Overcoming Multiple Sclerosis (OMS)

Safeguarding Adults Policy
Introduction

Overcoming MS charity (OMS) will engage directly with people with MS (PwMS) through a range of events, including Retreats. Retreats are events taking place at an external venue, designed to engage with a small group of PwMS and guide them through the 7-step recovery programme and its individual components, over a period of a few days (usually 5).

We will also interact with PwMS and their families on a regular basis upon joining the OMS community, both face to face during meetings and events as well as online via digital platforms and social media. OMS is committed to safeguarding and promoting the welfare of everyone who reaches out for information and support. We believe that individuals should be able to live a life free from abuse and neglect regardless of gender, ethnicity, disability, sexuality or beliefs and have their rights and choice respected. We expect that all staff and volunteers will share this commitment.

Abuse may occur in all races, cultures and social circumstances. It is important to consider that someone who abuses an individual could be a member of their immediate or extended family, a friend, a neighbour or stranger to them, a member of staff or another member of the OMS community. Abuse can happen anywhere, for example, in hospital, in someone’s own home, in college, in a public place or online. It can take place when an adult lives alone or with others.

It is therefore essential to remain alert to the possibility that abuse ‘can happen here’ and consequently staff are required to adopt an approach that is professional, open minded and that respectfully challenges others in order to facilitate this.

1. Purpose

The aim of this policy is to provide a clear framework for how we promote individuals’ wellbeing, prevent harm and reduce the risk of abuse or neglect in our interactions with them. It ensures that concerns are handled sensitively, professionally and in ways that support the needs of the individual. It provides clear direction to staff and others about their duty of care to all individuals, and how to act accordingly.

For the purpose of this document, OMS employees, Trustees and volunteers will be known under the general term ‘staff’.

2. Roles and responsibilities

All staff and volunteers have a duty to intervene to stop harm and to report concerns about the safety of an adult at risk – SAFEGUARDING IS EVERYONE’S BUSINESS.

It is the expectation that all staff, regardless of their position, and volunteers have access to OMS Safeguarding policy and procedures and will familiarise themselves with the content and comply with these at all times.
3. Legal Framework
The Care Act 2014
Health and Social Care Act 2008
Mental Capacity Act and Code of Practice 2005
Safeguarding Vulnerable Groups Act 2006
Human Rights Act 1998
Equality Act 2010
Protection of Freedoms Act 2012

4. Recognising adult abuse and neglect

It is not always easy to recognise when an adult is being abused and/or neglected and often there will be other explanations for the signs you may see and interpret as indicators of abuse. However, abuse and neglect can cause significant harm and therefore any concerns must be raised as soon as possible.

Incidents of abuse may be one-off or multiple, and affect one person or more. Professionals and others should look beyond single incidents or individuals to identify patterns of harm. In order to see these patterns it is important that information is recorded and appropriately shared.

4.1 Definition – Safeguarding

The Care Act (2014) defines Safeguarding as:

‘Safeguarding means protecting an adult’s right to live in safety, free from abuse and neglect. Safeguarding involves people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult’s wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action.

4.2 Definition - Adult at Risk

This is defined in the Care Act (2014) as a person who is 18 years or older and who meets the following criteria:

- has needs for care and support (whether or not the local authority is meeting any of those needs),
- is experiencing, or at risk of, abuse or neglect, and
- as a result of their care and support needs, the adult is unable to protect him or herself from either the risk of, or the experience of abuse
4.3 Key principles

The following six principles underpin all adult safeguarding work and should inform our work with adults:

- **Empowerment** - people being supported and encouraged to make their own decisions and informed choices
- **Prevention** - it is better to take action before harm occurs
- **Proportionality** - the least intrusive response appropriate to the risk presented
- **Protection** - support and representation for those in greatest need
- **Partnership** - local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse
- **Accountability** - accountability and transparency in safeguarding practice.

4.4 PREVENT

Prevent is a key part of the Government’s Counter Terrorist Strategy, CONTEST. It is the preventative strand of the strategy and its aim is to stop people becoming terrorists or supporting terrorism. It is well documented that more vulnerable people can be at greater risk of being radicalised. Indicators for vulnerability to radicalisation include:

- Family tensions
- Sense of isolation
- Migration
- Distance from cultural heritage
- Experience of racism or discrimination
- Feeling of failure

4.5 Types of Abuse

The Care Act outlines the different types and patterns of abuse and neglect, and the different circumstances in which they may take place. The Care and Support statutory guidance identifies the following main types of abuse, however this list is not exhaustive and you must always report your concerns.

