

CONTROLLED DOCUMENT

Safeguarding of Adults at Risk of Abuse Policy

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Purpose	To set out the principles and framework for the identification, investigation, management and prevention of all forms of abuse to safeguard adults at risk.
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Abbreviations and Definitions

Adult at risk	<p>An adult is any person aged 18 or over (UN Convention on the Rights of The Child, 1989)</p> <p>Safeguarding is aimed at people with care and support needs who may be in vulnerable circumstances and at risk of abuse or neglect. In these cases, local services must work together to spot those at risk and take steps to protect them.(Department of Health Care Act Factsheet 7, 2016)</p>
Abuse	<p>Abuse is a violation of an individual’s human and civil rights by any other person or persons. This may present as single or repeated acts.</p> <p>The main types of abuse are:</p> <ul style="list-style-type: none"> • Physical • Domestic • Sexual • Exploitation • Psychological • Financial or material • Modern Slavery • Neglect or omission (including self-neglect) • Discriminatory • Organisational • Institutional <p>For more information please refer to Site Specific Trust Procedures for Safeguarding Adults at Risk.</p>

1. Policy Statement

- 1.1 University Hospitals Birmingham NHS Foundation Trust (the Trust) operates a zero-tolerance policy concerning the abuse of adults at risk. Any adult at risk of abuse, exploitation or neglect must be able to access support to enable them to live a life free from violence and abuse. *The Care Act 2014* provides a framework to ensure all responsible agencies work together for the protection of vulnerable adults at risk of abuse.
- 1.2 The Trust will not tolerate any member of staff subjecting Trust patients to any type of abuse. This will be treated as gross misconduct.
- 1.3 The Trust aims to create a culture of openness, raising awareness of the kinds of abuse that might occur and where all staff act against abuse. The abuse of adults at risk constitutes a clear infringement of their rights and freedoms as citizens. The Trust is committed to ensuring people's individual rights and freedoms are protected and promoted through eliminating all forms of abuse.
- 1.4 The key objectives of this policy are:
 - 1.4.1 to set out the principles and framework for the safeguarding of adults at risk;
 - 1.4.2 to ensure all staff understand their roles and responsibilities in connection with safeguarding adults at risk; and
 - 1.4.3 to ensure compliance with National and Regional Policy and Guidance related to safeguarding adults at risk.

2. Scope

This policy applies to all areas of the Trust and all individuals employed by the Trust including contractors, volunteers, students, locum, bank and agency staff and staff employed on honorary contracts who are involved in Trust business on and off the premises.

3. Framework

- 3.1 This section describes the broad framework for the safeguarding of adults at risk of abuse throughout the Trust. Detailed instructions and definitions of types of abuse are provided in the associated procedural documents.
- 3.2 The Executive Chief Nurse will approve all procedural documents associated with the policy, and any amendments to such documents, and is responsible for ensuring that such documents are compliant with this policy.

3.3 The framework for this policy is based on the Regional Safeguarding Adults Boards Policy, Protocols and Procedures, which detail the following responsibilities for NHS Hospital Trusts regarding safeguarding of Adults at risk:

3.4 Information

3.4.1 The Trust will ensure that awareness is raised within staff, patients and visitors through information available via Trust intranet, internet and information leaflets about abuse of adults at risk, giving a clear message that this is everyone's responsibility; and

3.4.2 To have an internal safeguarding adults policy and procedure that clearly defines the responsibilities of all staff, and the actions they should take when suspicions of abuse and neglect are raised. The internal procedure must link with the regional multi-agency procedure.

3.5 Training

3.5.1 In line with the Trust Safeguarding Training Strategy, ensure that all staff/volunteers who have direct contact with adults are trained to recognise abuse and how to use the procedures in place to support the person and to alert managers; and

3.5.2 To train managers who may be responsible for making decisions about allegations of potential abuse.

3.6 Governance

3.6.1 Trust recruitment has appropriate rigorous recruitment policies and practices for staff;

3.6.2 Head of Adult Safeguarding ensures supervision and monitoring of staff working with 'adults at risk';

3.6.3 Safeguarding Team keep clear and accurate records of all incidents of abuse, or suspected abuse, and provide information as required;

