



## Sussex MS Centre Safeguarding Adults Policy

### Introduction

Sussex MS Centre has a duty of care to all members, staff, freelance staff (referred to as staff hereafter) and volunteers to ensure they have a safe and healthy environment in which to work and visit the Centre. We have a responsibility to safeguard adults at risk to prevent abuse, when possible, and to respond quickly and appropriately to suspicions or allegations of abuse. Creating a safe environment that promotes well-being and security, benefits all members, staff and volunteers.

### Purpose

The aim of this policy is to ensure that Sussex MS Centre meets its responsibilities to ensure the safety of adults at risk. The policy establishes practices and procedures to minimise risk of abuse, sets out clear responsibilities and procedures to raise awareness, and ensures a clear framework for quick and appropriate response when abuse is suspected.

### Responsibilities

This policy applies to all contact between staff, volunteers and members. It also outlines procedures when staff suspect abuse of an individual outside their involvement with Sussex MS Centre. All staff at Sussex MS Centre have a responsibility in relation to safeguarding, in promoting the welfare of adults at risk for ensuring that they are protected from harm and to follow the Centre's policies and procedures.

Emily-Jane Stuttard (EJ), the Centre Manager, is the Safeguarding Officer and Rebekah Walker our Operations and Community Fundraiser deputises for her in the case of her absence. Together they have an institutional responsibility to ensure a safe and healthy environment for work and Centre activities and services.

**Both EJ and Rebekah can be contacted on 01273-594484.**

Virginia Keefe is the designated trustee member with responsibility for Safeguarding. The Safeguarding Trustee is responsible for liaising with the Centre Manager over matters regarding safeguarding vulnerable adults ensuring that:

- Trustees consider Sussex MS Centre's policy on Safeguarding annually if changes in the law have taken place
- Each year the trustees are informed of what safeguarding training, Sussex MS Centre's staff have undertaken that year

This policy will be communicated to all members via the Policy file at reception and our website.

The Centre has a Safeguarding Flowchart displayed in the Centre which clearly describes how to handle reporting abuse/neglect or concern.

### Definitions

**Definition of a vulnerable adult:** this term has been replaced with the term 'adult at risk'. An adult at risk is a person who:

- has care and support needs and
- is experiencing, or is at risk of, abuse or neglect and
- is unable to protect themselves because of their care and support needs

**Definition of Safeguarding:** Safeguarding is a term we use to describe how we protect adults and children from abuse or neglect. It is an important shared priority of many public services, and a key responsibility of local authorities. Safeguarding is about protecting certain people who may be in vulnerable circumstances. These people may be at risk of abuse or neglect due to the actions (or lack of action) of another person. In these cases, it is vital that public services work together to identify people at risk and put steps in place to help prevent abuse or neglect.

**Making Safeguarding Personal (MSP)** is a national approach now taken to all safeguarding work. The key principle of MSP is to support and empower each adult to make choices and have control about how they want to live their own life.

MSP focuses on achieving meaningful improvements to people's lives to prevent abuse and neglect occurring in the future, including ways for them to protect themselves. People are individuals with a variety of different preferences, histories, circumstances and lifestyles so safeguarding arrangements should not prescribe a process that must be followed whenever a concern is raised but instead take a more personalised approach.

**The six principles at the heart of Making Safeguarding Personal (MSP) are:**

- **Empowerment** – People being supported and encouraged to make their own decisions and give informed consent
- **Prevention** – It is better to take action before harm occurs
- **Proportionality** – the least intrusive response appropriate to the risk presented; making sure what we do is appropriate to the situation and for the individual involved
- **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 delivering safeguarding

**An adult at risk who has care and support needs may be:**

- an older person
- a person with a physical disability, a learning difficulty, or a sensory impairment
- someone with mental health needs, including dementia or a personality disorder
- a person with a long-term health condition (such as MS in the case of the Centre)
- someone who misuses substances or alcohol to the extent that it affects their ability to manage day-to-day living.