**Physical Abuse**

This may be defined as ‘non-accidental infliction of physical force that results in bodily injury, pain or impairment. Examples include assault, hitting, slapping and pushing, restraint or inappropriate physical sanctions.

Signs that indicate physical abuse may have taken place include:
• bruises, broken bones, open wounds and black eyes
• any injury for which there is no adequate explanation
• burns of any shape or size
• incorrect administration of medication
• weight loss
• injuries which are untreated or inadequately treated

Psychological Abuse

Can include emotional abuse, threats of harm or abandonment, deprivation of contact with others, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber-bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.

Signs that indicate psychological abuse may have taken place:

• Sudden changes in behaviour such as anger, aggressiveness, confusion, agitation, fear or helplessness
• High levels of anxiety, withdrawal or unhappiness

Financial or material abuse

Can include theft, fraud, internet scamming, coercion in relation to an adult’s financial affairs or arrangements, including in connections with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

Signs that indicate financial or material abuse may have taken place:

• Change in living conditions
• Lack of heating, clothing or food
• Inability to pay bills/unexplained shortage of money
• Unexplained withdrawals from an account
• Unexplained loss/misplacement of financial documents
• The recent addition of authorised signers on a clients or donors signature care
• Sudden or unexpected changes in a will or other financial documents

Sexual Abuse

Direct or indirect involvement in sexual activity without valid consent (this can include when an adult has not or cannot consent, or was pressured into consenting). Can include rape,
indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts.

**Discriminatory Abuse**

This can occur when values, beliefs or culture results in a misuse of power that denies opportunity to some groups or individuals. Includes forms of harassment, slurs or similar treatment because of race, gender identity, age, disability, sexual orientation or religion.

Signs that indicate discriminatory abuse may have taken place include:

- Unequal treatment
- Inappropriate use of language
- Harassment
- Deliberate exclusion
- Verbal abuse

**Neglect and acts of omission**

Includes ignoring medical, 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.

Signs that indicate neglect and acts of omission may have taken place include:

- Weight loss
- Inadequate clothing which may be dirty or damaged and offers no protection from the weather
- Condition of home is squalid, unhygienic or dangerous
- Constantly tired or lacking in energy
- Incorrect administration of medication

**Self-neglect**

This is the inability (intentional or non-intentional) to maintain a socially and culturally acceptable standard of self-care with the potential for serious consequences to the health and well-being of the individual and potentially to their community.

Signs that indicate self-neglect may have taken place include:

- Poor personal hygiene
- Unkempt appearance
- Malnutrition and/or dehydration
- Hoarding
- Inability or unwillingness to take medication or treat illness or injury

Organisational Abuse

This occurs when an organisation’s systems and processes, and/or management of these, fails to safeguard a number of adults leaving them at risk of, or causing them harm.

Signs that indicate organisational abuse may have taken place include:
- Inappropriate use of rules
- Lack of flexibility and choice for people accessing a service

Domestic Abuse

This is any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass but is not limited to, the following types of abuse: psychological, physical, sexual, financial, and emotional. Includes so called ‘honour’ based violence, female genital mutilation and forced marriage.

Modern Slavery

Includes exploitation in the sex industry, forced labour, domestic servitude in the home and forced criminal activity. These types of crime are often called human trafficking.

Hate crime

This is defined as any crime that is perceived by the victim, or any other person, to be racist, homophobic, transphobic or due to a person’s religion, belief, gender identify or disability.

Mate crime

This happens when someone is faking a friendship in order to take advantage of a vulnerable person. A ‘mate’ maybe a friend, family member, supporter, paid staff or another person with a disability.

5. Confidentiality and information sharing

When there are concerns raised about an individual’s welfare, OMS may need to share information and work in partnership with other agencies. A disclosure from an adult about a concern or allegation must not be discussed with another member of staff unless specifically needed for liaison and safeguarding purposes, and under the direction of the CEO/Safeguarding Lead.

Sensitive information about an adult at risk does sometimes need to be shared both inside and outside the organisation. This may include an individual's Social Worker or local authority. The purpose of this will always be to safeguard the individual from harm and to meet statutory requirements.
6. Consent and capacity

Adults have a legal right to make decisions about their own lives. If the adult is not the person raising the safeguarding concern, wherever possible every effort should be made to seek their views and agreement regarding this. At the earliest opportunity establish their views including:

- Whether they see the issue as a cause for concern or not
- What they want to happen, if anything, including any actions they might want taken or may want to take themselves or not take: if the adult agrees that a safeguarding concern should be raised, what they want to be achieved from this and if they do not agree the reasons for this.

