Named Person for Adult Safeguarding will undertake NYCC Safeguarding Adults Level 2 Safeguarding Concerns Manager training.

POLICY DEFINITIONS

Who is an 'Adult at risk'?

For the purposes of this policy, an adult at risk is an adult who is:

- Aged 18 years or more, and
- Has needs for care and support (whether or not these are currently being met),
- 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.

Such a definition includes adults with physical, sensory and mental impairments and learning disabilities, howsoever those impairments have arisen e.g. whether present from birth or due to advancing age, chronic illness or injury.

Also included are people with a mental illness, dementia or other memory impairments, people who misuse substances or alcohol.

The definition includes unpaid carers (family and friends who provide personal assistance and care to adults on an unpaid basis).

What is abuse?

Abuse can take many forms and the circumstances of the individual should always be considered. It may consist of a single act or repeated acts. The following are examples of issues that would be considered as a safeguarding concern.

- Abuse may be carried out deliberately or unknowingly.
- Abuse may be a single act or repeated acts.

People who behave abusively come from all backgrounds and walks of life. They may be doctors, nurses, social workers, advocates, staff members, volunteers, or others in a position of trust. They may also be relatives, friends, neighbours, or people who use the same services as the person experiencing abuse.

Physical abuse - includes hitting, slapping, pushing, kicking, and misuse of medication, unlawful or inappropriate restraint, or inappropriate physical sanctions.

Domestic abuse – is “an incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse by someone who is or has been an intimate partner or family member regardless of gender or sexuality” (Home Office, 2013). Domestic violence and abuse may include psychological, physical, sexual, financial, emotional abuse; as well as so called ‘honour’ based violence, forced marriage and female genital mutilation.

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

Psychological abuse - includes emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal from services or supportive networks.

Financial and material abuse – includes theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions, or benefits.

Modern slavery - includes human trafficking, forced labour and domestic servitude. Traffickers and slave masters use the means they have at their disposal to coerce deceive and force individuals into a life of abuse, servitude and inhuman treatment.

Neglect and acts of omission - includes 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 - includes abuse based on a person’s race, sex, disability, faith, sexual orientation, or age; other forms of harassment, slurs or similar treatment or hate crime/hate incident.

Organisational abuse – includes neglect and poor practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one’s own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

Self-neglect - covers a wide range of behaviours, such as neglecting to care for one’s personal hygiene, health or surroundings and includes behaviours such as hoarding.

A safeguarding response in relation to self-neglect may be appropriate where:

- A person is declining assistance in relation to their care and support needs, and the impact of their decision, has or is likely to have a substantial impact on their overall individual wellbeing

Mental Capacity Assessment

The Mental Capacity Act 2005 provides a statutory framework to empower and protect people who lack capacity to make decisions for themselves; and establishes a framework for making decisions on their behalf. This applies whether the decisions are life-changing events or everyday matters. All decisions taken in the adult safeguarding process must comply with the Act.

In the application of this policy all trustees/members/management leads/staff/volunteers will consider the mental capacity of service users on a case by case basis.

KEY ROLES

HCS Trustees have ultimate responsibility for adult safeguarding and the day-to-day management of safeguarding. Other members may assist with particular responsibilities for adult safeguarding,

All members and Officials of HCS have a responsibility to act on concerns of possible abuse and must inform the HCS Lead Person for Adult Safeguarding if there are any concerns. If they are in any doubt then they should speak with the HCS Lead Person for Adult safeguarding straight away.

The HCS Lead Person for Adult Safeguarding has the responsibility to decide whether it is appropriate to raise a safeguarding concern with the local authority on behalf of their organisation or to respond to the concerns in an alternative manner.