This is not an exhaustive list. In its definition of who should receive a safeguarding response, the legislation also includes people who are victims of sexual exploitation, domestic abuse, and modern slavery. These are all largely criminal matters, however, and safeguarding duties would not be an alternative to police involvement and would only be applicable at all where a person has care and support needs that mean that they are not able to protect themselves.

**People who have care needs are not automatically vulnerable, but they may come to be at risk of abuse or neglect at any point due to other factors, including:**

- physical or mental ill-health
- becoming disabled
- growing older
- not having support networks in place
- inappropriate accommodation
- financial circumstances or
- being socially isolated

It is important to remember that a person is not inevitably 'at risk' just because of their age, frailty, or disability. For example, a person with a disability who has mental capacity to make decisions about their own safety could be

perfectly able to make informed choices and protect themselves from harm. The vulnerability of the person is related to how able they are to make and exercise their own informed choices free from duress, pressure, or undue influence of any sort, and to protect themselves from abuse, neglect, and exploitation. Note however, that people with capacity can also be at risk of abuse or exploitation. A person's vulnerability is determined by a range of interconnected factors including those associated with their personal characteristics, their situation, environment, and social circumstances.

### What is the risk?

This policy is formulated in recognition that abuse of vulnerable adults may be widespread, but frequently unrecognised in our society. Abuse can take place in any situation. Perpetration of abuse may be by someone in a position of trust, power or authority that uses his or her position to the detriment of the health, safety, or welfare and general well-being of an adult at risk. The person alleged to have caused harm may be a relative, friend or family member, or those charged with a voluntary or professional care role, another service user or a stranger. The prevention of abuse of adults at risk is a collective responsibility of all sections of society. Sussex MS Centre alongside all agencies, professionals, independent organisations, and voluntary groups in contact with adults at risk, hold a particular responsibility to ensure safe, effective services and to facilitate the prevention and early detection of abuse from whatever quarter, thus ensuring that appropriate protective action can be taken.

### What is abuse?

The characteristics of abuse can take a number of forms and cause individuals to suffer pain, fear and distress reaching well beyond the time of the actual incident(s). Individuals who have experienced abuse may be too afraid or embarrassed to raise any complaint. They may be reluctant to discuss their concerns with other people or unsure who to trust or approach with their worries. There may be some situations where they are unaware that they are being abused.

Abuse is a violation of an individual's human and civil rights by any other person or persons. It can take a number of forms:

- **Physical abuse** e.g. hitting, pushing, shaking, rough handling, scolding or burning, inappropriate restraint or neglect, misuse of medication, forcible feeding or withholding food, making someone purposefully uncomfortable (e.g. opening a window and removing blankets), inappropriate or unlawful use of restraint
- **Sexual abuse** e.g. involvement in any sexual activity against his/her will, exposure to pornography, voyeurism and exhibitionism
- **Psychological/emotional abuse** e.g. intimidation or humiliation, cyber bullying, preventing someone from meeting their religious and cultural needs enforced social isolation – preventing someone accessing services or social opportunities, cuckooing (the practice of taking over the home of a vulnerable person in order to establish a base for illegal drug dealing, typically as part of a county lines operation.)
- **Financial or material abuse** e.g. theft or exerting improper pressure to sign over money from pensions or savings etc
- **Modern slavery** - human trafficking; forced labour; domestic servitude; sexual exploitation; such as escort work; prostitution and pornography; debt bondage
- **Discriminatory abuse** - Unequal treatment based on age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex or sexual orientation (known as 'protected characteristics' under the Equality Act 2010)
- **Organisational or institutional abuse** e.g. failure to respond to identified needs or to respond to complaints
- **Neglect or acts of omission** e.g. problems and needs being ignored, ignoring or isolating the person, failure to respect privacy
- **Self-neglect** e.g. lack of self-care to an extent that it threatens personal health and safety, inability or unwillingness to manage one's personal affairs
- **Forced marriage** e.g. when someone is pressured into an arranged marriage or forced to marry someone they have not freely chosen. It can also happen if someone lacks the mental capacity to make their own choices.

