



DELIVERY OF PROFESSIONAL MEDICAL SERVICES

## **Safeguarding Service Users Policy**

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## COMPANY POLICY STATEMENT

A-cute Medical Event Services Limited (A-cute) places the protection of service users including children, young people and vulnerable adults using its services and facilities as one of its major priorities and responsibilities.

Service users have the right to be safe while in our care and after care of the person has been passed to a professional. Parents and careers need to have confidence in A-cute as a company and know that its staff are committed to safeguarding all service users.

A-cute will endeavor to:

- Safeguard the welfare of all service users who have contact with A-cute's employees and sub-contractors.
- Protect children, young people from neglect and physical, sexual and emotional harm whilst in our care in line with the Safeguarding Children and young people: roles and responsibilities for Health Care Staff (fourth addition January 2019) Intercollegiate Document
- Deal with all suspicions and allegations of abuse seriously and respond appropriately.
- Protect children and vulnerable adults with whom we come into contact, if there is a suspicion or evidence of abuse although this may not be happening whilst delivering our services.
- Encourage partnership agencies and hirers of our facilities to adopt safeguarding policies and procedures of their own.
- Ensure that all A-cute personnel are aware of and act in accordance with their personal responsibilities.
- Ensure effective procedures are in place for responding to complaints, concerns and allegations of suspected or actual abuse.
- Ensure that recruitment procedures are followed for every applicant before they can work with or supervise children or adults at risk of harm
- Continue to monitor the safeguarding policy for working safely with children and adults at risk of harm and take any measures required to strengthen and improve existing practice.
- Protect vulnerable adults from neglect and physical, sexual and emotional harm whilst in our care in line with the Adult Safeguarding: Roles and responsibilities for Health Care Staff (First edition: August 2018) Intercollegiate Document.

Note: The word 'Service User' throughout this policy includes a child and has the specific meaning of anyone below the age of 18 years and the term adult refers to anyone aged 18 years or over.

Where the expression young person is used it includes both older children and young and vulnerable adults which includes physical and mental impairments.

Personnel working for A-cute, during their work will be party to information about individuals which may not be in the public domain. Any information received belongs to the organization and may only be used for legitimate A-cute purposes.

## **Safeguarding Officer**

Mark Weatherhead is the appointed Safeguarding Officer for A-cute and is the point of contact and reference for all staff should they have any safeguarding issues within the company.

The safeguarding officer will provide advice, guidance and practical support to volunteers and employees to ensure that they work safely with children and adults at risk of harm, in all the organisation's activities.

This is achieved by:

- Ensuring that staff are kept up to date on changes to national and local safeguarding arrangements by reviewing updates from Department of Health Safeguarding Children Board.
- Ensuring that appropriate safeguarding training is available to fulfil the role and to ensure best working practice throughout the organisation.
- Advising on any issues or concerns you have about working practices.
- Managing any causes for concern that occurs within the footprint of the event or activity.
- Adhering to Local Authority Safeguarding processes at each event or activity.

### **1. Responsibilities of all staff, sub-contractors and third-party organisations**

These guidelines for Safeguarding service users have been created for the benefit of all employees and sub-contractors of A-cute. They have been written in accordance with the guidelines recommended by Care Quality Commission. Safeguarding Venerable Groups Act 2006. The Care Act 2014; Safeguarding Adults. Safeguarding Policy NHS England.

This document outlines the actions that enable service users to feel safe while under the care of A-cute.

The guidelines have been created to heighten awareness of the responsibilities we have for those placed in the care of A-cute, but also to be able to identify potential cases of abuse or neglect.

Prevention of abuse is a core responsibility of all staff, sub-contractors and third-party organisations that provide care and support to service users.

#### **The six principles of Safeguarding are.**

- Empowerment. People being supported and encouraged to make their own decisions and informed consent.
- Prevention. It is better to act before harm occurs.
- Proportionality. The least intrusive response appropriate to the risk presented.
- Protection.
- Partnership.
- Accountability.