However, there are 3 main factors which may affect an adult's right to control the decision regarding whether a safeguarding concern is shared with the local authority and other appropriate agencies, or not:

- The adult lacks capacity to give consent
- Irrespective of whether the adult has capacity to give consent, action may need to be taken if others (children or adults) are, or may be at risk of abuse or neglect
- Where it is in the public interest to take action because a criminal offence has occurred

Where an adult with capacity to make an informed decision about their own safety does not want any action taken, this does not override a professional’s responsibility to raise a safeguarding concern and to share key information with relevant professionals in the circumstances outlined above.

7. Working with parents/families

In our activities we will work in partnership with the parents/families of members of the OMS community. Information sharing with parents/families will be impacted upon by the requests and views of the person. Where the person has the capacity to decide that they do not want their parents/families informed about a concern, OMS will respect this choice, unless there are clear reasons why this cannot be upheld.

8. Procedure for reporting adult abuse concerns

A concern may arise by:

- A direct disclosure by the adult
- A concern raised by staff or volunteers, members of the OMS community, a care-giver or a member of the public
- An observation of the behaviour of the adult, of the behaviour of another person(s) towards the adult at risk or of one adult towards another
8.1 Initial Reporting

The designated safeguarding lead at OMS is the CEO, Ms Grazina Berry.

After ensuring the individual is safe from any immediate harm (and intervening where necessary and possible to stop further harm), you must:

- Immediately inform the CEO of any concerns
- Report the incident detailing what you have been told or witnessed ensuring as much detail as possible is included.

If the allegation concerns the CEO/Designated Safeguarding Lead contact a Trustee or Chair of the Board.

The CEO/Safeguarding Lead will:

- Gather the initial facts to inform decision making
- Ensure that measures are in place to minimise any further ‘potential’ risk
- Consider whether to suspend an employee if an allegation is made about them
- Discuss with the individual, seeking their consent as required and identify the desired outcome

If there remains an adult abuse concern refer the matter to the Local Safeguarding Adults Team.

8.2 Immediate action to safeguard adults

If there is a possibility that an adult may be in immediate danger or if there is evidence that a criminal offence has been committed you must act without delay. Contact the police, dial 999 for emergencies or 101 for non-emergencies.

8.3 Notification about concern

The CEO/ Safeguarding Lead will:

- Inform key stakeholders such as social workers where relevant
- Inform the Chair of OMS Board
- Inform parents/families as required

8.4 Investigation

OMS will be unable to commence any internal investigations (under the Disciplinary Policy for example) until given approval to do so by external colleagues from the relevant Local Authority services and/or the police.
An internal investigation will always take place after an external investigation so that OMS can determine whether any internal actions are required (such as under the Disciplinary policy) or whether any changes need to be made.

OMS Trustees will need to consider whether serious incidents meet the reporting criteria as defined by Charity Commission and notify as required.

8.5 Action following conclusion of investigation

The CEO/ Safeguarding Lead must:

- Inform all relevant parties of the outcome as applicable
- Ensure that any action required arising out of the investigation is carried out within the identified timescales.

9. Support

OMS recognise that dealing with concerns regarding abuse is difficult for all parties involved.

Members of the OMS community who may experience abuse will be supported by OMS if appropriate or signposted towards the most appropriate support.

Staff and volunteers have individual supervision sessions with a line manager where they will be offered support and have the opportunity to discuss any safeguarding concerns they may have.

10. Recruitment

All offers of employment at OMS are subject to satisfactory references, confirmation that the person is fit to work and the required level of Disclosure. Each position is subject to a probation period.

11. Training

All staff (incl. Trustees, volunteers etc.) are required to familiarise themselves with OMS Safeguarding Policy.

12. Whistleblowing

OMS have a whistleblowing policy which all staff should be made aware of. The policy is provided to reassure staff that it is safe and acceptable to speak up and raise any concern about malpractice/wrongdoing at an early stage and in the right way in line with the Public Interest Disclosure Act 1998.

13. Review

All adult abuse concerns will be recorded on OMS database and signed off by the CEO.

All abuse concerns will be reported to OMS Board of Trustees.
OMS Safeguarding Policy will be reviewed on an annual basis or as required due to legislation change.


- Equality, Diversity and Inclusion Policy
- Disciplinary Policy and Procedures
- Whistleblowing Policy and Procedures
- Health and Safety Policy