- **Domestic violence or abuse e.g.** as an incident or pattern of incidents of controlling, coercive, threatening, degrading and violent behaviour, including sexual violence, in most cases by a partner or ex-partner, but also by a family member or carer.

### **Minimising the risk of abuse during involvement with Sussex MS Centre**

There are requirements to check staff and volunteers who fall under the definition of regulated activity to ensure they are not barred from working with adults at risk. In most cases this will combine an Enhanced DBS check and a check of barred lists

All staff who have direct regular unsupervised contact with members (including freelance therapists, drop-in class teachers, management staff) will be vetted by the Disclosure and Barring Service (DBS) as they are in 'regulated' activity. Volunteers who have one-to-one contact unsupervised contact with members will also be vetted under the Disclosure and Barring Service.

The Centre Manager has discretion to allow staff to start work pending the result of an Enhanced DBS check so long as other pre-employment checks (e.g. 2 satisfactory references, knowledge of prior work history and prior DBS checks) have been carried out and that arrangements are in place to ensure that no risk to adults could arise.

### **Concerns about abuse during involvement with Sussex MS Centre**

A member of staff, volunteer or member discovering an allegation or suspicion of abuse should report this to the Centre Manager. If the allegation or suspicion of abuse is discovered by a member then they should inform a member of staff who will then inform the Centre Manager. The member of staff or volunteer making the report should make a written record of the allegation or suspicion of abuse (using incident report template/incident log). If a volunteer is unable to create a report, then they should seek assistance from management. The Centre Manager will carry out an immediate risk assessment to identify short-term steps required to safeguard the member while an investigation is conducted. **At all times Staff and Volunteers should follow the Centre's Safeguarding flowchart to be found at the back of the reception book and in the operators training folder and displayed on in Centre.**

### **Information Sharing**

The Safeguarding Officer (s) will ensure that effective information sharing between organisations takes place to safeguard adults at risk of abuse, neglect, and exploitation. This could include statutory and independent sector organisations involved in all aspects of adults safeguarding.

### **Information will be shared within and between organisations in line with the principles set out below:**

- Individuals have a right to independence, choice and self-determination, including the right to be able to have control over information about themselves and to determine what information is shared. Even in situations where there is no legal requirement to obtain written consent before sharing information, it is good practice to do so if possible
- The person's wishes should always be considered, however, safeguarding adults at risk establishes a general principle that information about an incident of suspected or actual abuse can be reported more widely where appropriate
- Information given to an individual member of staff or volunteer belongs to Sussex MS Centre and not to the individual employee or volunteer. An individual employee or volunteer cannot give a personal assurance of confidentiality to an adult at risk
- Sussex MS Centre should obtain the adult's written consent to share information and should routinely explain what information may be shared with other people or organisations
- Difficulties in working within the principles of maintaining the confidentiality of an adult should not lead to a failure to take action to protect the adult from abuse or harm
- Confidentiality **must not be confused with secrecy**. That is, the need to protect the management interests of an organisation should not override the need to protect the adult
- Sussex MS Centre staff reporting concerns at work are entitled to protection under the Public Interest Disclosure Act 1998

Decisions about what information is shared, and with whom, will be taken on a case-by-case basis. Whether information is shared with or without the adult at risk's consent, the information shared should be:

1. necessary for the purpose for which it is being shared
2. shared only with those who have a need for it
3. be accurate and up to date
4. be shared in a timely fashion
5. be shared securely

All information must be treated in accordance with the Data Protection Act 1998 (see Sussex MS Centre Data Protection Statement). The Data Protection Act is not a barrier to sharing information but is in place to ensure that personal information is shared appropriately. Personal data will be held and used in accordance with the Data Protection Act and only shared with appropriate staff on a need-to-know basis.