3.6.4 Clinical staff as part of the assessment process on admission identify any risks of abuse;

3.6.5 All staff are to share information in line with Birmingham and Solihull Safeguarding Adults Boards Information Sharing

Protocol- Safeguarding Adults through the Head of Adult Safeguarding;

- 3.6.6 All staff to participate in joint working with other agencies in investigations and actions to protect adults at risk of abuse through the Trust's Head of Adult Safeguarding;
 - 3.6.7 Adult Safeguarding Team to contribute to Safeguarding Adults assessments/ investigations through attendance at multi agency strategy meetings;
 - 3.6.8 Trust's Head of Adult Safeguarding to attend meetings of the Regional Safeguarding Adults Boards;
 - 3.6.9 Trust's Head of Adult Safeguarding to provide an annual report to the Board of Directors; and
 - 3.6.10 Trust's Head of Adult Safeguarding to make sure that staff know they are protected by law if they report abuse and are concerned about their name being used (Please refer to the Trust Raising Concerns in the Public Interest (Whistleblowing) policy)
- 3.7 All suspicions and allegations of abuse or inappropriate behaviour will be taken seriously by the Trust and responded to in line with the procedure for Managing Safeguarding Allegations Against Staff in Positions of Trust and the Disciplinary Policy and its associated site specific procedures.
- 3.8 Safeguarding is everyone's business and everyone matters, and all staff and volunteers have a responsibility for reporting any suspicions or concerns of abuse or inappropriate behaviour following the Site Specific Procedures for Protecting Adults at Risk.
- 3.9 Trust Safeguarding Adult Group
- 3.9.1 The Executive Chief Nurse has established the Trust Safeguarding Group to oversee the management of this policy. The membership and roles and responsibilities of the Trust Safeguarding Group are detailed within the terms of reference. The group includes representatives of staff working with the following three patient groups who are considered to be especially vulnerable in this way:
 - 3.9.2 Adults with learning disabilities;
 - 3.9.3 Adults with mental illness;
 - 3.9.4 Frail older adults with:

- a) co-morbidities;
- b) fragile social support networks;
- c) functional impairment due to cognitive and/or physical decline.

3.10 Staff Support

3.10.1 The Trust will ensure support is available for staff, who are involved in reporting an allegation of abuse. This support will be through their line manager, or more formal support may be sought from the Occupational Health Department.

3.10.2 Where necessary please refer to the Site Specific Procedures for Staff affected by Domestic Abuse.

4. **Duties**

4.1 Executive Chief Nurse

The Executive Chief Nurse will:

- 4.1.1 Sponsor the local safeguarding and control procedural documents;
- 4.1.2 Be responsible to the Board of Directors for safeguarding adults at risk within the Trust;
- 4.1.3 Provide an annual safeguarding report to the Board of Directors; and
- 4.1.4 Appoint a nominated Head of Adult Safeguarding.

4.2 Head of Adult Safeguarding

The Head of Adult Safeguarding will:

- 4.2.1 Ensure all policy and procedural documents are current and reflect best practice;
- 4.2.2 Provide specialist advice concerning the care of adults at risk of abuse;
- 4.2.3 Ensure all clinical staff within the Trust have access to appropriate training in the safeguarding of adults at risk of abuse;
- 4.2.4 Review cases where an adult at risk of abuse has not received appropriate care;

- 4.2.5 Review all Trust incident reports related to abuse or suspected abuse of adults at risk and ensure examples of good practice or required changes in practice are shared throughout the organisation via the Trust Safeguarding Group;
 - 4.2.6 Develop a robust reporting process to the Adult Safeguarding Steering group and providing learning across the Trust;
 - 4.2.7 Ensure an accurate list of adult protection cases within the Trust is maintained;
 - 4.2.8 Ensure that managers to whom safeguarding concerns are raised take appropriate action as to which route to take;
 - 4.2.9 Meet monthly with the Executive Chief Nurse;
 - 4.2.10 Lead on the Prevent agenda;
 - 4.2.11 Lead on education, training and implementation of the Mental Capacity Act 2005, including Deprivation of Liberty Safeguards; and
 - 4.2.12 Lead on the Domestic Abuse Strategy for the Trust.
- 4.3 The Head of Adult Safeguarding will ensure the following of the Trust Safeguarding Group:
- 4.3.1 The membership of this group is detailed in the terms of reference which are approved by the Executive Chief Nurse. The Trust Safeguarding Group will be chaired by the Head of Adult Safeguarding, and will:
 - 4.3.1.1 meet on a two-monthly basis;
 - 4.3.1.2 monitor, maintain and oversee the infrastructure in order to safeguard adults at risk of abuse;
 - 4.3.1.3 support the development and delivery of training and the provision of best practice;
 - 4.3.1.4 ensure the monitoring of incidents related to the safeguarding of adults at risk;
 - 4.3.1.5 ensure the lessons learned from adverse incidents and near misses both within and external to the Trust are considered and relevant actions and changes are implemented across the organisation;