The responsibilities of all staff and sub-contractors include ensuring that they:

- Understand and apply the safeguarding policy for working safely with vulnerable children and adults at risk of harm, abuse or neglect
- Undertake and confirm from sub-contractors, that training to the appropriate level to support A-cute in its role.
- Act appropriately and challenge inappropriate behaviour in others.
- Be able to recognise abuse or neglect.
- Know how to follow the procedure for reporting concerns, untoward occurrences, alleged or suspected incidents of abuse.

### 1.1 Your training obligation

You are responsible for undertaking appropriate training to support you in your role and ensuring that this is regularly updated. This includes:

- successfully completing the safeguarding training programme as required by A-cute. This may be by way of CPD annual Training
- e-learning based on the qualification level held.
- Staying Aware of changes, update and refresher training.

Contact your Safeguarding Officer for further information. A-cute Safeguarding lead is the Managing Director

## 2. Safeguarding and promoting welfare of service users

All A-cute staff or sub-contractors who treat or have contact with service users and or their carer's, families or responsible adult (where children or young adults are of concern) while engaged in their work, have a duty of care to safeguard and promote the welfare and safety of service users.

## 3. Legal Requirement

The main legal requirements on Safeguarding are contained in Regulation 1 of the Health and Social Care Act 2016 (revised June 2017). The main principle of the act is to identify and safeguard vulnerable people who use A-cute services, from suffering any further form of abuse or improper treatment. Including Abuse, discrimination unlawful restraint, which includes inappropriate deprivation of liberty under the terms of the Mental Capacity Act 2005.

### 3.1 References

Human rights Act 1998

Safeguarding Vulnerable Groups Act 2006

Care Act 2014 revised 2016 & updated June 2017

Children's Act 2008

Working together Document 2018

Intercollegiate Document First edition August 2018 Adult Safeguarding

Intercollegiate Documents Forth edition January 2019 Safeguarding Children and Young People

Mental Capacity Act 2005

MCA DoLS (deprivation of Liberty Safeguarding)

## 4. Types of Abuse

To meet the requirements of this regulation, A-cute will maintain a zero-tolerance approach to abuse, unlawful discrimination and restraint. This includes:

### 4.1

#### **Physical abuse including:**

- assault
- hitting
- slapping
- pushing
- misuse of medication
- Inappropriate restraint
- inappropriate physical sanctions
- FGM

#### **Domestic violence including:**

- psychological
- physical
- sexual
- financial
- emotional abuse
- so called 'honour' based violence

#### **Sexual abuse including:**

- rape
- indecent exposure
- sexual harassment
- inappropriate looking or touching
- sexual teasing or innuendo
- sexual photography
- subjection to pornography or witnessing sexual acts
- sexual assault
- sexual acts in which there was no consent or was pressured into consenting to

**Psychological abuse including:**

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

**Financial or material abuse including:**

- theft
- fraud
- internet scamming
- coercion in relation to an adult's financial affairs or arrangements, including; wills, property, inheritance or financial transactions
- the misuse or misappropriation of property, possessions or benefits

**Modern slavery encompasses:**

- slavery
- human trafficking
- forced labour and domestic servitude.
- traffickers and slave masters using whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment

**Discriminatory abuse including forms of:**

- harassment
- because of race
- gender and gender identity
- age
- disability
- sexual orientation
- religion

## **Organisational abuse**

Including neglect and poor care practice within an institution or specific care setting such as a hospital, care home or residential event setting 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 because of the structure, policies, processes and practices within an organisation.

### **Neglect and acts of omission including:**

- ignoring medical needs
- ignoring emotional or physical care needs
- failure to provide access to appropriate health, care and support or educational services
- the withholding of the necessities of life, such as medication, adequate nutrition and heating

## **Self-neglect**

This covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding. It should be noted that self-neglect may not prompt a section 42 enquiry. An assessment should be made on a case-by-case basis. A decision on whether a response is required under safeguarding will depend on the adult's ability to protect themselves by controlling their own behaviour. There may come a point when they are no longer able to do this, without external support.