The responsibility also includes:

- Ensuring that immediate safety issues are addressed, other parties notified (NYCC Health and Adult Social Care; and the Police) and that HCS personnel are supported.
- Ensuring that they are kept informed when someone from HCS has raised a concern
- Establishing the desired outcomes of the adult at risk

Trustees - Main responsibility rests with the Executive (Amy Moseley, Trustee Lead for Safeguarding, and Paul Jackson Co-Chairs; Gill Walsh, Treasurer; Ruth Pridmore, Business Manager)

HCS Lead Person for Adult Safeguarding concerns within HCS is Kate Rogata

The HCS Executive are responsible for ensuring this policy and procedure is reviewed and up to date and is responsible for ensuring all staff receive appropriate training and information to fulfil their roles. They will be supported in this by the HCS Management Committee Secretary.

Named Person for Adult Safeguarding - Kate Rogata	
Mobile Number	07711 302818
E-mail	kate.rogata@gmail.com

SAFEGUARDING ADULTS PROCEDURES

Responding to an allegation/concern of abuse or neglect:

HCS recognises that it has a duty to act on reports, or suspicions of abuse or neglect. Anyone who has contact with adults at risk and hears disclosures or allegations or has concerns about potential abuse or neglect has a duty to pass them on appropriately.

Responsibilities of all employees and volunteers

If any Member or Official of HCS has reason to believe that abuse is or may be taking place they have a responsibility to act on this information. It does not matter what their role is, doing nothing is not an option.

If a person discloses abuse to you directly, use the following principles to respond to them:

- Assure them that you are taking the concerns seriously
- Do not be judgmental or jump to conclusions
- Listen carefully to what they are telling you, stay calm, get as clear a picture as you can.
- Use open ended questions
- Do not start to investigate or ask detailed or probing questions
- Explain that you have a duty to tell your manager or the designated officer
- Reassure the person that they will be involved in decisions about them

Your responsibilities are:

1. To take action to keep the person safe if possible.
 - Is an urgent police presence required to keep someone safe – call 999
 - Does the person need urgent medical assistance, do they need an ambulance – call 999
2. If a crime has occurred, be aware of the need to preserve evidence.
3. Always inform the HCS Named Person for Adult Safeguarding. You cannot keep this information secret, even if the person asks you to.
4. Clearly record what you have witnessed or been told, record your responses and any actions taken.

If consulting with the HCS Named Person for Adult Safeguarding will lead to an undue delay and thereby leave a person in a position of risk, you should 'Raise a Safeguarding Concern' yourself.

Please see Appendix F - How to raise a safeguarding concern.

If you or the person you are concerned about is in danger and immediate action is required, you should ring the emergency services on **999**.

If you or the person you are concerned about is not in immediate danger, you should ring North Yorkshire customer services centre on **01609 780780**. This includes outside of office hours.

All staff and professionals working with adults should use the Raising a Safeguarding Concern Form which is available from:

- <https://safeguardingadults.co.uk/working-with-adults/raising-a-concern/>

If you are informed or become aware of possible abuse or neglect

Gather information, including what the adult wants to happen now, and what changes they want to achieve from the support they could receive

Take action to ensure the immediate safety and welfare of the adult at risk (and any other person at risk)

Consider:

- Is urgent medical attention/ambulance required? (Dial 999)
- Is an urgent police presence required? (Dial 999)
- Does a crime need to be reported? (Dial 101 unless there is an immediate risk, in which case dial 999)
- Decide whether to raise a safeguarding concern, and if so, take action

Do this:

- Immediately where the concern is urgent and serious
- Within the same working day for any other concerns
- Refer to Flowchart B: Key Questions when deciding whether to raise a safeguarding concern, for further guidance
- Document the incident and any actions or decisions taken
- Ensure key people are informed
- For example, CQC, relatives as appropriate, service commissioning teams
- Provide support for the person identifying the safeguarding concern

Safe Employment

HCS is committed to

- achieving best practice in respect to the safe recruitment of employees and volunteers;
- to working within best practice as established by the Disclosure and Barring Scheme (DBS)

HCS has procedures in place to deal with allegations of abuse made against members of staff, volunteers or trustees.

HCS will ensure that any allegations made against members or member of staff, volunteer or trustee will be dealt with swiftly.

Where a member of staff/volunteer/trustee is thought to have committed a criminal offence the police will be informed. If a crime has been witnessed the police should be contacted immediately.

