



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive



National Safeguarding Office

Safeguarding Vulnerable Persons Awareness Programme

*Safeguarding Vulnerable Persons at Risk of
Abuse: National Policy & Procedures*

Seamus McCaul

National Training Materials

- These Slides and Materials have been provided and approved by National Safeguarding Office (HSE) for use on this training
- This Training is only to be delivered by facilitators who have undergone the relevant training as provided by the National Safeguarding Office.
- The slides and materials have been developed in conjunction with
 - Mr Colm Lehane – Clara Learning Limited
 - Ms Eileen McGlone – QE5



Housekeeping



Toilets



Fire Procedure



Smoking



**Mobile Phones /
Devices**



Breaks



**Finishing
Time**

Learning Aim & Objectives

Aim

The aim of this workshop is to increase participant's awareness and knowledge of abuse of Vulnerable Adults and ensure they are in a better position to recognise it and report concerns.

Objectives - By the end of this workshop participants will have:

- Discussed and defined 'abuse' in the context of vulnerable persons
- Examined the different types of abuse and indicators of each
- A better understanding of how to recognise when abuse may be taking place
- Explored the HSE procedure from '*Safeguarding Vulnerable Persons at Risk of Abuse: National Policy & Procedures*' and discussed their responsibilities therein.
- Considered the underlying principles within which all abuse responses should be framed
- A clear understanding of how and where to report concerns of abuse

Learning Principles

- We are here to learn
- Session should begin and end on time
- Good listening skills are helpful to enhance learning
- If we do not understand - we can ask
- There should be mutual respect for differing experiences and ideas – value difference
- Any challenging will be non aggressive
- Respect diversity

Confidentiality and its limitations

Safeguarding Policy & Key Practice Themes

Section 2

Policy Definitions

The HSE, Social Care Division, considers a **Vulnerable Person** as an adult who **may be restricted in capacity** to guard himself /herself against harm or exploitation or to report such harm or exploitation.

Restriction of capacity may arise as a result of **physical or intellectual impairment**. **Vulnerability to abuse** is influenced by both **context** and **individual circumstances**.

Policy Definitions

Pg 8 - Abuse may be defined as

“ any act, or failure to act , which results in a breach of a vulnerable person’s **human rights, civil liberties, physical and mental integrity, dignity or general well being**, whether intended or through negligence, including sexual relationships or financial transactions to which the person does not or cannot validly consent, or which are deliberately exploitative. Abuse may take a variety of forms.”

This definition excludes **self-neglect** which is an inability or unwillingness to provide for oneself. However, the HSE acknowledges that people may come into contact with individuals living in conditions of **extreme self-neglect**. To address this issue the HSE has developed a specific policy to manage such situations

Principles



Human Rights

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- ***“People are facilitated and encouraged to integrate into their communities. The centre is proactive in identifying and facilitating initiatives for participation in the wider community, developing friendships and involvement in local social, educational and professional networks.”***

The National Standards for Residential Services for Children and Adults with Disabilities (HIQA 2013)

- ***“Each resident has a lifestyle in the residential care setting that is consistent with his/her previous routines, expectations and preferences, and satisfies his/her social, cultural, language, religious and recreational interests and needs.”***

The National Quality Standards for Residential Care Settings for Older People in Ireland (HIQA 2009)

Human Rights

- Deprivation of the following rights may constitute abuse:
 - Liberty
 - Privacy
 - Respect and dignity
 - Freedom to choose
 - Opportunities to fulfil personal aspirations and realise potential in their daily lives
 - Opportunity to live safely without fear of abuse in any form
 - Respect for possessions

Person Centeredness

pg15

- Is the principle which places the person as an individual at the heart and centre of any exchange concerning the provision or delivery of a service.
- It's about supporting and enabling the realisation of the person's goals rather than a person fitting into what the services or system can offer.