If the staff member/volunteer/member has been told about the allegation of abuse in confidence, they should attempt to gain the consent of the member in question so that a referral may be made to another agency. However, the gaining of consent is not essential for information to be passed on. Consideration needs to be given to:

- The scale of the abuse
- The risk of harm to others
- The capacity of the member to understand the issues of abuse and consent

If there is any doubt about whether to report an issue then it should be reported.

The Safeguarding Officer (centre manager) may report or raise a concern through West Sussex Safeguarding Adults Board <https://www.westsussexsab.org.uk/raise-a-concern/>; Brighton and Hove Adult Social Care team <https://www.brighton-hove.gov.uk/adult-social-care/report-safeguarding-concern>; East Sussex Adult Social Care and Health, phone on 0345 60 80 191 or for Out of hours emergencies: phone 0345 60 80 191 and select option 2 for the Emergency Duty Service; Hampshire Adults Health and Care at <https://www.hants.gov.uk/socialcareandhealth/adultsocialcare/contact> or Surrey Adult Social Care and Support at <https://adultsocialcareportal.surreycc.gov.uk/web/portal/pages/safeprofref/#headPspfrGs>.

In emergency situations (e.g. where there is the risk or occurrence of physical injury, or the threat of extreme violence) the emergency services must be contacted. Where a crime is taking place, has just occurred, or is suspected, the police must be contacted immediately.

### **Concerns about abuse outside Sussex MS Centre**

If a member of staff or volunteer working with an individual member suspects the member may be subject to abuse in their lives outside of Sussex MS Centre, they should attempt to gain the consent of the member to make a referral to another appropriate agency. Such an agency may be Social Services, Citizens Advice Bureau, NHS or the Police.

In emergency situations (e.g. where there is the risk or occurrence of physical injury or the threat of extreme violence) the emergency services must be contacted. Where a crime is taking place, has just occurred, or is suspected, the police must be contacted immediately.

Staff members should discuss with the Centre Manager (if possible) before acting without a member's consent, except in emergency situations or where a crime is suspected.

### **Responding to reported incidents under Sussex MS Centre involvement**

The Centre Manager or Safeguarding Trustee will make an initial investigation of the reported incident. The investigating person may interview other staff, members or volunteers as needed, including contacting the member's carer (if applicable).

In all cases where there is a serious risk to the member the Centre Manager will agree with the Safeguarding Trustee, immediate steps to be taken to remove the risk and separate the member from the person accused of abuse. This may include suspension of an accused Sussex MS Centre staff member or volunteer or the temporary suspension of a member, without prejudice to the findings of the investigation. Following the investigation, if no evidence of abuse can be established the response may be no action.

Other action steps may include, for example:

- initiating disciplinary procedures of staff/freelance staff involved, potentially up to dismissal
- working with accused member/staff member/volunteer with an action plan to work together to safeguard the member and reach an equilibrium through this further training
- exclusion of a member/volunteer from the Centre

### Related Legislation

This policy is informed by, and adheres to the following legislation: Care Act 2014, Data Protection Act 1998; Equality Act 2010, General Data Protection Regulation (GDPR) Regulation (EU) 2016/679, Human Rights Act 1998; Mental Capacity Act 2005; NHS and Community Care Act 1990; Protection of Freedom Act 2012; Public Interest Disclosure Act 1998; Safeguarding Vulnerable Groups Act 2006; Sussex Safeguarding Adults Policy and Procedure (V5 June 2024) -

### Related Sussex MS Centre Policies

- Data Protection Statement
- Equality and Diversity Policy
- Complaints Policy
- Lettings Policy

### Review of Policy

Reviewed by	Date	Date Approved by Board of Trustees:	Next review date
Centre Manager	Created September 2019	23 September 2019	September 2020
Centre Manager	17 May 2021	24 May 2021	May 2022
Centre Manager	4 September 2023	25 September 2023	September 2024
Centre Manager	27 February 2025	24 March 2025	March 2027