## **5. Good Practice for Employees/Sub contractors**

A-cute will look to mitigate situations of alleged abuse of service users and help to protect staff from false allegations being made by promoting good practice. The following points have been designed to assist all Staff:

- Physical contact and restraint should be avoided. Very often such contact may be construed as indicating some form of abuse. Where intervention is required, the following conditions will apply:
  - Do not spend excessive amounts of time unchaperoned with children or vulnerable adults.
  - Be wary of offering reassurance and comfort to distressed service users in the same way a parent, carers, or responsible adult might.
  - Ensure colleagues are informed of where you are, with whom and for what purpose
  - Do not take service users to your home.
  - Where any of these are unavoidable, ensure they only occur with the full knowledge and consent of someone in charge within the facility or the service users care or responsible adult.
  - Horseplay and violent games must be avoided.
  - Treat all service users with equal respect and dignity.
- It is not acceptable to restrain. If restraint is required, appropriate qualified support will need to be obtained, e.g., the police. Only in an emergency where immediate intervention is required to preserve life or limb is such action justified. e.g., Restrain someone from running into the road intent on self-harm or to put themselves in danger.
- Give constructive feedback and recognize the varying developmental needs between service users.
- Keep records of any concerns and by informing the Safeguarding Manager immediately.
- Discuss any concern with the Safeguarding Manager.
- Report any inappropriate concerns with your line manager or the Safeguarding Manager
- Do not promise confidentiality to the service user as this may not be appropriate depending on the circumstances



## **You Should Never:**

- Put yourself into a situation that could be misinterpreted or a place that cannot be seen.
- Engage in rough, physical or sexually provocative games including horseplay.
- Have any inappropriate physical or verbal contact with service users
- Make sexually suggestive comments to a service user, even in fun.
- Let allegations a service user makes go unheard or unrecorded; always act.
- Do things of a personal nature that service users can do for themselves.
- Administer First Aid to service users alone.
- Encourage or participate in any avoidable out of work situations with service users.
- Establish a relationship with service users out of the work situation.

It may sometimes be necessary for A-cute staff to do things of a personal nature for service users, particularly if they are very young or physically or mentally disabled. These tasks should only be carried out with the full understanding and consent of parents or carers and with a chaperone present. It is important to ensure all staff are sensitive to the service user and undertake personal care tasks with the utmost discretion ensuring that the patients dignity remains intact.

## **Practical approach to your Safeguarding responsibilities?**

Always.

- Stay calm – ensure the service user is safe and feels safe.
- Show and tell the service user that you are taking what he/she says seriously.
- Reassure the service user that you are there to support them.
- Be honest; explain you will have to tell someone else to help stop the alleged abuse.
- Record the information the service user gives you.
- Although we cannot promise confidentiality to the service user; it is important that only relevant parties are informed of any allegation under the CALDICOTT Principles (A-cute is not an NHS Provider but believes the Caldicott principles to be the current best practice and in line with the Data Protections Act 1998 will use these as our guide. A-cutes Caldicott Guardian is the Managing Director), to protect A-cute and the service user.
- Maintain confidentiality only tell others if it will help protect the service user or A-cute.
- Contact A-cutes Safeguarding Manager

Do Not

- Take sole responsibility – consult the Safeguarding Manager so you can begin to protect the service user and gain support for yourself.
- Rush into actions that may not be appropriate.
- Make promises you cannot keep.
- Ask inappropriate questions, which may jeopardize any impending police investigation or undermine the service user's confidence in you or A-cute.

## 6. Raising A Concern Process

A-cute requires staff to use internal mechanism for reporting any concerns. Making that first contact in reporting safeguarding concerns can be a difficult experience for everyone.

Raising a Safeguarding concern means reporting your concerns that a service user:

- Is experiencing or is at risk of abuse or neglect.
- Is unable to protect themselves against the abuse or neglect or the risk of it.

The concern may be discussed with the person in charge but must be reported to your Safeguarding Manager.

The confidential safeguarding reporting form is included in the PRF and has been developed to help this process and can be used by anyone who has a concern that needs to be raised or addressed. When recording information, it is important that you confine your activity to gathering information about the allegation. Use the continuation sheet to detail the circumstances.

There could be problems about gathering information from service user with limited communication skills. Care should be taken to ensure that appropriate means are used to find out what the allegation is about ***without leading*** the service user.

