



MS-UK adult safeguarding policy

Aims

This policy is designed to demonstrate MS-UKs commitment to provide services to adults in an environment that has safe and effective working practices in place.

The aims of adult safeguarding are to:

- Stop abuse or neglect wherever possible
- Prevent harm and reduce the risk of abuse or neglect

Scope

This policy applies to staff, interns, apprentices, agency staff, trustees, volunteers and anyone else working directly with our clients.

Definition

Safeguarding is defined as 'protecting an adult's right to live in safety, free from abuse and neglect'.

'Protecting' means responding to concerns and/or disclosures that an adult at risk may be experiencing or be at risk of abuse.

An adult at risk has the right to protection and freedom from abuse or exploitation, regardless of age, disability, gender, racial heritage or racial culture, religious belief, sexual orientation, economic status or otherwise.

Who is an adult at risk:

- An adult who has care and support needs, and
- Is experiencing, or is at risk of, abuse or neglect and
- Is unable to protect themselves from either the risk of, or the experience of abuse or neglect, because of those needs

'Care and support' is the term used to describe the help some adults need to live as well as possible with any illness or disability they may have which can include:

- Adults with care and support needs regardless of whether those needs are being met by the local authority
- Adults who don't have clearly identified needs, but who may still be vulnerable





- Adults who manage their own care and support through personal or health budgets
- Adults who fund their own care and support
- Children and young people in specific circumstances

An individual who receives support from MS-UK services may be identified under the Care Act 2014 as a vulnerable adult. MS-UK recognises the increased vulnerability of adults who:

- have limited mobility
- have limited / no external representation
- have limited / no knowledge of keeping safe
- have extremely limited / no verbal communication

Abuse types

- **Physical:** including hitting, slapping, pushing, punching, burning, misuse of medication, restraint or inappropriate sanctions, accumulation of minor accidents without seeking medical assistance
- **Financial or material:** including theft, fraud, exploitation, pressure in connection with wills, property, inheritance or financial transactions or the misuse or misappropriation of property, possessions or benefits
- **Sexual:** including rape, sexual assault or sexual acts to which the adult has not consented, or could not consent to or was pressured into consenting to, inappropriate touching, exposure to pornographic material
- **Psychological or emotional:** including belittling, name calling, threats of harm, abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or support networks
- **Discriminatory:** including discrimination on the ground of race, gender and gender identity, disability, sexual orientation, religion and other forms of harassment, slurs or similar treatment
- **Neglect and acts of omission:** including withholding the necessities of life such as medication, adequate nutrition and heating, ignoring medical or physical care needs and failure to provide access to appropriate health, social care or educational services
- **Self-neglect:** neglecting to care for one's personal hygiene, health or surroundings including behaviour such as hoarding





- **Domestic:** incident, or pattern of incidents, 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. This includes: physical; sexual; psychological; financial; emotional abuse, 'honour' based violence, Female Genital Mutilation (FGM) and forced marriage
- **Modern slavery:** encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment
- **Organisational:** institutional abuse occurs where the culture of the organisation (such as a care home) places emphasis on the running of the establishment
- **Multiple forms of abuse:** may occur in an ongoing relationship or an abusive service setting to one person, or to more than one person at a time, making it important to look beyond single incidents or breaches in standards, to underlying dynamics and patterns of harm. Any, or all, of these types of abuse may be perpetrated as the result of deliberate intent and targeting due to negligence, or ignorance of vulnerable people

Abuse can include negligent treatment, maltreatment, radicalisation or exploitation.

Abuse can take place in any setting, public or private, in person or online and 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 the abuse and can include other children or adults who are at risk.

Designated named lead for adult safeguarding

MS-UK has an appointed individual who is responsible for dealing with any adult safeguarding concerns. The designated named lead within MS-UK is:

Amy Woolf – Chief Executive Officer
Work telephone number: 01206 226505
Work mobile number: 07824 708897
Email address: amy@ms-uk.org

Day to day responsibility is delegated to:

Diana Crowe - Head of Services





Work telephone number: 01206 226517

Work mobile number: 07508 221465

Email address: diana@ms-uk.org

However please note that all senior managers can respond to concerns in the absence of the above named people.