- 4.3.1.6 ensure that working practices are in line with legal and national requirements in relation to safeguarding adults at risk;
- 4.3.1.7 provide a quarterly report to the Executive Chief Nurse through the Care Quality Group, and an annual report to the Board of Directors;
- 4.3.1.8 provide expert adult safeguarding advice particularly in relation to adult protection, to the Executive Chief Nurse and thereby to the Executive team;
- 4.3.1.9 oversee and monitor the attainment of required standards of training and development for the safeguarding of adults; and
- 4.3.1.10 monitor and ensure the implementation of findings from Safeguarding Adults Reviews and Domestic Homicide Reviews within the Trust and of Trust complaints.

4.4 Head of Human Resources (HR)

The Head of Human Resources will:

- 4.4.1 Develop HR policies and procedures which support adult safeguarding;
- 4.4.1 Ensure appropriate background checks on prospective staff are rigorous in line with current policy and procedure and NHS Employment Checking Standards;
- 4.4.2 Ensure HR and Recruitment staff are appropriately trained and briefed on safeguarding of adults at risk to be able to fulfil the responsibilities within their own role and to help others detect and report;
- 4.4.3 Provide support and advice to staff involved in adult safeguarding procedures where staff members may be personally involved;
- 4.4.4 Ensure the provision of Occupational Health services and staff support;
- 4.4.5 Attend the Trust Safeguarding Group and report on case management concerning staff who are at risk, have reported an adult at risk, or are alleged to have placed an adult at risk, and any learning arising from that; and
- 4.4.6 Jointly attend multi-agency meetings with the Head of Adult Safeguarding where staff are involved.

4.5 Managers

Anyone who has responsibility for staff potentially involved in the safeguarding of adults must ensure:

- 4.5.1 All staff have access to this policy and associated procedural documents;
- 4.5.2 All staff adhere to and implement this policy and associated procedural documents;
- 4.5.3 The appropriate staff, equipment and stationery are available to enable this policy to be followed; and
- 4.5.4 Staff have the necessary training to enable them to implement this policy provided by Trust Safeguarding Team.

4.6 Community Care Team Senior Practitioner Delivery (SPD)

Community Care Team Senior Practitioners will:

- 4.6.1 coordinate any protective action considered necessary and forward the alert to the appropriate Adults and Communities or hospital social work team; and
- 4.6.2 co-ordinate all safeguarding investigations and actions as detailed in the associated procedural documents.

4.7 All Staff and Volunteers

All staff and volunteers will:

- 4.7.1 be vigilant to the possibility that adults at risk may be the victims of abuse;
- 4.7.2 adhere to the policy and associated procedural documents; and
- 4.7.3 attend relevant training sessions and comply with Safeguarding Mandatory Training.

5 Implementation and Monitoring

5.1 Implementation

- 5.1.1 This policy and its associated procedures are available on the Trust Intranet and disseminated to staff through management and internal team structures within the Trust.

5.1.2 A training needs analysis and training implementation plan is in place to support this policy as follows:

- Level 1 Training – Non-clinical staff including volunteers will receive Children and Adult Safeguarding training during Corporate Induction.
- Level 2 Training – all clinical staff undertake Safeguarding Adults training level 2 in line with Adult Safeguarding Roles and Competencies for Healthcare Staff (RCN, 2018)
- Level 3 Training is provided to staff identified via Training Needs Analysis in line with Adult Safeguarding Roles and Competencies for Healthcare Staff (RCN, 2018)

5.2 Monitoring

Appendix A provides details on how the policy will be monitored.

