

LIVERPOOL CITY COUNCIL COMMUNITY RESOURCES UNIT

SAFEGUARDING VULNERABLE ADULTS–ALERTER'S PACK

This is an easy access document for staff, volunteers and management committees or trustees of community groups organising projects involving vulnerable adults. It does not replace the full Safeguarding Vulnerable Adults Framework for Action, which is available on the internet at http://www.liverpool.gov.uk/Health_and_social_care/Social_services/Care_for_adults/Adult_protection/index.asp.

Some of the circumstances described in this document may not seem relevant to your group/organisation; however at any time one or more of your service users may become vulnerable through, for example, illness, and unexpected circumstances may arise in which abuse could take place. These procedures must be used where there is a concern, allegation or disclosure of abuse of any adult taking part in an activity funded by LCC Councillor's Community Initiative Fund irrespective of where the potential abuse took place.

ALERTING PROCEDURE

This procedure applies to any concern, allegation or disclosure in any setting.

1. In an emergency, dial 999 for either police or an ambulance
2. In all cases of concern, allegation or disclosure of abuse you must inform your manager/management committee/trustees as soon as possible. If this isn't appropriate due to your working arrangements, you should make an adult protection referral directly to **Careline (Liverpool) 0151 233 3800**. If you suspect your manager is involved in the abuse you should either report to his or her manager or to your management committee or trustees as soon as possible, and if you feel they are not dealing with it, make a direct referral to Careline.
3. Keep a record of the incident. Note down what happened and when. Describe the whereabouts in the room of people and relevant objects such as weapons when you first entered. Describe what the whole scene looked like.
4. If someone is making an allegation or disclosing abuse to you, you must make a note as soon as possible of what they said. Make sure you use the person's own words.
5. You must never keep secrets, even if the person asks you not to tell anyone else. You must always share concerns, allegations or disclosures with your manager, management committee or trustees as appropriate.
6. You will be expected to co-operate with the investigation, whatever form it takes, including being interviewed by the police.
7. Don't ask the person questions about the incident/s.
8. If the person accused of the abuse contacts you, you must not talk to them about the incident/s. Don't give them any information about the person.
9. Don't discuss what has happened with carers or relatives of the person or with other workers/volunteers.
10. You should receive feedback from your manager, management committee or trustees within 14 days to confirm that the incident has been or is in the process of being dealt with.

Good practice guidelines

Recognising signs of adult abuse:

- Think about what you have seen and ask yourself it is acceptable practice
- Work strictly in accordance with anti-oppressive practice
- Take what you are told seriously
- Be on the alert for hints, signals and non-verbal communication that could indicate abuse

Responding to disclosure:

- Incidents of abuse or crimes may only come to light because the abused person themselves tells someone
- The person may not consider that they are being abused when they tell you what is happening to them
- Disclosure may take place many years after the actual event
- Disclosure may take place when the person has left the setting in which they were abused
- Even if there is a delay the information must be taken seriously

If someone makes an allegation of abuse or tells you about abuse:

DO

- Stay calm and try not to show shock
- Listen carefully
- Be sympathetic
- Tell the person that:
- They did the right thing to tell you
- You are treating the information seriously
- It was not their fault
- You will have to report the information to your manager
- Report to your manager
- Write down what the person said to you as soon as possible

DO NOT

- Question the person about the incident
- Ask the person who, what, why where, when questions, this is the role of the police
- Promise to keep secrets
- Make promises that you cannot keep, for example. 'This will not happen to you again'
- Contact the alleged abuser
- Be judgmental, for example, 'Why didn't you run away'
- Gossip about the incident
- Bathe the person
- Wash the person's clothes or bedding
- Touch or move anything in the room where the person has been abused

When in doubt seek advice from your manager, management committee, trustees.

DEFINITIONS

For the purposes of these Procedures the following definitions apply:

A **vulnerable adult** is defined in the 1997 Consultation Paper 'Who decides?' issued by the Lord Chancellor's Department, as a person "who is or may be in need of community care services by reason of mental or other disability, age or illness and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation". For the purposes of this guidance 'community care services' will be taken to include all services/activities provided in any setting or context involving vulnerable adults or those at risk of becoming vulnerable.

Abuse is any behaviour towards a person that deliberately or unknowingly causes him or her harm, endangers their life or violates their rights. Abuse may be physical, sexual, psychological, financial or through neglect. An individual, a group or an organisation may perpetrate abuse. Abuse concerns the misuse of power; control and/or authority and can manifest itself as:

- Domestic violence, sexual assault or sexual harassment
- Racially or religiously motivated assaults
- Discrimination and oppression
- Institutional abuse

Harm is defined as:

- Ill treatment both physical and emotional
- Impairment of physical or mental health
- Avoidable deterioration in physical or mental health
- Impairment of physical, emotional, social or behavioural development.

