



Adult Support and Protection Policy

Director Responsible

Director of Adult Services

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DOCUMENT HISTORY

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CONSULTATION AND RATIFICATION SCHEDULE

Name of Consultative Body	Date of Approval
Senior Management Team	31.01.2019

CROSS REFERENCE TO OTHER POLICIES/STRATEGIES

This policy should be read in conjunction with:	Detail
Policy 2	Guidance & Policy Administration of Medication
Policy 4	Disclosure/PVG Policy
Policy 21	SSSC Registration Policy
Policy 23	Recruitment and Selection Policy
Policy 24	Duty of Candour Policy
Policy 28	Accident and Incident Reporting Policy

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1. INTRODUCTION

Primecare Health LTD is committed to developing and sustaining the wellbeing and safety of individuals within their care. It takes very seriously its responsibility to promote safe practice to protect vulnerable adults from harm and neglect. This policy and guidance is compliant with Primecare's policies and procedures, relevant legislation relating to the care and protection of vulnerable adults (i.e. Adult Support and Protection Act 2007) and the company's core underpinning values.

This Policy statement and guidelines applies to all service users and other adults within the organisation and all managers are responsible for ensuring the guidance is fully and effectively implemented within their areas.

The nature of ageing and dementia makes service users particularly vulnerable and therefore increases the need for protection, as well as the right to dignity, privacy, confidentiality and safety. These principles form the basis of our practice in our everyday work as well as in areas such as:

- intimate care
- use of physical intervention
- restrictive practice
- management of self-harm
- the way we speak to service users
- recording information
- sexuality
- religious persuasion
- race
- cultural and linguistic background

This Policy Statement and Guidelines details how Primecare seeks to ensure the well-being of its service users and the steps that will be taken whenever care and protection concerns arise.

For the purposes of this policy, Adults are defined as individuals over the age of 16 years.

When considering the care and protection needs of service users, the organisation recognises the tensions that can result when working to support an individual's right to self-determination and personal choice balanced with their right to be protected from abusive and exploitative relationships. However, the first priority of all workers should always be to ensure the safety and protection of all service users.

All employees must work within the company's policies and procedures as well as in accordance with inter-agency guidelines in terms of assessment, case management, recording and sharing of information. The company will work with all relevant agencies to ensure that the welfare of the service user is paramount and that clear lines of communication and joint working are practiced.

All staff have a professional responsibility to report behaviour of families/welfare attorneys/carers, other service users and staff where there is a concern that such behaviour is harmful or puts a service user at risk of harm.

All managers have a responsibility to exercise clear decision making in accordance with the organisations Adult Protection procedures as well as ensuring host/local authority Adult Protection processes are followed.

It will be the responsibility of the Registered Manager, as lead Adult Protection Officer, to ensure each sector within the organisation has a copy and adheres to the relevant local authority interagency guidelines for adult protection.

Underpinning Legislation and Guidelines for reference:

- SSSC Codes of Practice
- Adult Support and Protection Act (2007)
- Adults with Incapacity (Scotland Act 2000)
- Public Service Reform (Scotland) Act 2010
- Primecare's Grievance, Disciplinary and Whistle-blowing / Raising Concerns at Work Procedures
- General Data Protection Regulation 2018
- Freedom of Information Act 2000

2. ADULT SUPPORT AND PROTECTION POLICY STATEMENT

Primecare Health LTD will:

- Ensure that all staff understand their moral and contractual obligations to protect service users from harm or the risk of harm.
- Ensure that all staff understand their responsibility to work to the standards and procedures detailed in the organisation's policies and procedures relating to the care and protection of service users.
- Staff will ensure they are appropriately registered with SSSC and adhere to Codes of Practice
- Ensure that all policies and procedures are fairly and consistently implemented.
- Robustly follow Safer Recruitment Guidance from Care Inspectorate.
- Ensure that all staff understand their obligations to report care or protection concerns about a service user (or a staff member's conduct towards a service user) to a supervisor/manager, who will have responsibility for reporting adult protection concerns.
- Ensure that all supervisors/managers understand their roles and responsibilities and receive appropriate training.
- Ensure that all staff/managers understand their obligation to refer adult protection concerns to the external protection agencies (i.e. Police and/or Social Work), including an immediate referral to Police Scotland (prior to other notifications) if managers/staff believe a criminal act has occurred.
- Provide opportunities for all staff to develop their skills and knowledge in relation to the care and protection of service users.
- Ensure that service users are appropriately and sensitively supported to express their ideas, views and concerns on a wide range of issues, including protection issues.
- Ensure appropriate support is provided to any service user who discloses harm.
- Ensure that the carers of service users are fully aware of their rights to express any concerns they may have about care and protection issues relating to their relatives.
- Keep up-to-date with national developments relating to the care and protection of vulnerable adults.
- Provide all new staff with Adult Protection Training. Staff working directly with vulnerable adults will receive this training within three weeks of commencing employment. Training will include information on signs and indicators of harm as well as the process to follow where there is a concern that a service user is being harmed or is at risk of harm.

- Ensure annual refresher Protection Training is delivered to all staff.

3. HARM

3.1 How Harm Can Be Identified

All staff should understand that harm may be identified in a number of ways:

- Staff raising concerns
- The recognition of particular signs and indicators
- A direct allegation of harm made by a service user
- A report from a third party relating to the care and protection needs of a service user.