Culture

It is important that service providers:

- Create and nurture an open culture where people can feel safe to raise concerns. NO TOLERANCE approach to any form of abuse
- Have in place a safeguarding policy statement.
- Have Policies and Procedures for;
 - The effective recruitment, vetting induction, management, support, supervision and training of all staff and volunteers that provide services to, or have direct contact with, vulnerable persons.
 - Recruitment/Vetting/Induction/Management/Support/Supervision & Training.
 - Intimate and Personal Care.
 - Safe Administration of Medication.
 - Management of service users money/property.
 - Behavioural Management. Control and Restraint.
 - Working alone.
 - Complaints.
 - Incident Reporting.
 - Confidentiality.
 - Bullying and Harassment.
 - Personal Development to include friendships and relationships, etc.

Advocacy

- Enable people to seek and received information, explore and understand their options, make their wishes and views known to others and make decisions for themselves.
- Support people to represent their own views, wishes and interests, especially when they find it difficult to express them.
- Ensure that peoples right's are respected by other.
- Ensure that peoples needs and wishes are given due consideration and acted upon.
- Enable people to be involved in decisions that would otherwise be make for them by others.

Confidentiality

- All vulnerable persons must be secure in the knowledge that all information about them is managed appropriately and that there is a clear understanding of confidentiality among all service personnel. This must be consistent with the HSE Record Management Policy.
- All information regarding concerns or allegations of abuse or assessments of abuse of a vulnerable person should be shared, on 'a need to know' basis in the interests of the vulnerable person, with the relevant statutory authorities and relevant professionals.
- No undertakings regarding secrecy can be given. Those working with vulnerable persons should make this clear to all parties involved. However, it is important to respect the wishes of the vulnerable person as much as is reasonably practical.

Empowerment

- To empower adults to make informed choices about their lives;
- To maximise their opportunities to participate in wider society;
- To keep themselves safe and free from harm and enabled to manage their own decisions in respect of exposure to risk.

Collaboration

- Interagency collaboration is an essential component to successful safeguarding.
- It can be undermined by a single service focus, poor information sharing, limited understanding of roles, different organisational priorities and poor involvement of key service providers in adult safeguarding meetings.

Definitions and Categories of Abuse

Section 3

Group Task

○ Task A

	Physical
Definition	Includes hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions.
Examples	Hitting, slapping, pushing, burning, inappropriate restraint of adult or confinement, use of excessive force in the delivery of personal care, dressing, bathing, inappropriate use of medication.
Indicators	Unexplained signs of physical injury – bruises, cuts, scratches, burns, sprains, fractures, dislocations, hair loss, missing teeth. Unexplained/long absences at regular placement. Service user appears frightened, avoids a particular person, demonstrates new atypical behaviour; asks not to be hurt.
	Sexual
Definition	Includes rape and sexual assault, or sexual acts to which the vulnerable person has not consented, or could not consent, or into which he or she was compelled to consent.
Examples	Intentional touching, fondling, molesting, sexual assault, rape. Inappropriate and sexually explicit conversations or remarks. Exposure of the sexual organs and any sexual act intentionally performed in the presence of a service user. Exposure to pornography or other sexually explicit and inappropriate material.
Indicators	Trauma to genitals, breast, rectum, mouth, injuries to face, neck, abdomen, thighs, buttocks, STDs and human bite marks. Service user demonstrates atypical behaviour patterns such as sleep disturbance, incontinence, aggression, changes to eating patterns, inappropriate or unusual sexual behaviour, anxiety attacks.

	Emotional/Psychological (including Bullying and Harassment)
Definition	Includes threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks.
Examples	Persistent criticism, sarcasm, humiliation, hostility, intimidation or blaming, shouting, cursing, invading someone's personal space. Unresponsiveness, not responding to calls for assistance or deliberately responding slowly to a call for assistance. Failure to show interest in, or provide opportunities for a person's emotional development or need for social interaction. Disrespect for social, racial, physical, religious, cultural, sexual or other differences. Unreasonable disciplinary measures / restraint. Outpacing – where information /choices are provided too fast for the vulnerable person to understand, putting them in a position to do things or make choices more rapidly than they can tolerate.
Indicators	Mood swings, incontinence, obvious deterioration in health, sleeplessness, feelings of helplessness / hopelessness, Extreme low self esteem, tearfulness, self abuse or self destructive behaviour. Challenging or extreme behaviours – anxious/ aggressive/ passive/withdrawn.