Where the allegation involves alleged abuse of an adult at risk, a concern should be raised following the process outlined in the Joint Multi-Agency Safeguarding Adults Policy and Procedures (West Yorkshire, North Yorkshire and City of York), Section 2.1.2.

The safety of the adult(s) at risk is paramount and it should be ensured that they are safe and away from the person(s) who is alleged to have caused harm.

The named person will liaise with the Safeguarding Concerns Manager to discuss the best course of action and to ensure that the HCS Disciplinary Procedures are coordinated with any other enquiries taking place as part of the on-going management of the allegation.

Where concerns regarding a trustee/member/management lead/member of staff/volunteer have been made a referral must be made to the Disclosure and Barring Service (<https://www.gov.uk/government/organisations/disclosure-and-barring-service>) where subsequent enquiries result in either:

- The withdrawal of permission for the person to engage in regulated activity with children and/or vulnerable adults or they are moved to another area of work that isn't regulated activity (including situations where they would have been but the person was re-deployed, resigned, retired or left), or
- You think the person has either:
 - o Engaged in relevant conduct in relation to children and/or adults. An action or inaction has harmed a child or vulnerable adult or put them at risk or harm or;
 - o Satisfied the harm test in relation to children and / or vulnerable adults. E.g. there has been no relevant conduct but a risk of harm to a child or vulnerable adult still exists; or
 - o Been cautioned or convicted of a relevant offence (automatic barring either with or without the right to make representations)

Induction, Training and Supervision

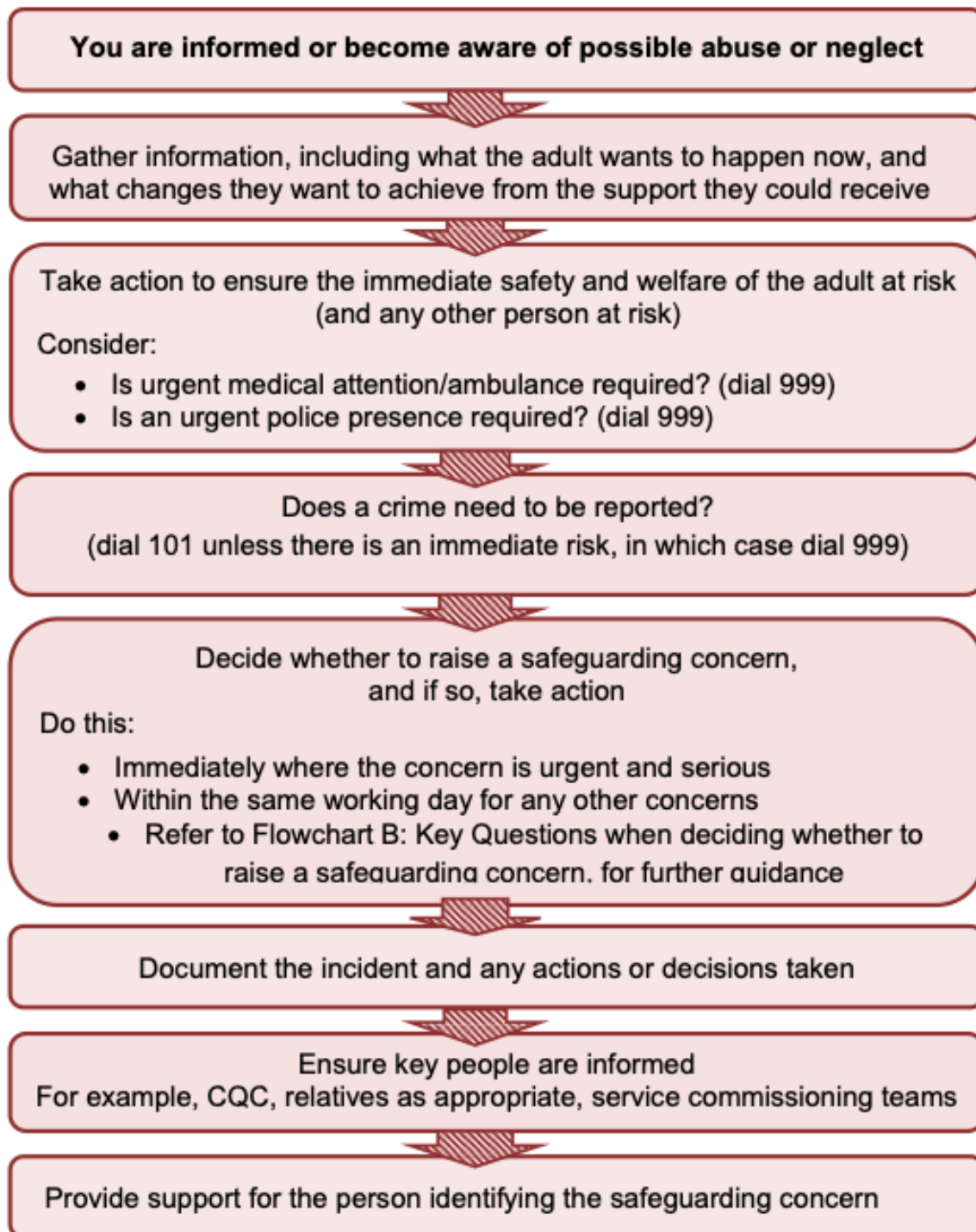
HCS is committed to ensuring that all staff and volunteers undertake training to gain a basic awareness of signs and symptoms of abuse and will ensure that the named person, trustees/ staff and volunteers have access to training around Safeguarding Adults