6 **References**

Birmingham Safeguarding Adults Board (2013) Information Sharing Protocol, Safeguarding adults

<https://www.bsab.org/downloads/download/14/information-sharing-protocol>

[accessed 24.07.20]

Birmingham Adults Safeguarding Multi-agency policy and procedures, **Multi agency policy and procedures for the protection of adults with care and support needs in the West Midlands**

<https://www.bsab.org/homepage/7/information-for-professionals>

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24.07.20]

Department of Health (2011) Safeguarding adults role of health service managers and their boards

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/215713/dh_125035.pdf [accessed 24.8.18]

Department of Health (2011) Building partnerships staying safe – The health sector contribution to HM Governments Prevent Strategy guidance for healthcare

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/215251/dh_131934.pdf [accessed 24.8.18]

The Care Act 2014

<http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted/data.htm>

Human Rights Act 1998

Mental Capacity Act 2005

Royal College of Nursing (2018) Adult Safeguarding Roles and Competencies for Healthcare Staff. Intercollegiate Document

7 Associated Policy and Procedural Documentation

Chaperone Procedure (UHB)

Clinical Holding Policy (HGS)

Disciplinary Policy (QEHB CD354)

Disciplinary Procedure (QEHB CD29)

Domestic Abuse Policy

Enhanced Observation Policy (HGS)

Guidelines for Clinical Holding and Restrictive Physical Intervention of Adults, Children and Young People (QEHB CD698)

Guidelines for the Assessment and Care of Patients with Known or Suspected Dementia or Delirium (QEHB CG205)

Guidelines for the Management of Confused or Agitated Patients

Guidelines for the Use of Bed Rails and Trolley Sides (QEHB CD356)

Managing Safeguarding Allegations against Staff in Positions of Trust (QEHB CD960)

Missing Patient Procedure

Inpatient Falls and Injuries Prevention Guidelines (QEHB CD355)

Person in a Position of Trust Procedure (HGS)

Policy and procedure for raising concerns in the public interest (whistleblowing) (QEHB CD 153 & 714)

Prevent Policy

Procedure for Safeguarding Adults at Risk (QEHB CD435)

Procedure for Supporting Staff Affected by Domestic Abuse (QEHB CD865)

Procedure for the care of the patient at increased risk requiring enhanced care (QEHB CD823)

Self Harm Policy (HGS)

Appendix A Monitoring Matrix

MONITORING OF IMPLEMENTATION	MONITORING LEAD	REPORTED TO PERSON/GROUP	MONITORING PROCESS	MONITORING FREQUENCY
Reviewing all safeguarding adults' cases including non-compliance of policy. This will include quality of referrals.	Head of Adult Safeguarding	Trust Safeguarding Group	Presented at the Trust Safeguarding Group	Bi monthly
Monitoring and ensuring the implementation of findings from Safeguarding Adults Reviews and Domestic Homicide Reviews within the Trust	Head of Adult Safeguarding	Trust Safeguarding Group Care Quality Group	Presented with action plans as required	Ad hoc
Monitoring incident reports and complaints including trends and progress against action plans.	Head of Adult Safeguarding	Trust Safeguarding Group	All safeguarding cases are reported through the Trust incident reporting procedure. If the policy is not adhered to on any occasion an incident form will completed and monitored. All complaints are recorded on Datix.	Bi monthly
Safeguarding Supervision for staff involved in safeguarding adults	Head of Adult Safeguarding	Trust Safeguarding Group	Training Needs Analysis Supervision data	Quarterly
Level 2 Safeguarding Adults mandatory training which includes – MCA and DoLS	Head of Adult Safeguarding	Trust Safeguarding Group	Training figures	Monthly

Level 3 Safeguarding Adults training – Higher level	Head of Adult Safeguarding	Trust Safeguarding Group	Training figures. Training Needs Analysis. Pre and post knowledge is assessed as part of the training	6-monthly
Monitoring of adherence to Deprivation of Liberty Safeguards procedures	Head of Adult Safeguarding	Trust Safeguarding Group	Presented to Trust Safeguarding Group	Annually