



## Safeguarding of Vulnerable Adults Policy

**Safeguarding is everybody's business and means protecting an adult's right to live in safety, free from abuse and neglect. It is about working together to support people to make decisions about the risks they face in their own lives and protecting those who lack the mental capacity to make those decisions.**

### Policy Statement

We have a strong commitment for the care, welfare and safety of the vulnerable adults with whom we work in both regulated and non-regulated activities. We have identified that many RSM Members fall into the category of 'vulnerable adult' (see additional information). We work with our members relatives, carers, relevant professionals and our community to ensure the rights and safety of our members. Our Safeguarding Policy is based upon guidance and legislation from East Sussex Safeguarding Adults Board (SAB) [www.sussexsafeguardingadults.org](http://www.sussexsafeguardingadults.org) and **The Health and Care Act 2014**.

### Our commitments are based upon the six key principles of SAB's Policy:

- **Empowerment** - This is the presumption of person-led decisions and informed consent. In practice this means having clear and accessible systems for adult's views to be heard and influence change and giving people relevant information and support about safeguarding and the choices available to them to ensure their own safety.
- **Prevention** - It is better to take action before harm occurs. In practice this means raising public awareness about safeguarding, including how to recognise and report it. All staff are clear on their roles and responsibilities in relation to safeguarding adults at risk.
- **Proportionality** - This is the least intrusive response appropriate to the risk presented. In practice this means the adult is at the centre of all responses to the safeguarding concern and any action taken is based on their preferred outcomes or best interests. It is an approach of positive risk taking in which the adult at risk is fully involved.
- **Protection** - This is support and representation for those in greatest need. Consideration of mental capacity is part of the safeguarding process, and where people lack capacity decisions are always made in their best interests.

- **Partnership** – Ensuring that information is shared between organisations in a way that reflects its personal and sensitive nature and ensuring local information sharing protocols are in place and staff understand and use them.
- **Accountability** - This is accountability and transparency in delivering safeguarding. Everyone understands the roles and responsibilities of RSM and all staff understand what is expected of them and others.

### **Trauma informed practice:**

We aim to provide culturally sensitive, safe services that people trust and want to use. We aim to work in collaboration and partnership with people and empower them to make choices about their health and wellbeing. We know that language matters. Our words are powerful. The way we communicate with and about people reveals and shapes attitudes and behaviours. Some words lift people up and build bridges. And some words build walls and bring people down or exclude them altogether.

### **Safeguarding in Practice:**

This policy sets out the procedures we follow if we suspect that:

- A vulnerable adult is at risk of being harmed or is being harmed.
- An allegation is made against a member of staff/volunteer/trustee.

This policy details the steps we take to safeguard the vulnerable adults in our care through:

- Recruitment.
- Training and induction.
- Regular Review.

### **Safeguarding Children**

In addition to the above we also have a duty of care to protect children that we meet during the course of our work. This may be students on work placements or children that we engage with via our intergenerational work. All staff are therefore also DBS checked to work with children (as well as vulnerable adults) and have a strong commitment for their care, welfare and safety. Staff are aware of how to deal with allegations and concerns and who to contact for further advice and/or action.

### **Safeguard Lead**

It is a legal requirement to have a designated person to take the lead in safeguarding. This person will stay abreast of all current safeguarding legislation. They will refer cases of suspected abuse or allegations to the relevant investigating agencies. They will ensure that all staff, trustees and volunteers are aware of how to refer cases of suspected abuse or allegations themselves, to promote an ethos of 'safeguarding is everybody's business'. Our safeguarding lead is **Vicky Cheeseman**.

### **Recruitment and Training**

Due to the nature and ethos of RSM, all trustees, staff and volunteers are in a position of trust. To ensure that vulnerable adults are protected whilst attending RSM activities, we have robust safe recruitment procedures in place:

**Staff:**

- Our adverts/literature states that enhanced DBS checks will be required for the role.
- Identity checks are carried out to establish that applicants are who they claim to be.
- Professional and character references are obtained.
- Application forms are completed and checked and any gaps are accounted for.
- All staff have an enhanced DBS check and are registered on the DBS Update Service.

**Trustees:**

- Complete an application form.
- Attend an interview with Chair of trustees and Charity Manger.
- Have a DBS check.
- Have references checked.

**Volunteers:**

- Have a DBS check. Volunteers working on behalf of RSM in positions which do not qualify for a DBS check to be undertaken (for example baking cakes or serving refreshments with staff as part of a team), will do so with agreement from the Safeguard Lead.
- Have references checked.

The Safeguard Lead will ensure that staff and trustees complete training so that they are aware of how to spot signs of abuse and report concerns to them. Volunteers are made aware of safeguarding and how to report a concern via our Volunteers Training video and Volunteer meetings. Training for staff and trustees will be via East Sussex Learning Portal and will include recognising possible signs of abuse and how to share information appropriately and how to respond to safeguarding concerns appropriately.