For example:

- Awareness of this safeguarding policy/procedure is covered within the induction programme of all new employees or volunteers and their understanding checked within supervision meetings.

- All staff will receive training on safeguarding adults at a level commensurate with their roles.
- All staff will receive training on the requirements and provisions of the Mental Capacity Act (and Deprivation of Liberty Safeguards (DoLS) in care homes and hospitals)

Appendix A Managing Safeguarding Concerns Flowchart



Appendix B – Consider whether to raise a Safeguarding Concern

Q1. Does the adult have care and support needs (whether or not the local authority is meeting any of those care and support needs)?

Q2. Is the person experiencing, or at risk of, abuse and neglect?

- | | | | | | |
|---------------------|--------------------------|-----------------------------|--------------------------|-----------------------------|--------------------------|
| Domestic abuse | <input type="checkbox"/> | Modern Slavery | <input type="checkbox"/> | Neglect of acts of omission | <input type="checkbox"/> |
| Physical abuse | <input type="checkbox"/> | Discriminatory abuse | <input type="checkbox"/> | Self-neglect | <input type="checkbox"/> |
| Sexual abuse | <input type="checkbox"/> | Organisational abuse | <input type="checkbox"/> | Another form of abuse | <input type="checkbox"/> |
| Psychological abuse | <input type="checkbox"/> | Financial or material abuse | <input type="checkbox"/> | | |

NB: Abuse may sometimes occur without any intent to cause harm

Q3. What is the nature and seriousness of the risks?

Consider:

- The adult's individual circumstances;
- The nature and extent of the concerns;
- The length of time it has been occurring;
- The impact of any incident;
- The risk of repeated incidents for the adult;
- The risk of repeated incidents for others.

Wherever possible, consider the wishes and desired outcomes of the adult. In other words, what do they want to happen next, what do they want to change about their situation and what outcome do they want to achieve.

