Adult Safeguarding Policy and procedures 2023

Sturge Weber UK provides support for young people, and vulnerable adults, living with, or who have an interest in, Sturge Weber Syndrome.

Sturge Weber UK believes that it is always unacceptable for a young person or vulnerable adult to experience abuse of any kind and recognises its responsibility to safeguard and promote the welfare of all young people and vulnerable adults through a commitment to practice which protects them.

This Safeguarding policy applies to all trustees and volunteers of Sturge Weber UK and adults engaged during activities (e.g., Family Weekend, regional meetings) will be provided with a copy and are expected to comply with the policy.

How SW UK will meet its commitment to keeping young people and vulnerable adults safe:

Sturge Weber UK is committed to Safeguarding Adults in line with national legislation and relevant national and local guidelines.
We will safeguard adults by ensuring that our activities are delivered in a way which keeps all adults safe.
Sturge Weber UK is committed to creating a culture of zero-tolerance of harm to adults which necessitates: the recognition of adults who may be at risk and the circumstances which may increase risk; knowing how adult abuse, exploitation or neglect manifests itself; and being willing to report safeguarding concerns.
This extends to recognising and reporting harm experienced anywhere, including within our activities, within other organised community or voluntary activities, in the community, in the person's own home and in any care setting.
Sturge Weber UK is committed to best safeguarding practice and to uphold the rights of all adults to live a life free from harm from abuse, exploitation, and neglect.

Sturge Weber UK Safeguarding Statement

Sturge Weber UK believes everyone has the right to live free from abuse or neglect regardless of age, ability or disability, sex, race, religion, ethnic origin, sexual orientation, marital or gender status.
Sturge Weber UK is committed to creating and maintaining a safe and positive environment and an open, listening culture where people feel able to share concerns without fear of retribution.
Sturge Weber UK acknowledges that safeguarding is everybody's responsibility and is committed to prevent abuse and neglect through safeguarding the welfare of all adults involved.

Sturge Weber UK recognises that health, well-being, ability, disability and need for care and support can affect a person's resilience. We recognise that some people experience barriers, for example, to communication in raising concerns or seeking help. We recognise that these factors can vary at different points in people's lives.
Actions taken by Sturge Weber UK will be consistent with the principles of adult safeguarding ensuring that any action taken is prompt, proportionate and that it includes and respects the voice of the adult concerned.

How to respond to signs or suspicions of abuse

Listen carefully to what is said.
Stay calm.
Find an appropriate opportunity to explain that it is likely that the information will need to be shared with others - do not promise to keep secrets.
Allow the young person or vulnerable adult to continue at her/his own pace and do not interrupt if the person is freely recalling events.
You do not need to find a 'witness'.
Ask questions for clarification only, and always avoid asking questions that suggest a particular answer. Questions should be framed an open manner and not 'lead' the young person or adult in any way. For example, say, "Tell me what has happened", rather than, "Did s/he do…"
Reassure the young person or adult that s/he has done the right thing in telling you.
Explain what you will do next and with whom the information will be shared.
Do not ask the young person, or adult to repeat the disclosure to anyone else or ask him/her to write a 'statement'.
Contact the designated Safeguarding Lead as soon as you can or, where such contact is not possible, ensure a referral is made without delay to the appropriate Social Care office.
Record in writing what was said, including the young person's, or adult's own words, as soon as possible – note date, time, any names mentioned, to whom the information was given and ensure that the record is signed and dated.
Do not discuss with parents/carers. The Safeguarding Lead will agree with the Social Care team when parents/carers should be contacted and by whom.

How to respond to an Adult telling you about abuse

Any suspicion or concern that a young person or vulnerable adult may be suffering or at risk of suffering significant harm MUST be acted on. Doing nothing is not an option. Any suspicion or concerns should be discussed without delay with the Safeguarding Lead. If the young person or vulnerable adult is felt to be in immediate danger, the Police should be called.
A careful record should be made of what you have seen/heard that has led to your concerns and the date, time, location, and people who were present. As far as possible, record verbatim what was said and by whom. Where physical injuries have been observed, these should be carefully noted but should not be photographed. Do not ask to see injuries that are said to be on an intimate part of the child, young person, or vulnerable adult's body.

