



Safeguarding Policy and Procedure

Purpose

- To ensure that abuse of Service User rights is avoided.
- To comply with the Disclosure and Barring Service (DBS) requirements.
- To comply with the Protection of Freedoms Act 2012.
- To comply with the Mental Capacity Act 2005.
- To comply with the Safeguarding Vulnerable Groups Act 2006.
- To comply with and ensure awareness of safeguarding powers and the safeguarding requirements of the Care Act 2014, and the Care & Support Statutory Guidance that accompanies it. These requirements replace the 'No Secrets' guidance issued in 2000.
- To comply with the Charity Commission's guidance "Safeguarding and protecting people for charities and trustees" and ensure that safeguarding is a governance priority for trustees.

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- To create and maintain a culture of awareness, prevention and responsive practice in which all staff, volunteers, trustees, contractors and service users understand their role in safeguarding.

Scope

All staff, workers, volunteers, trustees, contractors and service users.

This policy applies to all activities of Pathways for All People, including outreach, digital/online services and partnership working with other organisations.

Important note – the Bournemouth & Poole Safeguarding Adults Board protocol must take precedence where local policy applies.

Where reference is made to DBS reporting processes and requirements, the following policy and procedure is generic and intended to set out general principles and courses of action where local procedures do not apply.

The contact details for your local Safeguarding Adults Team are:

Bournemouth Borough Council
Town Hall, St Stephens Road, Bournemouth BH2 6EB
Tel: 01202 451451
Care Direct: Tel 01202 454979
Website: www.bournemouth.gov.uk

You should contact this number if you need to report any actual or suspected case of abuse.

Policy for the Prevention of Abuse

Abuse is a violation of an individual's human and civil rights by any other person or persons.

The main range of different forms of abuse are described in the statutory guidance accompanying the Care Act 2014 as:

- Physical abuse
- Domestic violence
- Sexual abuse
- Psychological abuse
- Financial or material abuse
- Modern slavery
- Discriminatory abuse
- Organisational abuse
- Neglect and acts of omission
- Self-neglect

All staff at Pathways must ensure that service users are safeguarded from abuse in all the above forms. The duty to safeguard adults applies to all our service-users who:

- Have needs for care and support
- Are experiencing, or at risk of, abuse or neglect
- As a result of those care and support needs are unable to protect themselves from either the risk of, or the experience of, abuse or neglect.

The following six principles set out in guidance to the Care Act 2014 should inform practice with service users:

- Empowerment – People being supported and encouraged to make their own decisions and informed consent.
- 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 delivering safeguarding.

Pathways' aim is to ensure that service users are not subject to any forms of abuse. Pathways will promote the well-being of its service users and provide a safe and supportive environment for its service users. This is ensured through active care planning that involves the service user at all times. The care planning process includes the management of risks which is reviewed on a regular basis.

We acknowledge the additional risk factors that may apply to people with mental health problems, substance misuse, addiction, homelessness or multiple vulnerabilities and take steps to mitigate these risk factors specifically.

We will maintain a clear code of conduct for all staff, volunteers and trustees specifying expected behaviour, responses to concerns, and the requirement to embed safeguarding into all aspects of our work. zurich.co.uk

- In addition, this policy should be read in conjunction with other policies and procedures that are linked to safeguarding. These are listed within the Safeguarding folder.

Referral Procedure

- The first priority should always be to ensure the safety and protection of vulnerable adults and if medical attention is required this must be sought immediately.
- Staff should report suspicion or evidence of abuse to their Registered Manager, who in turn will report it to the Adult Social Care Safeguarding Adults Team.
- If staff suspect or have evidence the Registered Manager is involved in abuse, they should report directly to the Safeguarding Adults Team Bournemouth. They should also go directly to the Safeguarding Adults Team if there is an obvious failure by management to respond appropriately.
- It is the responsibility of everyone to act on suspicion or evidence of abuse or neglect and refer to the local Safeguarding Adults procedure. If in doubt, contact Bournemouth safeguarding direct and they will advise (Tel: 01202 451451).
- Staff, volunteers and trustees must also raise concerns through the whistle-blowing procedure if they believe the internal processes have not been followed or there is ongoing risk.
- We will maintain a safeguarding referral flowchart (appendix) to guide staff through immediate actions, reporting lines, and timescales.

Lead Responsibility & Multi-agency Working

- The local Safeguarding Adults Team will take the lead and be responsible for managing the process by establishing the facts of the case, identifying those who need to be involved and coordinating the response.
- When complaints about alleged abuse suggest that a criminal offence may have been committed it is imperative that reference is made to the police as a matter of urgency.
- Early referral or consultation with the police and Safeguarding Team will enable them to establish whether a criminal act has been committed, and enable them to decide if and when they need to become involved. This prevents forensic evidence from being lost and may avoid multiple interviews of the abused adult.
- In some incidents Pathways must carry out an initial investigation before referral, to prevent the police being involved unnecessarily in reports of unsubstantiated allegations.
- The enquiry must consider other agencies and identify those who need to be involved. Where a joint interest or responsibility exists an early agreement regarding lead responsibility and working arrangements must be clarified.
- The process of the enquiry should be explained to the allegedly abused person, their consent to proceed with the enquiry obtained if possible. Arrangements should be made to have a relative, friend or independent advocate present if required. The relative, friend or advocate must not be a person suspected of being involved in the abuse.
- The local authority must arrange, where appropriate, for an independent advocate to represent and support an adult who is the subject of a safeguarding enquiry or Safeguarding Adult Review where the adult has 'substantial difficulty' in being involved in the process and where no other appropriate adult assists. Pathways shall use its Advocacy Policy and Procedure, and the Complaints section of the Service User Handbook for further details.
- Consideration must be given to enlist specialist input where people involved have limited communication skills.
- The Adults Safeguarding Team will take the lead and coordinate an investigation, taking actions including:
 - Action to ensure immediate safety of the alleged victim.
 - Early involvement of key agencies via strategy meeting or telephone discussion.
 - Assessment and care planning for the vulnerable person.
 - Action regarding criminal proceedings.