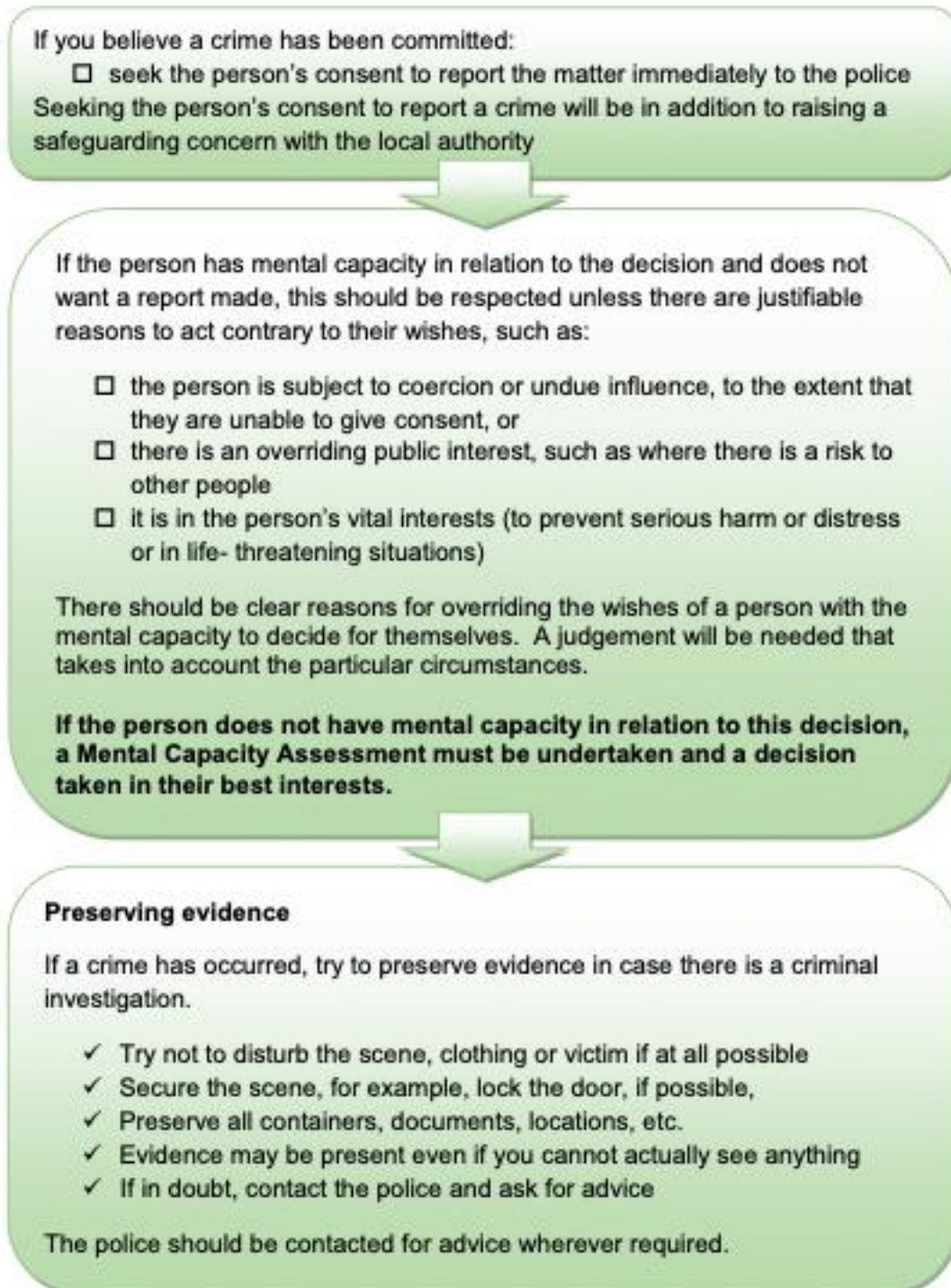
Sometimes it will be necessary to Raise a Concern even if this is contrary to the wishes of the adult. Any such decision should be proportional to the risk, for example:

- It is in the public interest e.g. there is also a risk to others, a member of staff or volunteer is involved, or the abuse has occurred on property owned or managed by an organisation with a responsibility to provide care;
- The adult lacks mental capacity to consent and it is in the adult's best interests;
- The adult is subject to coercion or undue influence, to extent that they are unable to give consent;
- It is in the adult's vital interests (to prevent serious harm or distress or life threatening situations).

If you remain unsure whether to raise a safeguarding concern, seek advice:

- Contact your organisation's safeguarding adults lead
- Contact your local safeguarding services (See the Multi-Agency Safeguarding Adults Policy and Procedures, Section 5.4 for contact details)

Appendix C - Considering whether to report a concern to the police



Appendix D - Who else to inform

If you are a service provider and a safeguarding concern has been raised, notify your regulatory body and the authority that commissions your service for the adult at risk.