Young people and vulnerable adults who are disabled

Young people and vulnerable adults who are disabled are especially vulnerable to abuse and adults who work with them need to take extra care when interpreting apparent signs of abuse or neglect. There are no different or separate procedures for young people and vulnerable adults who are disabled, and these procedures should be followed if a young person or adult who is disabled discloses abuse or there are indicators of abuse or neglect.

What does vulnerable adult mean?
A vulnerable adult is someone aged 18 or above who may need community care services for reasons like mental health issues, disability, age, or illness.
They may not be able to take care of themselves or protect themselves from harm or exploitation.

Record Keeping
A record should be made by the adult receiving a disclosure of abuse as soon as possible after the disclosure has been reported to the Safeguarding Lead. The facts, not opinions, should be accurately recorded in a non-judgemental way and should include:

The young person's or adult's name, gender, and date of birth
Date and time of the conversation
What was the context and who was present during the disclosure?
What did the person say? – verbatim if possible
What questions were asked? – verbatim
Responses to questions –verbatim
Any observations concerning the person's demeanour and any injuries
The name of the person to whom you reported the disclosure
Print your name
Sign and date the record
Pass all of this to the designated Safeguarding Lead

This should be retained in the original form (as it could be used as evidence in criminal proceedings), even if later typed or if the information is incorporated into a report

How to respond to allegations of abuse against a charity committee member or volunteer.
Rigorous recruitment and selection and other safeguarding procedures and adhering to safer practice guidance will hopefully mean that there are relatively few allegations against or concerns about charity volunteers or people hired by the charity to care for or entertain the young people and vulnerable adults. However, if there is any reason to believe that a charity volunteer has acted inappropriately or abused a young person or vulnerable adult, you must act by discussing your belief or concern with the Safeguarding Lead. Even though it may seem difficult to believe that person may be unsuitable to work with children, young people and vulnerable adults, the risk is far too serious for anyone to dismiss such a suspicion without acting. If the concern is about the designated Safeguarding Lead, it should be discussed with the SW UK Chairperson.

Contact numbers:

Safeguarding Lead: Carolyn Burns	07841198327
Deputy Safeguarding Lead/Chairperson: Marie Cavalier	07748187431
Coventry Adult Social care:	024 7683 3003
Out of hours (weekends & evenings):	02476 832 222
Glasgow City Council Social Care:	0141 287 0555
Out of hours (weekends & evenings):	0300 343 1505
NSPCC Report Abuse:	0808 800 5000
Learning Disability Helpline:	0808 808 1111

How to respond to allegations of abuse against others
This may be a parent or carer, another child or anybody else. The above procedures on responding and record keeping also apply.

Confidentiality policy
The legal principle is that the "welfare of the young person, or vulnerable adult is paramount".

Privacy and confidentiality should be respected where possible but if doing this leaves a young person or vulnerable adult at risk of harm then the young person or vulnerable adult's safety must come first. Remember:
Legally, it is fine to share information if someone is worried about the safety of a young person or vulnerable adult.
Not everyone needs to know when a concern or worry is raised. This respects the young person or vulnerable adult's, family and/or charity volunteer's rights to privacy. So only people who need to know should be told about it. Otherwise, there might be gossip and rumours or other people may be genuinely concerned.
It is fine to say that a concern has been raised and it is being dealt with following the group's procedures.

Safeguarding training

Sturge Weber UK recognises 3 levels of training:

1. All volunteers: Awareness
all volunteers are made aware of the charity's Safeguarding procedures.

2. New Trustees understand how to recognise young people and vulnerable adults who are, or may be, suffering harm. How to respond to welfare concerns, including disclosures of abuse. Who to contact in case of disclosure or suspicion of abuse.

Courses:

a. "Safeguarding Adults level 1",
b. "Charity Trustees – your duties to safeguard and protect"
c. "e-learning Certificates and Child protection – an introduction.