The environment for recording information needs to be considered carefully.

When recording information obtained from an abused person the entry should include the following:

- The nature of the allegation.
- A description of any visible bruising or other injuries.
- The Service User's account of what is happening, if he/she can give it, of what has happened and how any Abuse has or is occurring. Record injuries on the PRF.
- Any times, dates or other relevant information.
- A clear distinction between what is fact, opinion or hearsay.

All information collected then should be referred to the Safeguarding Manager, who will conduct the necessary interview with the service user, staff members and any other parties concerned.

Wherever possible, referrals telephoned to the Social Service Department should be confirmed in writing to the Safeguarding Manager within 24 hours. A record should also be made of the name and designation of the social services member of staff or police officer to whom the concerns were passed, together with the time and date of the call, in case any follow up is needed.

All incidents must be recorded with A-cute Safeguarding Manager contacted as soon as possible.

**See also:**

**Appendix 2, Safeguarding process flowchart**

## **7. The Outcome**

If the concern is proved to have been well founded, then corrective action will be taken, and necessary steps will be implemented to prevent any further occurrences.

A member of the Safeguarding team to whom the concerns are reported to will arrange a meeting with the person who reported the concern to give appropriate feedback on the outcome.

Where there is no case to answer, but the individual acted in good faith, then management will ensure there are no reprisals to the reporting individual.

Where allegations are provided false and have been made maliciously, A-cute's management will take appropriate action against the person who made the false allegations including disciplinary action or referral to their registering body such as the HCPC, NMC.

## **8. What you should do if you have general concerns for the welfare of a service user**

If you notice a change in a service user's behaviour first talk to the Safeguarding Manager who will advise you of the next steps. The next step may be to contact the parents/carers/ responsible adult for the service user. It may be that something has happened, like a bereavement, which has caused the service user to be unhappy.

If your concerns remain after talking to the parents/carers/ responsible adult (or if you feel you cannot talk to the parents/carers/ responsible adult because you are worried about sexual abuse or violence) the Safeguarding Manager should be contacted to make the decision to contact the police and or the local social or safeguarding services department. There may be specific instructions in place for events taking place from the local SAG.

## **9. What happens if there is alleged abuse by a member of staff?**

Any concerns about the behaviour of members of staff or any allegations of abuse must be reported to Safeguarding Manager immediately. Depending on the seriousness of the allegations the member of staff may be suspended from work and reported to the Police for a possible criminal investigation and/or a Social Services child protection investigation if the abuse relates to a child or young adult. Irrespective of the outcome of any Police or Social Services Investigation's A-cute will apply its own disciplinary procedures as appropriate, which will involve a full and fair investigation. If the allegation is against a sub-contractor that sub-contractor will be dismissed from the contract and the individual reported to their registration body and other relevant bodies.

It is important to ensure that the correct procedure is used to protect innocent employees and/or abused service users. An investigation will be carried out without prejudice and the outcome acted on.

Anyone who believes there is a case of malpractice or wrongdoing (e.g., inappropriate behaviour or horseplay by colleagues and or friends) taking place in A-cute, or in an activity related to the work of the organisation, then you can follow the whistleblowing policy.

Whistleblowing – the accepted name for reporting a concern – is 'making a disclosure in the public interest'. Such action is taken for the good of society, and it is therefore described in this way. It means that if you believe there is wrongdoing in the organisation then you will be supported in reporting it.

## **10. Recruitment**

A-cute takes comprehensive steps to ensure that all employees recruited are appropriately vetted through robust recruitment and interview processes.

Specifically, in relation to Safeguarding Children and vulnerable adults, A-cute's policy is that all employees that work directly with children and vulnerable adults will be DBS checked. This applies to permanent, fixed term, temporary and casual staff. In all cases an Enhanced Disclosure will be sought.

Job advertisements will state that a DBS check is required. A-cute complies with the Rehabilitation of Offenders Act 1974 and a spent conviction (other than those relating to child protection or those on the sex offenders register) will not be a bar to employment.

Additionally, for the recruitment of subcontractors and third part organization, A-cute will obtain a signed declaration form that the contractor/third party provider, confirming that they have followed a robust safeguarding recruitment process and that current DBS's are in place.