	Financial
Definition	Financial or material abuse includes theft, fraud, exploitation, pressure in connection with wills property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.
Examples	Misusing or stealing the person's property, possessions or benefits, mismanagement of bank accounts, cheating the service user, manipulating the service user for financial gain, putting pressure on the service user in relation to wills property, inheritance and financial transactions.
Indicators	No control over personal funds or bank accounts, misappropriation of money, valuables or property, no records or incomplete records of spending, discrepancies in the service users internal money book, forced changes to wills, not paying bills, refusal to spend money, insufficient monies to meet normal budget expenses, etc.

	Institutional
Definition	May occur within residential care and acute settings including nursing homes, acute hospitals and any other in-patient settings, and may involve poor standards of care, rigid routines and inadequate responses to complex needs.
Examples	Service users are treated collectively rather than as individuals. Service user's right to privacy and choice not respected. Staff talking about the service users personal or intimate details in a manner that does not respect a person's right to privacy.
Indicators	Lack of or poor quality staff supervision and management. High staff turnover. Lack of training of staff and volunteers. Poor staff morale. Poor record keeping. Poor communication with other service providers. Lack of personal possessions and clothing, being spoken to inappropriately, etc.

Neglect

Definition	Neglect and acts of omission include ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life such as medication, adequate nutrition and heating.
Examples	Withdrawing or not giving help that a vulnerable person needs so causing them to suffer e.g. malnourishment, untreated medical conditions, unclean physical appearance, improper administration of medication or other drugs, being left alone for long periods when the person requires supervision or assistance.
Indicators	Poor personal hygiene, dirty and dishevelled in appearance e.g. unkempt hair and nails. Poor state of clothing. non attendance at routine health appointments e.g. dental, optical, chiropody etc. socially isolated i.e. has no social relationships.

Discriminatory

Definition	Includes ageism, racism, sexism, that based on a person's disability, and other forms of harassment, slurs or similar treatment.
Examples	Shunned by individuals, family or society because of age, race or disability. Assumptions about a person's abilities or inabilities.
Indicators	Isolation from family or social networks

Policy aims:

- Promote **Zero Tolerance** of harm to all adults from abuse, exploitation or neglect;
- Influence the way society thinks about harm to adults
- Prevent and reduce the risk of harm to adults, while supporting peoples right to maintain control over their lives

Who might abuse?

- Familial abuse
- Professional abuse
- Peer abuse
- Stranger abuse

Personal Risk Factors

- Diminished social skills / judgement
- Diminished capacity
- Physical dependence
- Need for help with personal hygiene and intimate body care
- Lack of knowledge about how to defend against abuse.