\*NB: All volunteers will be asked to register for the free DBS update system. All paid staff will have a DBS check and subscribe to the Government Update Service.

**Responding to suspicions of abuse**

Employees and volunteers are not required to investigate suspicions. If someone believes that a vulnerable adult may be suffering from abuse they must refer their concerns to the Safeguard Lead, who will listen to these concerns and take appropriate action. The individual must record what they have seen, heard or know, accurately, at the time the event occurs. A standard form is provided for this purpose. The Lead will act swiftly (no later than at the end of the working day in question). However, if the concern is raised at the end of a working day and a vulnerable adult is not in immediate danger, the Lead will act at the start of the following day and make appropriate referrals. The Safeguard Lead will document all concerns in the Safeguarding folder. Low level concerns in isolation may not appear as a safeguarding risk. However, the entries are reviewed regularly by the Safeguard Lead to identify trends and patterns which could lead to a safeguarding referral being made. Ideally, adults should provide consent before information about them is shared. They have the right to refuse, however, this wish can be overridden in circumstances which place them and/or others at significant risk of harm.

**NB: Although the safeguard lead is the first point of contact, if staff, trustees or volunteers feel that the lead does not take their concern seriously, they can make a referral themselves:**

### **Good Practice Guidance in Action:**

Speak in a private and safe place.

Accept what the adult is saying without judgement.

Don't 'interview' the adult or start an investigation.

Gather sufficient information with open questions to establish the basic facts. This will help when you inform Adult Social Care or the police.

Ask the adult what they would like to happen.

Never promise the adult that you'll keep what they tell you confidential; explain who you will tell and why.

If there are grounds to override an adult's consent to share information, explain what these are.

Explain to the adult how they will be involved and kept informed.

Provide information and advice on keeping safe and the safeguarding process.

Keep an accurate record of your conversations, and actions or decisions taken by you and others.

### **Making a Referral – Who to contact**

Adult Social Care

(8am to 8pm 7 days a week including Bank Holidays)

Phone: 0345 60 80 191

Mobile SMS Text: 07797 878 111

Typetalk: 18001 0345 60 80 191

Website: [Health and Social Care Connect](#)

**Adults – Out of hours (emergency) support** When the Health & Social Care Connect office is closed, for an emergency concerning an adult who urgently needs help, call 0345 60 80 191 and select menu option 2 to connect to Out of Hours Emergency Service.

Children and Young People – SPOA: 01323 464 22

Mon – Thurs 5pm – 8.30am and Fri 4.30pm to 8.30am, Weekends and Public holidays: 24 hours.

**Alternatively contact the Police on 101 or in an emergency 999**

### **Allegations against staff, trustees and volunteers**

All allegations will be taken seriously, and this may lead to the suspension of paid staff or the suspension of duties for trustees/volunteers. Suspension is deemed a neutral act, safeguarding both the vulnerable adult and the member of staff, trustee/volunteer.

Suspension will occur when; a person is at risk; when the allegation is so serious that

dismissal for gross misconduct is possible; where it is necessary to allow unimpeded investigation. The matter will remain confidential, and information should be disclosed on a need-to-know basis only. We will follow advice from East Sussex SAB and will conduct all investigations within 28 days. We will offer appropriate pastoral support and refer the individual to ACAS for legal advice. If following an investigation an individual is removed from the organisation (or would have, had the person not left first) because the person poses a risk of harm to adults, we will make a referral to the Disclosure and Barring Service. For further information please refer to the ‘Whistleblowing within the Workplace’ policy.

This policy was written/reviewed by	Vicky Cheeseman – Safeguard Lead
Adopted by	Board of Trustees
Date	July 2018
Reviewed	July 2019, Jan 2021, April 2022, July 2023 VC, Aug 2024 VC June 2025 VC 25 <sup>th</sup> February 2026
Next review date	February 2027 or if legislation dictates

### Additional Information

#### Definition of ‘Vulnerable adult’

A person is a vulnerable adult if they are 18 years or over and who have care or support needs because of their age, physical or learning disability, mental health needs, or other illness and are, or may be, unable to protect themselves from abuse or neglect because of their care and support needs. Other adults who may be at risk include people who are: unpaid carers, homeless, experiencing domestic violence, addicted to drugs or alcohol, badly treated and forced to work for little or no pay, or forced to marry.

Not all RSM members fall into all categories, but all our members certainly fall into the first category (age), with the average age of our members being 80, it is therefore prudent to assume that our members are classified as vulnerable adults.

#### Types of Abuse

Physical abuse	Neglect	Domestic violence
Sexual abuse	Self neglect	Organisational abuse
Financial abuse	Psychological or emotional abuse	
Discriminatory abuse	Modern slavery	