## **Appendix 1**

### **Possible Signs of Abuse**

#### **Physical Abuse:**

- unexplained injuries or burns, particularly if they are recurrent
- refusal to discuss injuries
- improbable explanations for injuries
- untreated injuries or lingering illness not attended to
- admission of punishment which appears excessive
- shrinking from physical contact
- fear of returning home or of parents being contacted
- fear of undressing
- fear of medical help
- aggression / bullying
- over compliant behaviour or a 'watchful attitude'
- running away
- significant changes in behaviour without explanation
- deterioration in work
- unexplained pattern of absences which may serve to hide bruises or other physical injuries.

#### **Emotional Abuse:**

- continual self-depreciation
- fear of new situations
- inappropriate emotional responses to painful situations
- self-harm or mutilation
- compulsive stealing or scrounging
- drug or solvent abuse
- neurotic behaviour; obsessive rocking, thumb-sucking, restlessness, twitching etc.
- air of detachment; don't care attitude
- social isolation; not joining in, few friends, excuses to be alone
- desperate attention seeking behaviour
- eating problems, including overeating and lack of appetite, depression, withdrawal

#### **Neglect:**

- constant hunger
- poor personal hygiene
- inappropriate clothing
- frequent lateness or non-attendance at school
- untreated medical problems
- low self-esteem
- poor social relationship
- compulsive stealing
- constant tiredness

## **Sexual Abuse**

- bruises, scratches, burns or bite marks on the body
- scratches, abrasions or persistent infections in the anal or genital regions
- pregnancy, particularly in the case of young adolescents who are evasive concerning the identity of the father
- sexual awareness inappropriate to the child's age, for example, in drawing, vocabulary, games inappropriate websites
- frequent public masturbation
- attempts to teach other children about sexual activity
- refusing to stay with certain people or go to certain places
- aggressiveness, anger, anxiety, tearfulness
- withdrawal from friends

## **Older Children**

- promiscuity, prostitution, provocative sexual behaviour
- self-injury, self-destructive behaviour, suicide attempts
- eating disorders
- tiredness, lethargy, listlessness
- over-compliant behaviour
- sleep disturbances
- unexplained gifts of money
- depression
- changes in behaviour

Please note this list is not exhaustive.

## **Reporting abuse or suspected abuse or for help and advice useful numbers and contacts**

In an Emergency at an event

- 999
- 101
- MASH (can be found on the internet for each event location)
- LSCBs (Children)
- Hampshire SAB (Adults)
- Information and contacts can be found on the NHS Safeguarding APP.

## **A-cute's Safeguarding Manager**

- Mark Weatherhead      Level 5
  - Telephone: 02380243588
  - Email: acutemedicalservices@gmail.com

## Who to contact for further help and advice

- Care Quality Commission
  - Telephone: 0300 061 6161
  - Email: [enquiries@cac.org.uk](mailto:enquiries@cac.org.uk)
- Hantsweb
  - Telephone: 0300 555 1386
- Respond
  - Telephone: 0808 808 0100
  - Email: [admin@respond.org.uk](mailto:admin@respond.org.uk)
- Police
  - Telephone: 101 or 999

## Reporting children abuse and help and advice useful numbers and contacts

### Child services

- Hampshire Child Services
  - Telephone: 0300 555 1384
- Isle of Wight
  - Telephone: 0198 381 4545
- Portsmouth
  - Telephone: 0845 671 0271
- Southampton
  - Telephone: 0238 083 3336

## **The Multi Agency Safeguarding Hub (MASH)**

### **Monday to Friday from 9am to 5pm**

The Multi agency Safeguarding Hub responds to initial enquiries about children and young people because of Policy involvement with the child or their family.

If you become aware that the Police have been involved with a child, young person or family please contact the MASH on 0300 555 1384 or OOH 0300 555 1373

### **Local Authority Designated Officer (LADO)**

Telephone: 01962 876364

Email: [child.protection@hants.gov.uk](mailto:child.protection@hants.gov.uk)



Appendix 2

# A-cute Medical Event Services Safeguarding Flow Chart