Organisational Risk Factors



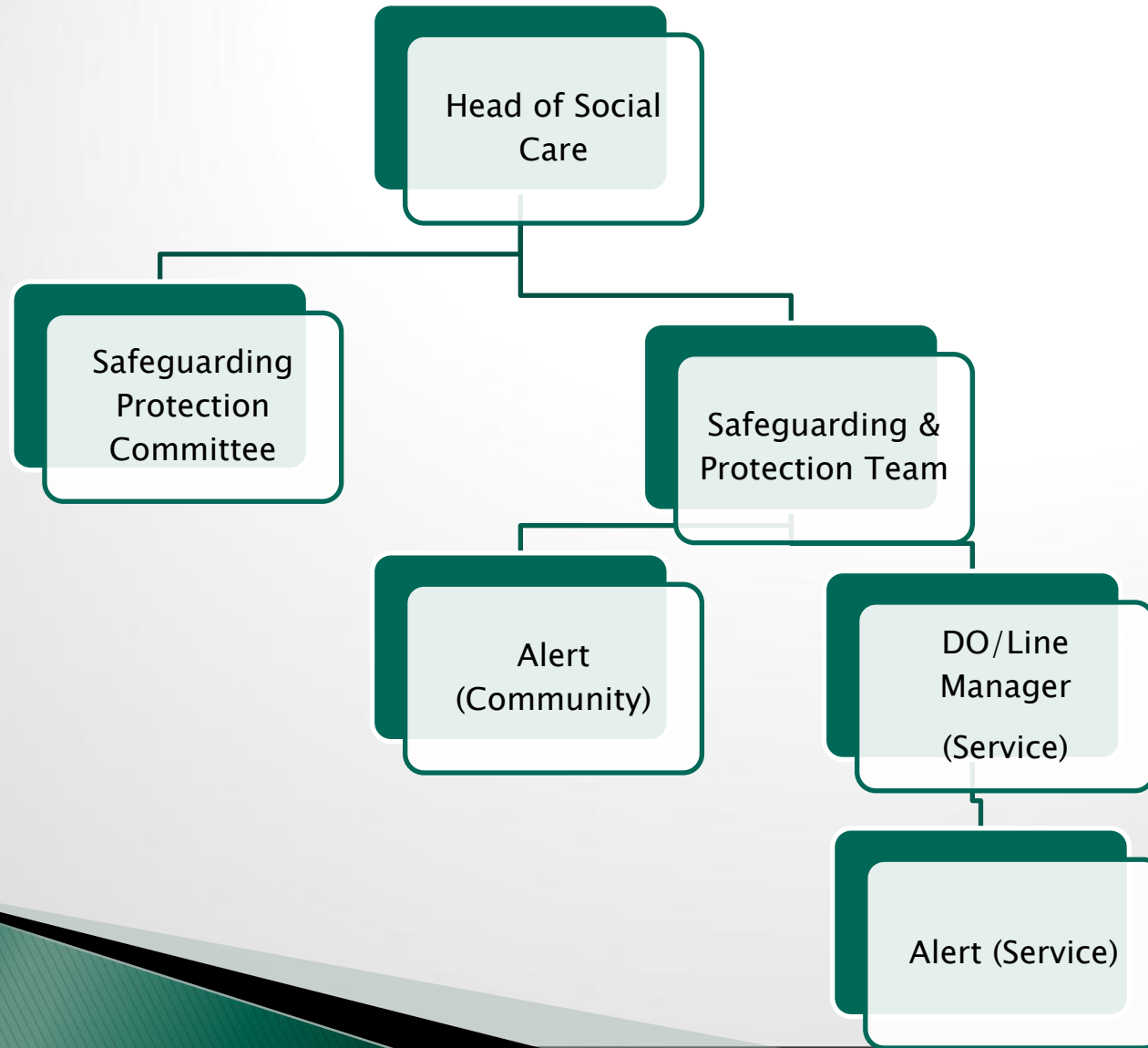
National Safeguarding Office

- Low staffing levels
- High staff turnover
- Lack of policy awareness
- Isolated services
- A neglected physical environment
- Weak / inappropriate management
- Staff competencies not matched to service requirements
- Staff not supported by training/ongoing professional development.

Safeguarding in Practice

Section 4

CHO Adult Safeguarding Infrastructure



Policy Requirements

- A key element of the Vulnerable Adult Safeguarding Policy is the nomination of a Designated Officer (DO) in a service setting.
- The nominated DO's should be senior people within the organisation, suitably trained, experienced and skilled to carry out the role.

Concerns come to light?

A concern regarding concerns or allegations of abuse of a vulnerable person may come to light in one of a number of ways:

- Direct observation of an incident of abuse.
- Disclosure by a vulnerable person.
- Disclosure by a relative/friend of the vulnerable person.
- Observation of signs or symptoms of abuse.
- Reported anonymously.
- Come to the attention as a complaint through the HSE or agency/organisation complaints process.