These last two categories may be very important to an individual's ability to recover from an illness or have the best possible quality of life. (The Lord Chancellor's Department, 1997, Who Decides? P68)

Settings

People can be abused in the place where they live, that is, in their own home, residential or nursing homes and in places where they spend their days, that is, in day centres, places of work, college. People can also be abused in any setting.

Perpetrators

It must be acknowledged that perpetrators of abuse can be any of the following:

- Informal carers, including neighbours, friends and relatives
- Partners, ex-partners and other family members
- People in a position of trust
- People paid to offer care or services
- Other users of services
- Strangers
- Organisations by the way they conduct their day to day practice can abuse and cause harm
- Those who deliberately target others, whom they perceive as vulnerable, in order to exploit them.

INDICATORS OF ABUSE

Abuse can happen in isolated incidents or poor or unsatisfactory practice at one end of the scale through to pervasive ill-treatment and/or gross misconduct at the other.

Incidents of abuse may be multiple:

- To one person in a continuing relationship/service context
- To more than one person at a time
- By more than one perpetrator at a time.

Repeated incidents of poor care/treatment may be an indication of more serious problems, for example institutional abuse.

In informal situations, abuse can be an isolated incident, repeated acts or pervasive ill treatment resulting in harm.

Risk Factors

There are certain factors and situations that may place people at particular risk of being abused. The presence of one or more of these factors does not automatically imply abuse will result, but may increase the likelihood:

- Role reversal, for example, the adult child taking over the parental role
- Living in the same household as a known abuser
- Where there is a family history of abuse
- Where an adult is dependant on others or others are dependant on them
- Inappropriate or dangerous physical or emotional environment, for example, lack of personal space
- Where there is a change in the life style of a member of the household, for example, unemployment, employment, illness
- A member of the household experiencing emotional or social isolation
- The existence of financial problems
- Difference in communication or a breakdown in communication

Abuse can be viewed in terms of 5 main categories:

- Physical
- Sexual
- Financial
- Neglect
- Psychological

The Department of Health and Home Office document 'No secrets: guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse' also suggests the category of discriminatory abuse which is motivated by discriminatory and oppressive attitudes towards:

- Gender
- Race
- Cultural background
- Religion
- Physical and/or sensory impairment
- Sexual orientation
- Age

Discriminatory abuse can manifest itself as:

- Physical abuse/assault
- Sexual abuse/assault
- Financial abuse/theft
- Neglect
- Psychological abuse/harassment

Many situations will involve a combination of different kinds of abuse. However, it is useful to start by considering the definition of each category in turn, together with the indicators.

The following lists are purely indicators. The presence of one or more does not necessarily confirm abuse and the lists are not exhaustive.

Physical Abuse is physical ill treatment of an adult, which may or may not cause physical injury. This includes pushing, shaking, pinching, slapping, punching and force feeding. Physical abuse can occur in situations where people are caused unjustifiable physical discomfort. This can be through the withholding of care, withholding of access to health care or the application of inappropriate techniques or treatments. It can include forced isolation and confinement, for example, people being locked in their room and inappropriate methods of restraint.

Indicators:

- Injuries that are not explained satisfactorily
- Person exhibiting untypical self harm
- Unexplained bruising to the face, torso, arms, back, buttocks, thighs in various stages of healing; collections of bruises that form regular patterns which correspond to the shape of an object or which may appear on several areas of the body
- Unexplained burns to unlikely areas of the body, for example, soles of the feet, palms of the hands and back; immersion burns; rope burns; burns from an electrical appliance
- Unexplained, or inappropriately explained, fractures at various stages of healing to any part of the body
- Unexplained cuts or scratches to mouth, lips, gums, eyes or external genitalia
- Medical problems that go unattended
- Sudden or unexplained urinary and or faecal incontinence
- Evidence of over or under medication
- Person flinches at physical contact
- Person appears frightened or subdued in the presence of particular people
- Person may ask not to be hurt
- Person may repeat what the perpetrator has said, for example, 'Shut up or I'll hit you'
- Reluctance to undress or uncover parts of the body

Sexual Abuse is any form of sexual activity that the adult does not want and to which they have not consented, or to which they cannot give informed consent.

Sexual abuse includes: rape; buggery; incest; and situations where the perpetrator touches the person's body, for example, breasts, buttocks, genital area, exposes his/her genitals encouraging the person to touch them, coerces the person into participating in or watching pornographic photographs or videos Any sexual relationship that develops between adults where one is in a position of trust, power or authority in relation to the other, for example, a day centre worker/social worker/residential worker/health worker will be regarded as sexual abuse.