Trustees undertake the course upon appointment. All Trustees to renew every two years: "Safeguarding Adults level 1".

3. Designated Safeguarding Lead and deputy to ensure a higher minimum level of expertise, a greater understanding of how to work together with other agencies to identify and address welfare concerns, the means to plan, undertake and review interventions, the ability to manage and contribute to adult protection procedures.

Courses:
Safeguarding Lead: . Level 3
Deputy Safeguarding Lead: Level 3
Trustees undertake the course upon appointment, update required every 2 years.

Types of Abuse

What does abuse mean?

An abuse is a violation of an individual's human and civil rights by any other person or group of people.
Abuse or neglect can happen anywhere - at home or in public, in hospitals, day centres, schools, colleges or care homes.
Often the person causing the harm is someone you know, in a position of trust and power. This could be a health, education or care professional, or a friend, relative or neighbour.

Types of abuse and neglect

Physical abuse
This can include assault, hitting, slapping, pushing, unauthorised restraint, denial of food or water, not being helped to go to the toilet when needed, misuse of medication.

Sexual abuse
This can include indecent exposure, sexual harassment, unwanted looking or touching, rape, sexual teasing, and inappropriate jokes, being shown pornography when unwanted, sharing naked photos of someone online that they did not want shared, witnessing sexual acts, unwanted or unconsented sexual acts.

Emotional abuse
This can include threats of being physically hurt, left alone, or abandoned, stopping someone seeing other people, humiliation, blaming, controlling, intimidation, harassment, verbal abuse, isolation, unreasonably or unjustifiably taking away or stopping someone receiving support or services.

Domestic abuse
This is usually abuse by someone in the home - like a family member, partner, house mate or carer. Domestic can include controlling, coercing, threatening physical violence, degrading, manipulating.

Discriminatory abuse
This is abuse because of someone's disability, race, gender, age, sexual orientation, or religion. Discriminatory abuse includes harassment, name-calling, and unfair treatment.

Financial abuse
This can include stealing, spending someone else's money inappropriately when appointed to look after it on their behalf, forcing someone to spend their money on things they do not want, internet, email, phone, postal and doorstep scams. Another example of financial abuse is when someone makes "friends" with a vulnerable adult and then persuades them to give or lend them their benefits money. This kind of abuse can be hard to spot if the vulnerable adult believes they are just helping a friend.

Neglect
This can include, not giving someone enough food or the right food, not washing someone or supporting them to wash, not changing someone's dirty or wet clothes, not getting a doctor when someone needs medical attention, not making sure someone has the right medicines.

It is not abuse, but I am still concerned
Sometimes concerns about a young person or adult may not be about abuse. You may be concerned that a person or family need some help in making sure all the needs are met to address a particular problem. Examples of this might be where a person is suffering because of poverty, getting into trouble in the community, or has a disability and needs extra help. In these instances, refer to the NHS website for guidance.

How to recognise signs of abuse

It is not always easy to spot the signs of abuse. Someone being abused may make excuses for why they are bruised, may not want to go out or talk to people, or may be short of money.

It is important to know the signs of abuse and, where they are identified, gently share your concerns with the person you think may be being abused. If you wait, hoping the person will tell you what has been happening to them, it could delay matters and allow the abuse to continue.

Behavioural signs of abuse in an older person include:
becoming quiet and withdrawn
being aggressive or angry for no obvious reason
looking unkempt, dirty, or thinner than usual
sudden changes in their character, such as appearing helpless, depressed, or tearful
physical signs – such as bruises, wounds, fractures, or other untreated injuries
the same injuries happening more than once
not wanting to be left by themselves, or alone with particular people
being unusually light-hearted and insisting there is nothing wrong
Also, their home may be cold, or unusually dirty or untidy, or you might notice things missing.
Other signs include a sudden change in their finances, such as not having as much money as usual to pay for shopping or regular outings or getting into debt. Watch out for any official or financial documents that seem unusual, and for documents relating to their finances that suddenly go missing.
If you feel someone you know is showing signs of being abused, talk to them to see if there is anything you can do to help. If they are being abused, they may not want to talk about it straight away, especially if they have become used to making excuses for their injuries or changes in personality.