Responding to abuse

- Everyone working with vulnerable persons should understand that they have a responsibility for their protection.
- Everyone has a duty to report suspected, alleged or confirmed incidents of abuse – immediately.

Practice Guidance DO's

- DO stay calm
- DO listen
- DO reassure
- DO explain what you are going to do about it and that you will try to take steps to protect them.

Practice Guidance DO's

- DO be confident about your responsibilities
- DO ensure the safety of the person
- DO report without delay
- DO keep a record of what was said

Practice Guidance Don'ts

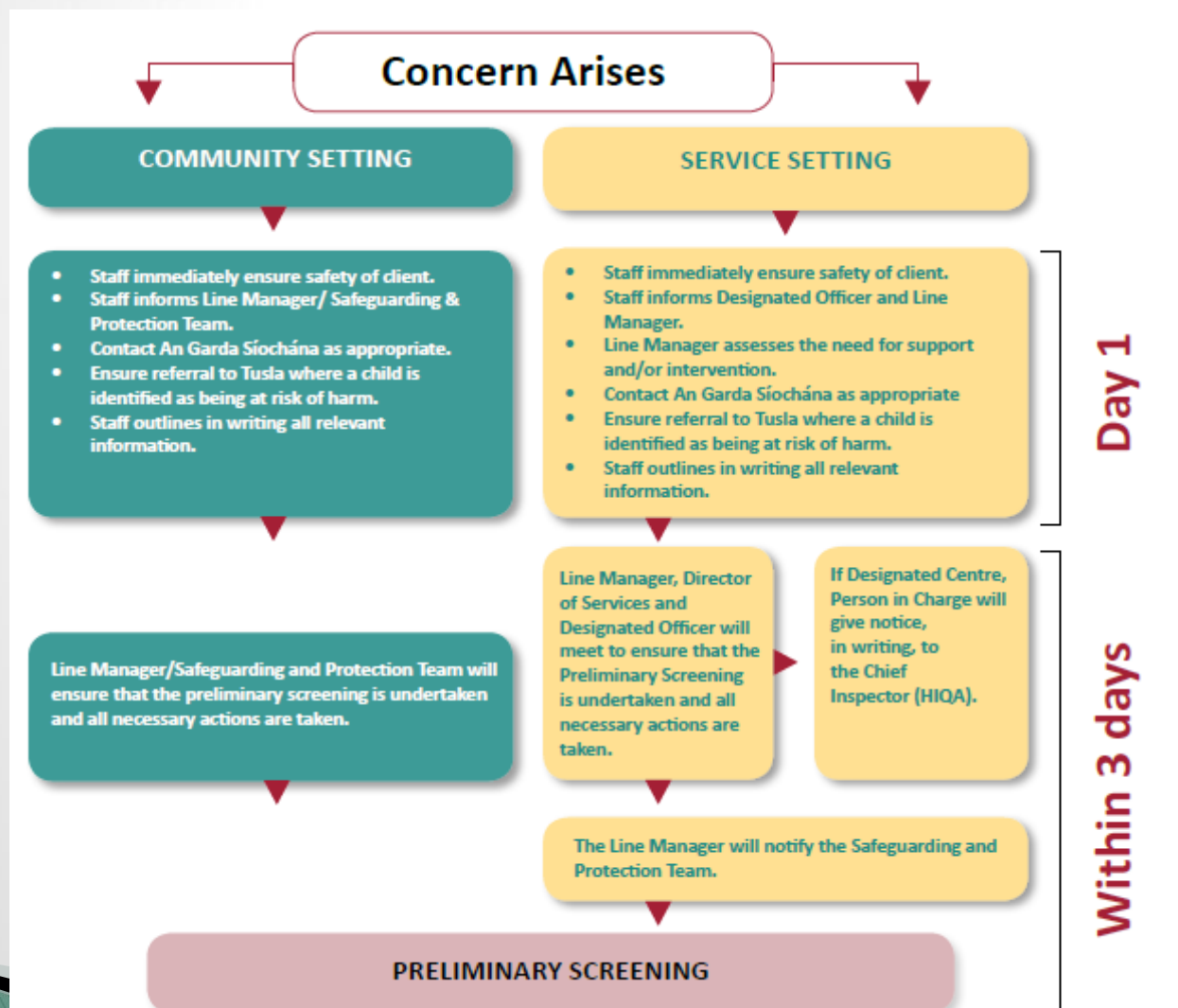
- DO NOT stop someone from disclosing to you
- DO NOT question the person for all the details – you may not need them at this point.
- DO NOT promise to keep it a secret or give sweeping reassurances
- DO NOT contact the alleged “abuser”