Responsibilities

Responsibilities of the designated named lead are to:

- Take action to identify and prevent abuse from happening
- Respond appropriately when abuse has or is suspected to have occurred
- Ensure that the agreed adult safeguarding procedures are followed at all times
- Provide support, advice and resources to staff when responding to adult safeguarding concerns
- Inform staff of any local or national issues relating to safeguarding adults
- Ensure staff are aware of their responsibilities to attend training and to support staff in accessing these events
- Understand how diversity, beliefs and values of people who use MS-UK services may influence the identification, prevention and response to safeguarding concerns
- Ensure that information is available for people that use MS-UK services, and/or family members, setting out what to do if they have a concern
- Be responsible for monitoring this policy
- Approve this policy and ensure it is reviewed annually or when there have been significant changes
- Ensure this policy is available publicly and proactively promote to provide reassurance and enable those at risk to provide us with constructive feedback
- Inform any relevant funders of any potentially serious concerns or disclosures as required
- Complete an annual review of safeguarding concerns to identify any patterns or recognise any training needs
- Have a safeguarding lead on the board of trustees

MS-UK will ensure that employees, trustees and volunteers:

- Have the appropriate employment checks in line with the requirements of the Disclosure Barring Service (DBS) and ensure that these checks are renewed every three years if they have any unsupervised contact with adults
- Have appropriate references
- Are familiar with and follow the safeguarding adults policy at all times. Failure to do so may result in disciplinary action
- Participate in safeguarding adults training annually and maintain current working knowledge





- Discuss any concerns about the welfare of an adult with their line manager and/or designated named lead
- Who have experienced or are experiencing abuse, are well supported and receive appropriate supervision
- Are supported if they make a disclosure under the Public Interest Disclosure Act (see MS-UKs Whistleblowing policy)
- Understand how to recognise online abuse and what action to take

Support for those who report abuse

All those making a complaint, an allegation or expressing a concern, whether they are employees, trustees, volunteers, and/ or service users, carers/ families or members of the general public should be reassured that:

- They will be taken seriously
- Their comments will usually be treated confidentially, but their concerns may be shared with the designated named lead if they or others are at significant risk, and will take any appropriate action in accordance with this policy

If an allegation of abuse is made about a member of staff:

- MS-UK employees, trustees or volunteers will be aware that abuse is a serious matter that could lead to a criminal conviction
- If a criminal offence has been committed the police will be informed
- Where applicable MS-UK's disciplinary policy will be implemented
- If appropriate the matter may be referred to the DBS
- MS-UK will conduct a risk assessment to ascertain the level of risk the staff member may pose to those receiving a service and whether it is safe for them to continue in their role or any other role while the matter is being investigated

Alternative pathways

If it is established that it is not a safeguarding concern, there are other pathways that the individual at risk or member of staff could consider which include:

- Complaint - This should be used if you have a complaint about a service provided by the local authority, an employee's attitude or behaviour or failure to fulfil its statutory responsibilities





- Care Act Assessment/Review – This is a right to be assessed by the local authority if someone appears to need care and support to complete daily activities. There is a right to an assessment regardless of the adults' financial situation or whether the council thinks the adult will then be eligible for support from them. The assessment will help to decide if the adult needs care and support, and whether they are eligible for funding from the council towards the cost of that care and support. The assessment must be carried out with involvement from the adult and, where appropriate, someone who looks after them (perhaps a relative or friend). It can also involve someone else nominated by the adult to help get their views and wishes heard, or an independent advocate provided by the local authority
- Quality Concern – If you want to report poor care (and there is no safeguarding issue), you can do this by contacting either your local authority or by contacting the Care Quality Commission and completing an online form
- Carers Assessment - If someone is caring for someone else aged 18 or over on a regular basis, without being paid for it, they are entitled to have a carer's assessment. The assessment provides an opportunity for adult social care to decide what support is needed to be a carer
- Notifying the clients GP of any ongoing concerns that may require additional support

Safeguarding children

Whilst MS-UK does not directly work with children we know that the service users we engage with may have their own children, grandchildren and/or come into contact with other children. It is important that we do not ignore any concerns that we hear and all staff, trustees, volunteers and anyone working on our behalf must report and share any concerns with the designated named lead. More information can be found here: <https://learning.nspcc.org.uk/safeguarding-child-protection>.

Confidentiality

Safeguarding adults raises issues of confidentiality which must be clearly understood by all:

- Staff, trustees, volunteers and anyone else providing services for the charity who are working directly with our clients have a professional responsibility to share relevant information about the safeguarding of adults with other professionals, particularly investigative agencies and adult services in the relevant local area
- All personal information regarding the adult at risk will be kept secure. All written records will be kept in a secure area for a specific time in keeping with MS-UK's Data Protection policy. Files will only have the details required in the initial adult safeguarding report and any additional relevant information, risk assessments and referral forms





- If an adult at risk confides in a member of staff and requests that the information is kept secret, it is important that the member of staff explains sensitively that he or she has a responsibility to refer cases of alleged abuse to the designated named lead, who will decide whether to refer to the appropriate agencies
- The adult at risk must, however, be assured that the matter will be disclosed only to people who need to know about it
- Where possible, consent should be obtained from the adult at risk before sharing their personal information with third parties. In some circumstances obtaining consent may be neither possible nor desirable as the safety and welfare of the adult at risk is the priority
- The adult at risk must be assured that they will be kept informed of what action, if any is to be taken and why. The adults' involvement in the process of sharing information must be fully considered and their wishes and feelings taken into account where possible

MS-UK safeguarding policy reviewed August 2020