Do not ignore your concerns, though. Doing so could allow any abuse to carry on or escalate.

Mental Capacity and Decision Making

We make many decisions every day, often without realising. UK Law assumes that all people over the age of 16 can make their own decisions, unless it has been proved that they can't. It also gives us the right to make any decision that we need to make and gives us the right to make our own decisions even if others consider them to be unwise.
We make so many decisions that it is easy to take this ability for granted. The Law says that to decide we need to:
Understand information
Remember it for long enough
Think about the information
Communicate our decision
A person's ability to do this may be affected by things such as learning disability, dementia, mental health needs, acquired brain injury and physical ill health.

Most adults can make their own decisions given the right support however, some adults with care and support needs have the experience of other people making decisions about them and for them. Some people can only make simple decisions like which colour T-shirt to wear or can only make decisions if a lot of time is spent supporting them to understand the options. If someone has a disability that means they need support to understand or make a decision this must be provided. A small number of people cannot make any decisions. Being unable to make a decision is called "lacking mental capacity".

Mental capacity refers to the ability to make a decision at the time that decision is needed. A person's mental capacity can change. If it is safe/possible to wait until they can be involved in decision making or to make the decision themselves.

For example:
A person with epilepsy may not be able to make a decision following a seizure.
Someone who is anxious may not be able to make a decision at that point.
A person may not be able to respond as quickly if they have just taken some medication that causes fatigue.

Mental Capacity is important for safeguarding for several reasons.

Mental Capacity must also be considered when we believe abuse or neglect might be taking place. It is important to make sure an 'adult at risk' has choices in the actions taken to safeguard them, including if they want other people informed about what has happened, however, in some situations the adult may not have the mental capacity to understand the choice or to tell you, their views.

How we can make decisions for people who are unable to make decisions for themselves.
We can only make decisions for other people if they cannot do that for themselves at the time the decision is needed.
If the decision can wait, wait – e.g., to get help to help the person make their decision or until they can make it themselves.
If we must make a decision for someone else, then we must make the decision in their best interests (for their benefit) and consider what we know about their preferences and wishes.
If the action, we are taking to keep people safe will restrict them then we must think of the way to do that which restricts to their freedom and rights as little as possible.

Many potential difficulties with making decisions can be overcome with preparation,
It is good practice to get as much information about the person as possible. Some people with care and support needs will have a 'One page profile' or a 'This is me' document that describes important things about them. Some of those things will be about how to support the person, their routines, food, and drink choices etc. but will also include things they like and don't like doing
If a person who has a lot of difficulty making their own decisions is thought to be being abused or neglected you will need to refer the situation to the Local Authority, and this should result in health or social care professionals assessing mental capacity and/or getting the person the support, they need to make decisions.

Report your safeguarding concerns.

The adult does not have any formal care or support:
If the person is not receiving any support and you are worried for their safety, here are your options:

Talk to their GP: you can talk in confidence to their GP about your concerns. GPs have safeguarding policies to follow when safeguarding concerns are reported. Use the words 'safeguarding concern' to show that your worries are serious and that their safeguarding policy should be followed.
Get a copy of the GP's safeguarding policy: if it is not on the website, you can get a copy from reception. The safeguarding policy will typically involve the GP working with the local adult social care safeguarding team. Knowing their policy helps you follow their progress and ensure the appropriate action is being taken.

Speak to the duty social care team: if you do not know who their GP is, or the situation is urgent and the adult does not have a social worker, the duty social care team should be informed. You can do this by contacting the local council. You can check their council area by using the postcode search on the gov.uk website.

Contact the local Safeguarding Adults Board: Local authorities are responsible for the safeguarding of vulnerable adults and children in their area. If your concerns are not being taken seriously, contact the local Safeguarding Adults Board directly. The safeguarding team will review the situation and decide whether to investigate or act right away. You'll be able to ask the GP or social worker whether any action has been taken but won't have the right to know about the specifics.