Practice Guidance Don'ts

- DO NOT be judgemental, appear shocked or display negative emotions
- DO NOT discuss with other people, apart from those you must inform
- DO NOT leave details of concern on voicemail or email
- DO NOT clean up or dispose of potential evidence

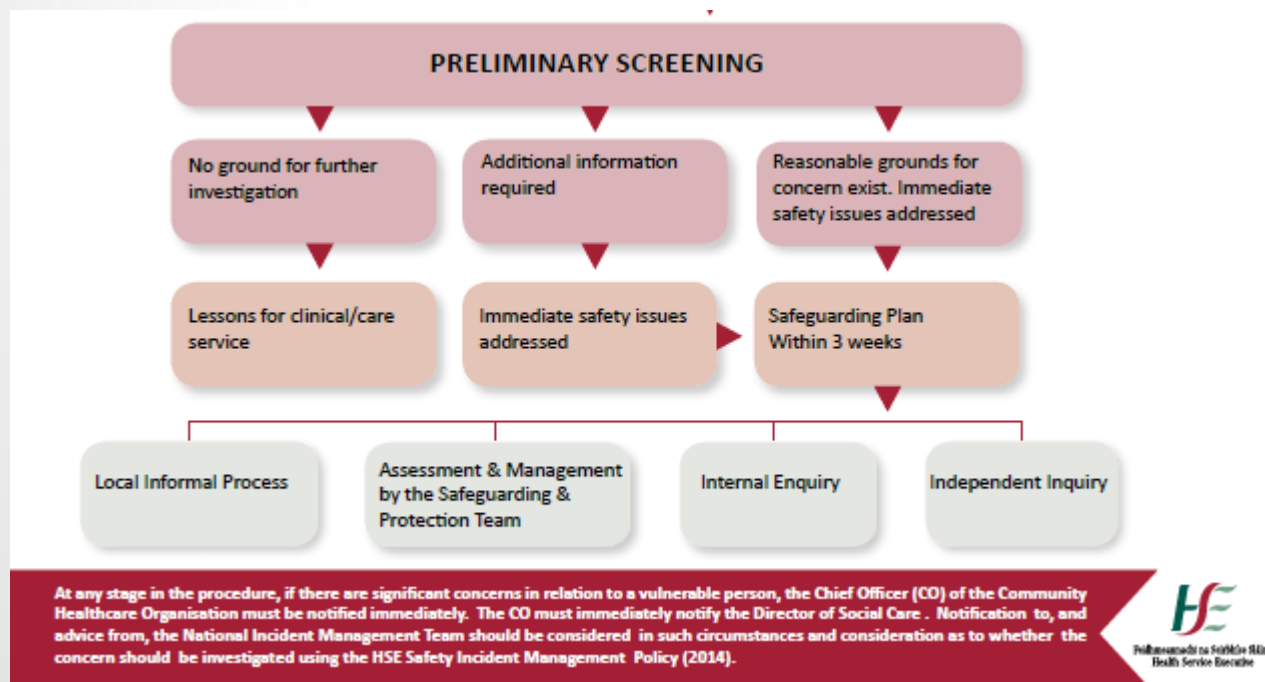
Outline of Procedure

pg27 Policy Doc



Requirements of Preliminary Screening

pg 30 of Policy Doc



Everyone's Responsibility

Same Day as the Alert is Raised

- Immediate Protection
- Listen, Reassure and Support
- Detection and Prevention of Crime
- Record and Preserve Evidence
- Report and Inform (as appropriate to your community / service setting)

Page 28 & 29 of the National Policy

Duties – Report and Inform

As soon as possible on the same day, make a detailed written record of what you have seen, been told or have concerns about and who you reported it to. Try to make sure anyone else who saw or heard anything relating to the concern of abuse also makes a written report.