You may also need to inform:

- The Charity Commission, if your service is a registered charity
- Your line manager (and safeguarding adults lead if different) of your decisions and actions in line with this procedure
- Your Human Resources Manager if allegations/concerns relate to a member of employee or volunteer
- Staff delivering a service on a need-to-know basis so that they do not take actions that may prejudice an enquiry

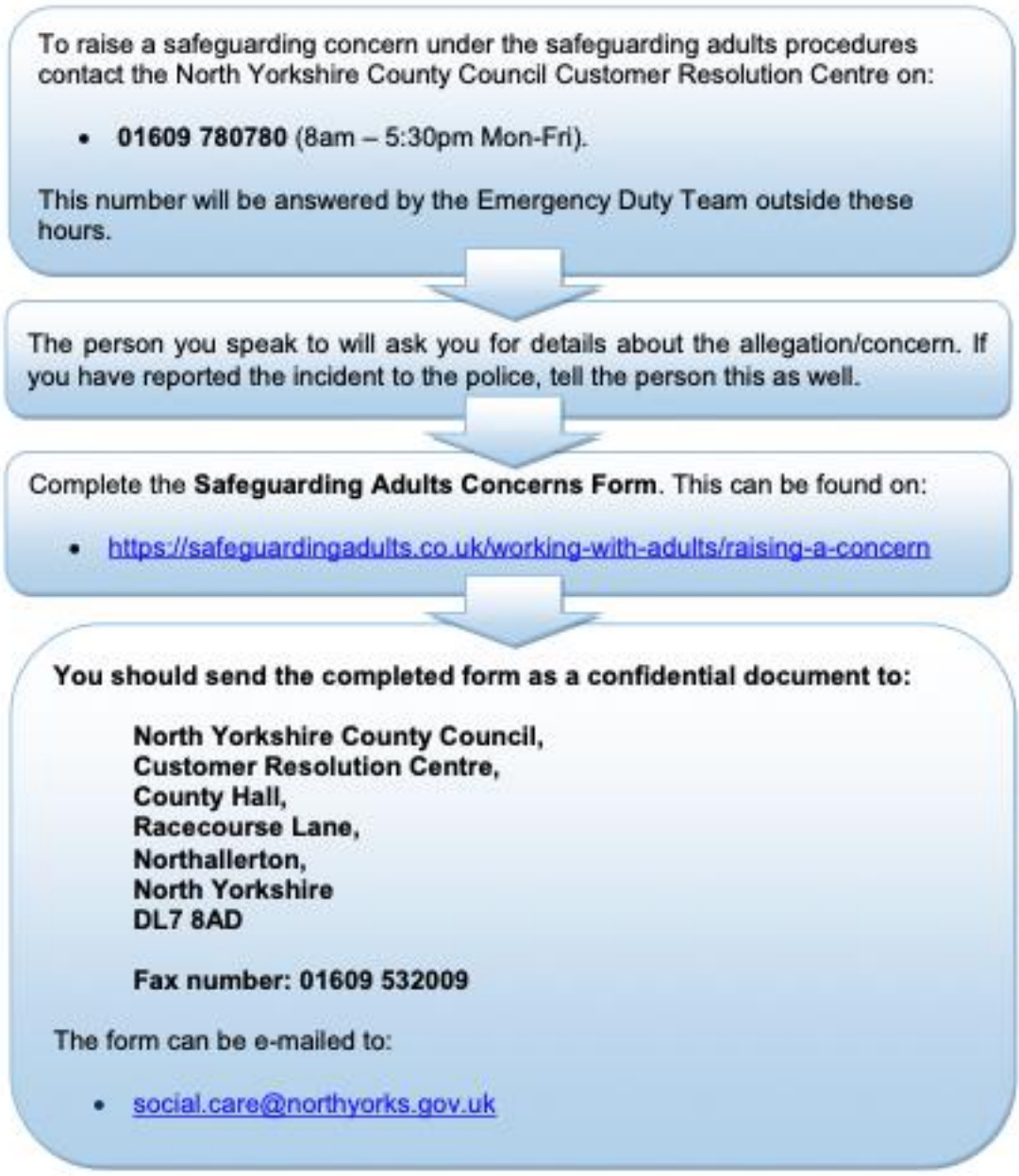
Appendix E - Document the concern and any actions or decisions taken

Ensure all actions and decisions are fully recorded. It is possible that your records may be required as part of an enquiry, be as clear and accurate as you can. Record the reasons for your decisions and any advice given to you in making these decisions.