Contact the police: if you believe the adult is at immediate risk, call the police.

The adult receives support and has a social worker:
All local authorities have a lead safeguarding officer, and social workers are trained to alert the right person when a safeguarding concern is raised.
If you are worried about an adult who is already receiving support and has a social worker, you can get in touch with their social worker. They will listen to your concerns and get advice from the local authority safeguarding team.
If you feel that the social worker does not take your concerns seriously, contact the local Safeguarding Adults Board (SAB) directly through the local council website.

The adult has health care support in the community:
You can speak to the manager of the care provider.
If you feel this isn't appropriate - because you think they are causing the harm, for example - go straight to the local authority Safeguarding Adults Board. You will find their contact details on the local council website.
Although health care packages are funded by the NHS and regulated by the Care Quality Commission, local authorities have overall responsibility for safeguarding all vulnerable adults in their community.
If you have any problems contacting the local authority, or they do not respond appropriately, you can call the Care Quality Commission: 03000 616161.

The adult is in hospital:
You can raise the concern with the hospital's Safeguarding Coordinator. Most hospitals have at least one designated Coordinator for safeguarding matters and the ward manager will know who this is.
The Safeguarding Coordinator can get advice from the central safeguarding team at NHS England or, for out of hours reports, they can contact the emergency social services safeguarding team in the local authority.
If you are still not sure who to contact after speaking to the ward or department manager, try contacting the Patient Advice and Liaison Service (PALS). For the adult's nearest PALS, use this postcode search.
NHS Trusts have someone responsible for overseeing safeguarding concerns who you can ask to speak to.
If you feel that the hospital is not taking your safeguarding concerns seriously, you can report it to the local authority, which has overall responsibility for safeguarding people in their area.

After a safeguarding concern is reported

What happens after you report a safeguarding concern?

The safeguarding person or team will decide whether the person is at immediate risk of harm. If they are, the authority will act. This could mean removing the person from the harmful situation or removing the person causing the harm.
There are many different courses of action, and the best interests of the vulnerable adult will be kept at the centre of any response.
The safeguarding person or team will decide whether they need to investigate the issues any further.
Further investigations may involve:
discussing the issues with other professionals in the adult's care, and with the adult themselves.
building up a more detailed picture of what is happening and make further investigations.
considering measures that can be put in place to prevent the vulnerable adult from being abused and neglected.
drawing lessons from the case that can used to improve the effectiveness of safeguarding procedures across the board.

Support through safeguarding enquiries, investigations, or reviews
If the vulnerable adult needs to take part in safeguarding adult reviews or safeguarding enquiries (under the Care Act 2014), and the local authority deems the person to have care and support needs, then they will make a judgement on two things:
Does the person have substantial difficulty in being involved?
Do they lack an appropriate individual to support them?
If the answer to both is 'yes', an independent advocate must be appointed to support and represent the person.

What does 'substantial difficulty' mean?
The Care Act defines four areas where people may experience substantial difficulty:
Understanding relevant information.
Retaining information.
Using or weighing information.
Communicating views, wishes and feelings.
This is not the same as lacking mental capacity and is an entirely different concept. Somebody with full mental capacity may still have substantial difficulty being involved in a safeguarding review or enquiry.

What does an 'appropriate individual' mean?
The local authority will consider whether there is an appropriate individual to support the adult, instead of appointing an independent advocate. There are four specific considerations. Individuals are considered inappropriate if they are:
already providing care or treatment to the person in a professional capacity or on a paid basis.
someone the person does not want to support them.
someone who is unlikely to be able to, or available to, adequately support the person's involvement.
someone implicated in an enquiry into abuse or neglect, or who has failed to prevent abuse or neglect as judged by a safeguarding adult review.

If there is no appropriate individual available, the local authority must appoint a trained professional known as an independent advocate to support and represent the adult through the safeguarding process, regardless of the level of care the person gets.
If you have any questions about safeguarding or are worried about someone but are unsure what to do, you can call the Learning Disability Helpline on 0808 808 1111.

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