Group Task

○ Task B - Case Scenarios

In Service Settings

Report to Designated Officer and Line Manager as soon as possible. This must be reported on the same day as the concern is raised. The Line Manager must ensure the care, safety and protection of the victim and any other potential victims, where appropriate. He/she must check with the person reporting the concern as to what steps have been taken (as above) and instigate any other appropriate steps.

Role of the Designated Officer pg41

- **Receive** concerns or allegations of abuse regarding vulnerable persons
- **Collate** basic relevant information
- **Ensure** the appropriate manager is informed and collaboratively ensure necessary actions are identified
- **Ensure** all reporting obligations are met (internally to the service and externally to the statutory authorities)
- **Support** the manager and other personnel in addressing the issues arising.
- **Maintain** appropriate records.

In Community Settings

- Staff member informs their line manager and the Safeguarding and Protection Team
- Contact the Gardaí as appropriate
- Staff outlines in writing all relevant information

Same day as the alert



Role of the Safeguarding & Protection Teams

pg 40

- **Receive** reports of concerns and complaints regarding the abuse of vulnerable persons.
 - **Support** services and professionals to **assess** and **investigate** the concern(s)/complaint(s)
 - **Develop** intervention approaches and **protection plans**.
 - **Directly assess** particularly **complex** complaints and **co-ordinate** service responses.
 - **Support**, through training and information, the development of a **culture** which **promotes** the welfare of vulnerable persons, and the **development** of practices which respond appropriately to concerns or allegations of abuse of vulnerable persons.
- Maintain** appropriate records.

Ensuring Immediate Safety & Support: Service Manager pg31 (Stages of Preliminary Screening)

Establish and document the following:

- What is the **concern**?
- **Who** is making the report?
- Who is **involved**, how they are involved and are there **risks** to others.
- What **actions** have been taken to date?
- **Biographical** information of those involved, including the alleged perpetrator where appropriate, e.g. name, gender, DOB, address, GP details, details of other professionals involved, an overview of health and care needs (and needs relating to faith, race, disability, age, and sexual orientation as appropriate).



Ensuring Immediate Safety & Support: Service Manager

pg31 (Stages of Preliminary Screening)

- What is known of their **mental capacity** and of **their wishes** in relation to the abuse/neglect?
- Any **immediate risks** identified, or **actions** already taken, to address immediate risks.
- Establish the current **safety status** of the victim. Arrange medical treatment if required.
- Establish if **An Garda Síochána** have been notified.
- Ensure referral to **TUSLA** where a child is identified as being at risk of harm.

Information Gathering

pg 31 (Stages of Preliminary Screening)

- The Designated Officer or an appropriate staff member appointed by the Service Manager will **co-ordinate** the safeguarding **procedure** and **processes** and **assessments**.
- **Consent** to share or seek information should be addressed at initial contact.
- No actions should be taken which may put the person/s referred or others at further **risk of harm** or that would **contaminate evidence**.

Note

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Involvement of staff member:

In situations where the allegation of abuse arises in respect of a member of staff of the HSE or a Non Statutory Organisation funded by the HSE, then the ***HSE Policies for Managing Allegations of Abuse Against Staff Members*** (e.g. Trust in Care) will be followed

Involvement of a service user:

In the event that the concerns or allegations of abuse identified a service user, the plan must ensure that relevant **professional advice** on the appropriate actions is sought which may include, for example, a **behavioural support programme**.