Ensure that appropriate records are maintained, including details of:

- The nature of the safeguarding concern/allegation
- The wishes and desired outcomes of the adult at risk
- The support and information provided to enable the adult at risk to make an informed decision
- Assessments of Mental Capacity where indicated
- The decision of the organisation to raise a concern or not.

Appendix F - How to Raise a Safeguarding Concern:



Appendix G: Useful Contacts

HCS Safeguarding Leads	
Named Person for Safeguarding Adults	Kate Rogata 07711 302818 kate.rogata@gmail.com
Mobile Number	
E-Mail	
To raise a safeguarding concern about an adult	

<p>Customer Resolution Centre: (8am – 5:30pm Mon-Fri) This number will be answered by the Emergency Duty Team outside these hours.</p>	<p>Tel: 01609 780780</p>
<p>Contacting the police</p>	
<p>If the person is in imminent danger If you need to report a crime, but the person is not in imminent danger</p>	<p>Tel: 999 (Emergency Service) Tel: 101 (Non-Emergency Service)</p>
<p>To raise a safeguarding concern about a child/young person</p>	
<p>If you have a concern regarding the safety or wellbeing of a child or young person you can obtain guidance from the North Yorkshire Safeguarding Children Board Website Children and Families Service: (8am – 5:30pm Mon-Fri) This number will be answered by the Emergency Duty Team outside these hours.</p>	<p>https://www.safeguardingchildren.co.uk/about-us/worried-about-a-child/ Tel: 01609 780780</p>
<p>To notifying regulators</p>	
<p>Care Quality Commission Charity Commission for England and Wales Open Monday to Friday, 10am to midday and 1pm until 3pm</p>	<p>Tel: 03000 616161 Post: CQC National Customer Service Centre Citygate Gallowgate Newcastle upon Tyne NE1 4PA Tel: 0300 066 9197 Email: rsi@charitycommission.gsi.gov.uk or whistleblowing@charitycommission.gsi.gov.uk</p>

Independent Care Group	
ICG is the recognised representative body for independent care providers (private and voluntary) in York and North Yorkshire.	<p>Contact:</p> <p>Chief Executive Independent Care Group (ICG)</p> <p>Website:</p> <p>https://www.independentcaregroup.co.uk</p>
Employment related advice lines	
Disclosure and Barring Service (DBS)	Tel: 01325 953795
Whistleblowing advice services	
<p>Mencap:</p> <p>www.mencap.org.uk/organisations/whistleblowing-helpline</p>	Helpline: 08000 724 725
<p>Care Quality Commission:</p> <p>www.cqc.org.uk/contact-us</p>	Tel: 03000 616161
<p>Public Concern at Work</p> <p>www.pcaw.org.uk</p>	Tel: 020 7404 6609.
Advocacy services	
Total Advocacy North Yorkshire	<p>E Mail</p> <p>totaladvocacy@cloverleaf-advocacy.co.uk</p> <p>Tel: 01609 765355</p>

	Post: Elizabeth House, Barker Business Park, Melmerby, Ripon HG4 5NB
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Change Control History

Date of Change	Summary of Revisions Made
15 January 2018	Reference to lead trustee for legal matters removed as the post was never filled
11 January 2019	No changes needed
3 February 2020	No changes needed
January 2021	No changes needed
May 2022	No changes needed
January 2023	Updated to reflect changes to multi-agency safeguarding adults policy and practice guidance. Some changes aligned to changing roles and responsibilities within HCS Management Committee