4. ALLEGATIONS AND REPORTING HARM

4.1 Dealing with a Direct Allegation of Harm by a Service User

When allegations are raised by a service user, staff should be mindful of their responsibility to adhere to the following guidance:

When concerned that a service user is being harmed or is at risk of harm, workers should take the following steps:

- Immediately ensure the safety of the service user.**
- Listen attentively** to what the service user is telling you -staff should try not to interrupt, distract the service user and/or put words into their mouths. Staff should ensure they do not ask leading questions/conduct an interview with the service user and be clear that they are listening and only recording the information from the service user.
- Ensure the service user has appropriate communication aids** - such as hearing aids or non-verbal aids to give them opportunities to disclose.
- Be aware of non-verbal communication** which includes being aware of facial expressions and how concern/interest is shown. Staff should not sit in a way that threatens or stand over the service user.
- Do not promise confidentiality** - staff should not agree to keep secret any information which implies that the individual could be at risk of harm. It should be explained that while every effort will be made to respect a desire for confidentiality, if there is cause for concern, it will be necessary to pass this information on.
- Affirm the individual's feelings** – staff should show empathy in an appropriate manner and reassure that the service user has done the right thing in 'telling'.
- Treat the allegation very seriously** – staff should report it immediately, ensuring the relevant designated manager for adult protection is aware and can report to external authorities.
- Record what has been said / observed as soon as possible** – using Incident Recording Form and send to the designated manager (Operation Manager) for adult protection.
- Where concerns are raised regarding potential harm from carers** - communication and action will be determined by Social Work and/or Police. In these circumstances Managers and staff should not disclose events to carers and await further guidance from Social Work and Police.
- Where concerns are raised not concerning carers** – staff should ensure carers are made aware of events immediately.

- k) **Ask for support** – staff should be offered support whenever they have had to respond to adult protection concerns.

On receiving a report of an allegation of harm, the worker should expect to receive assurances from the management team that appropriate adult protection procedures will be implemented immediately. When a staff member is not satisfied with the management's response to their concern, the staff member should discuss this with them. If concerns remain, the staff member has every right to make their own report to the adult protection agencies and to discuss this action and concern with the organisation's Senior Management Team.

4.2 Dealing with a Report of Harm and/or Neglect from a Third Party

If concerns about the care and protection needs of a service user are raised by a third party, it is essential to ensure the service users wellbeing in the first instance. All communication regarding the concern should be dealt with sensitively.

The staff member who receives the report should explain that the concerns will be dealt with according to the organisation's adult protection procedures.

If a third party decides to withdraw their concerns at this point, they should be informed that where the information has indicated that a service user is being harmed or is at risk of harm, the information will have to be passed on to Police and Social Work.

4.3 Steps to be taken when an Allegation / Concern of Harm or Risk of Harm is Reported which DOES NOT implicate a Worker

Allegations of harm which DO NOT implicate staff from within the organisation must be reported immediately to a manager. The line manager will notify the Registered Manager who will follow the procedure.

4.4 Steps to be taken when an Allegation / Concern of Harm or Risk of Harm is Reported which MAY implicate a Worker

Allegations of harm which may implicate staff from within the organisation, must be reported immediately to the Directors who will follow the procedure. The directors will take further steps in line with policies and procedures whenever a concern arises (including a care and protection concern) about staff's conduct towards a service user. The Director will also notify the Care Inspectorate and the SSSC where a member of staff is subject to an investigation.

4.5 Managing Allegations made against a Service User by their Peers

Primecare Health LTD recognises that harm can take place between service users i.e. peer to peer (shared accommodation, supporting leaving setting). Wherever a member of staff suspects this type of harm may be happening they should report their concerns to a manager who will report to the Directors.

When harm is believed to be perpetrated by a service user it is important to ensure assumptions are not made that somehow it is less distressing or harmful to a service user if the perpetrator is another service user. The Directors will refer concerns to Social Work and Police and will work closely with all partners to ensure the safety and wellbeing of all service users.

4.6 Allegations made against Employees of Primecare Health LTD

Any suspicion or complaint that a staff member has been involved in harming a service user or has put them at risk of harm, must be reported immediately to the Operation Manager who will report to the Directors.

Directors and Operation Manager will review all information submitted and take appropriate action to ensure the safety and wellbeing and service users. This may include the suspension of the member of staff to allow for full investigation into matters.

The member of staff will be fully informed regarding the actions taken by Primecare and given access to appropriate support through HR Department.

5. PROTOCOL FOR MANAGING BRUISING TO SERVICE USERS BODIES

Primecare Health LTD takes seriously its duty of care to service users therefore all incidents of bruising should be reported to a manager and will be investigated in accordance with the procedure of this policy.

It is important that staff are vigilant when supporting service users and record details of any accidents/incidents/ daily living occurrences that could cause them bruising. It is however acknowledged that many service users enjoy time alone therefore it is not always possible to observe situations that could lead to bruising and/or injury. This also applies to service users that manage their own personal care, in such circumstances staff may not notice bruising on a service user's body.

6. CONFIDENTIALITY & RECORD KEEPING

Personal information about service users and their families held by professionals and agencies is subject to a legal duty of confidence and should not normally be disclosed without the consent of the persons concerned.

Confidentiality is not an option where there is concern that a service user is being harmed or is at risk of harm.

All staff are expected to adhere to Primecare's SSSC Policy and SSSC codes of practice to ensure service users welfare. Information about harm or risk of harm may be offered in confidence but the recipient cannot keep such information to him or herself.

All records relating to adult protection concerns will be managed by the Operation Manager in a way which conforms to the requirements of the General Data Protection Regulation 2018. Primecare Health LTD Confidentiality Policy provides further guidance on this issue.

7. AVAILABILITY AND ACCESSIBILITY OF POLICY & PROCEDURES

All staff will be made aware of how to access a copy of the policy. Copies of the policy will be made available to all service users on request. The organisation will also take all reasonable steps to make this guidance accessible in alternative formats where this is request by service users.

8. POLICY REVIEW STATEMENT

This policy will be reviewed every three years or earlier if required due to legislative updates.