Role of Frontline Personnel

- Promote the welfare of vulnerable person in all interactions.
- Be aware of the services policy and any local procedures, protocols and guidance documents.
- Comply with the policy and procedure to ensure the safeguarding of vulnerable persons from all forms of abuse.
- Support an environment in which vulnerable persons are safeguarded from abuse or abusive practices through the implementation of preventative measures and strategies.
- Avail of any relevant training and educational programmes.
- Be aware of the signs and indicators of abuse.
- Support vulnerable persons to report any type of abuse or abusive practice.
- Ensure that any concerns or allegations of abuse are reported in accordance with the policy.

Associated Key Policies and Key Information

Section 5

Group Task

○ Task C

Why people don't tell

- Fear on the part of the service user of having to leave their home or service as a result of disclosing abuse.
- A lack of awareness that what they are experiencing is abuse.
- A lack of clarity as to whom they should talk.
- Lack of capacity to understand and report the incident.
- Fear of an alleged abuser.
- Ambivalence regarding a person who may be abusive.
- Limited verbal and other communication skills.
- Fear of upsetting relationships.
- Shame and/or embarrassment.
- Fear no one will believe them.
- Previous poor response

Protected Disclosures of Information

This procedure applies to all employees of the following:

- The HSE and agencies funded by the HSE to provide health and social services on its behalf.
- Any other person who has received or is receiving assistance in accordance with section 39 of the Health Act 2004 (as amended by the Health Act 2007) or section 10 of Child Care Act 1991.
- A body established under the Health (Corporate Bodies) Act 1961.

Procedure for making a Protected Disclosure

- The HSE has appointed an 'Authorised Person' to whom protected disclosures may be made. Employees are required to set out the details of the subject matter of the disclosure in writing on the Protected Disclosures of Information Form and submit it to the Authorised Person at the following address:

**HSE Authorised Person,
P.O. Box 11571,
Dublin 2.
Tel: 01-6626984.**

Confidential Recipient

A Confidential Recipient is an independent person appointed by the HSE to receive concerns and allegations of abuse, negligence, mistreatment or poor care practices in HSE or HSE funded residential care facilities in good faith from patients, service users, families, other concerned individuals and staff members.

Leigh Gath

The Office of the Confidential Recipient for Vulnerable Persons
Training Services Centre, Dooradoyle, Limerick.

Lo Call 1890 100 014

Mobile 087 6657269

Email: leigh.gath@hse.ie

HSE Good Faith Reporting

- The HSE has a Good Faith Reporting Policy for employees who do not wish to make a protected disclosure. The HSE will provide support and advice where necessary to the employee who reports genuine concerns of fraud or malpractice in the organisation.
- *Good faith reports made to the Information Officer will be referred to the relevant HSE officer for investigation. The Information Officer will not disclose the identity of the employee making the good faith report where the employee so instructs.*
- *In general, employees' identities will not be disclosed without prior consent. Where concerns cannot be resolved without revealing the identity of the employee raising the concern the HSE will enter into a dialogue with the employee concerned as to whether and how it can proceed. (Good Faith Reporting Policy, 2009).*

Remember

- The Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012 came into force on 1st August, 2012. It is an offence to withhold information on certain offences against children and vulnerable persons from An Garda Síochána.

Conclusion

Section 6

- Question & Answer Session
- Personal Action Plan
- Workbook Task to be completed in
Work Setting
- Evaluation Form

Discussion

Key areas of learning from today

Safeguarding Vulnerable Adults.

Further Information is available on the Safeguarding Change Hub page on HSELand.ie

- **Accessing the Change Hub**
- Register at www.hseland.ie
- → Once you have completed the registration process for HSELand.ie – logon to www.hseland.ie and click on *Practice Development Hubs*.
- → Click on the Change Hub icon
- → Click on *Projects and Initiatives* tab on right side of screen
- → Click on *Safeguarding Vulnerable Adults* – under list of *Projects*