Indicators:

- Person discloses, either fully or partially, that sexual abuse is occurring or has occurred in the past
- Person has urinary tract infections, vaginal infections or sexually transmitted diseases that are not otherwise explained
- Person appears unusually subdued, withdrawn or has poor concentration
- Person exhibits significant change in sexual behaviour or outlook
- Person experiences pain, itching or bleeding in genital/anal area

- Person's underclothing is torn, stained or bloody
- A woman who lacks the mental capacity to consent to sexual intercourse becomes pregnant
- A person found having any sexual activity with a person with severe mental incapacity

Financial Abuse is the exploitation, inappropriate use or misappropriation of a person's financial resources, property, pension, allowances or insurance. This includes withholding money or the improper use of a person's money or property or denying the rights of an adult who may be competent to handle their own financial affairs.

Indicators:

- Lack of money especially after benefit day
- Inadequately explained withdrawals from accounts
- Inadequately explained inability to pay bills
- Disparity between assets/income and the living conditions
- Power of Attorney obtained when the person lacks the necessary capacity to make this decision
- Recent changes to deeds/title of house
- Recent acquaintances expressing a sudden or disproportionate interest in the person and their money
- Reluctance to pay for necessary food, clothes or items

In addition there are certain factors, which may increase the risk of a person being financially abused:

- Person has guaranteed high benefit, income
- Person is unable to administer their own money due to lack of capacity/numeracy skills
Person has several workers/ carers managing their money and accessing their PIN numbers
- Carers becoming financially dependant on a person
- Person who is isolated or lonely being exposed to financial pressure, for example from loan firms
- Person known as being isolated or is regarded as vulnerable within the community
- Person has no real independent advocate

Neglect is the deliberate withholding or unintentional failure to provide help or support which is necessary for the adult to carry out activities of daily living. Neglect also includes a failure to intervene in situations that are dangerous to the person, particularly when the person lacks the mental capacity to assess risk.

Indicators:

- Person has inadequate heating and/or lighting
- Person's physical condition/appearance is poor, for example, ulcers, pressure ulcers, soiled or wet clothing
- Person is malnourished, has a sudden or continuous weight loss, and is dehydrated
- Person cannot access appropriate medication or medical care
- Person is not afforded appropriate privacy or dignity
- Person and /or their carer has an inconsistent or reluctant contact with health and social services
- Callers/visitors are not allowed access to the person
- Person is exposed to unacceptable risk
- Neglect of accommodation

Psychological or Emotional Abuse: This may be intentional or unintentional. It may involve the use of intimidation, indifference, hostility, rejection, threats, humiliation, shouting, swearing or the use of discriminatory and/or oppressive language, which results in:

- The adult's choices, opinions and wishes being neglected
- The adult becoming isolated or over dependant
- Racial or religious harassment

Psychological abuse includes the denial of a person's human and civil rights including choice and opinion, privacy and dignity and being able to follow one's own spiritual and cultural beliefs or sexual orientation. It includes preventing the adult from using services that would otherwise support them and enhance their lives. It included the intentional or unintentional withholding of information, for example, information not being available in different formats/languages or dress, diet, language or specific religious observations relating to the adult's background or culture.

Indicators:

- Untypical ambivalence, deference, resignation, becoming passive
- Person appears anxious or withdrawn, especially in the presence of the alleged perpetrator
Person exhibits low self esteem
- Person rejects their own cultural background and/or racial origin
- Untypical changes in behaviour, for example, continence problems, sleep disturbance, depression or fear
- Person is not allowed visitors or phone calls
- Person locked in a room/in their home
- Person is denied access to aids or equipment, for example, glasses, hearing aid, crutches
Person's access to personal hygiene and toilet is restricted
- Person's freedom of movement is restricted by use of furniture or other equipment
- Exposed to inappropriate stimuli
- Person feels isolated

Be aware that every other type of abuse will almost inevitably involve elements of psychological abuse. Signs of psychological abuse may be signs that other forms of abuse are taking place.

ALERTING

Everyone reading this document must regard himself or herself as an alerter. This means that all staff, volunteers and management committee or trustees in your organisation need to know what to do if they are alerted or someone raises a concern about abuse relating to somebody taking part in your project.

- Alerting or raising a concern about abuse means:
- Recognising signs of abuse/ongoing bad practice
- Responding to a disclosure
- Reporting a concern, allegation or disclosure
- Recording initial information
- Working strictly in accordance with antidiscriminatory practice

As an **alerter** you are required to log your concerns and report them to an appropriate person, for example your project manager, management committee, trustees etc. You are not being asked to verify or prove that the information you have been given is true. You must report any concerns, allegations or disclosures of abuse through the formal channels, no matter who is

accused of doing it. N.B. Only the police have the responsibility to establish if a criminal offence has been committed. Alerting through formal channels within and beyond your organisation will enable a proper assessment or investigation to be carried forward. If you raise a concern about an organisation or an individual and you are acting in good faith, you will be supported whatever the outcome of the investigation. **You will not be criticised for following procedure.**

Failure to report a concern, allegation or disclosure will be viewed extremely seriously and may result in any or all of the following:

- Criticism of your practice
- Disciplinary action
- Suspension
- Dismissal
- A report being forwarded to your professional body

Any such failure will be seen as colluding with the abuse.