- Action by the organisation (e.g., suspension, disciplinary, complaints/grievance) and removal of the perpetrator from contact with vulnerable adults.
- Arrangements for perpetrator's treatment or care (if appropriate).
- Consideration of implications for regulation, inspection, contract monitoring.
- Appropriate measures to reassure and support staff and keep them informed.
- Maintain appropriate records.
- We will collaborate with partner agencies in multi-agency safeguarding hubs (MASH) or equivalent structures, and document all decisions, rationales and actions taken.

Investigation:

- Agencies other than the Police may need to conduct investigations into alleged abuse, because absence of criminal action does not mean no abuse occurred. The investigation must gather good evidence capable of withstanding formal scrutiny (civil standard: "balance of probabilities").
 - Case Conference:
- After investigation, if deemed necessary, a case conference involving all relevant agencies may be held. One purpose is to make multi-agency decisions about future actions. Final decision to call a conference rests with the Adult Social Care Safeguarding Adults Team Manager.
- Any case conference documentation, decisions and follow-up actions will be logged in our internal safeguarding register and reviewed by senior management to identify systemic issues or learning.

Confidentiality

- Reporting incidents may involve disclosing confidential personal information. Organisations and their workers must follow their information-sharing policies to determine when sharing is appropriate.
- The Data Protection Act 2018 and UK GDPR impose requirements on how information is stored, processed and shared; appropriate measures must be taken to protect personal data. Notifications should avoid personally identifying details; codes should be used instead.
- The Care Act 2014 requires information to be shared with Safeguarding Adults Boards when requested from any appropriate individual or organisation.
- We will maintain strict confidentiality and ensure data is handled in accordance with our Privacy Policy, including secure storage, restricted access and audit trail of records.
- We will use anonymised/aggregated data where possible for learning, reporting and evaluation while safeguarding individual privacy.

Prevention of Employment of Barred Persons

Policy for preventing persons barred from working in the care sector from being offered employment as a Substance Misuse Worker:

- The definition of a Substance Misuse Worker is broader than previously used registration systems. It covers: ...
- The Safeguarding Team will be notified immediately of any person who applies for a post as a Substance Misuse Worker who is found to be on the DBS barred list.
- All provisions which apply to employees also apply to volunteers.

Procedure:

- The DBS Vetting & Barring scheme identifies people unsuitable to work with vulnerable adults; employers must identify and refer them.
- There is a statutory requirement to check the DBS barred list when offering employment to a new member of staff likely to have regular contact with vulnerable adults. The check will be part of a Disclosure Service application.
- Potential staff will not be offered a post before a satisfactory barred-list check is received.

- The DBS “Adult First” check may only be used where recruitment is required to meet statutory staffing levels.
- Referral to the list: Providers must refer workers to the DBS if they consider the person guilty of misconduct where a vulnerable adult was harmed or placed at risk. Covers existing employees and leavers whose conduct becomes known later.
- A referral must include full details of the individual, nature of allegation, investigation outcomes, and any actions taken. DBS forms are available online.
- If an employer discovers they’ve offered employment to someone on the barred list they must cease employing them.
- The Registered Manager must consider, when someone is suspended pending allegation, whether referral is required (not automatic). Best practice: vulnerable person’s safety overrides other considerations.
- The Registered Manager should note that referral of a person may raise human-rights/employment issues if later found unsubstantiated. Legal advice may be required.
- Agency staff must be checked; responsibility for ensuring checks rest with the Registered Manager.
- Do not assume the Police or Safeguarding Team will refer the person to the DBS: if the Registered Manager concludes referral is required they must do so immediately.
- Suspensions following a determination of culpability may be appropriate if within the DBS remit.
- Further information and referral forms: <https://www.gov.uk/government/collections/dbs-referrals-guidance--2>

Procedure for allegations of misconduct by staff:

- Allegations will be taken seriously and reported to a senior manager for investigation.
- Investigation objectives: establish facts; assess needs of vulnerable adult; decide on follow-up actions in respect of perpetrator and organisation.
- Allegations will normally result in immediate suspension pending investigation.
- The Registered Manager will investigate and decide whether to notify the relevant authority (Safeguarding Adults Team) following investigation.
- Allegations resulting in actual or potential harm to service user must be notified to the Safeguarding Team within 48 hours if substantiated.

General prevention of abuse in employment:

- The Whistle-blowing Policy will be highlighted at induction.
- The Manager will ensure staff understand the chapter on Safeguarding in the Care & Support Statutory Guidance.
- During induction new staff will complete “Understanding Abuse” and be given the relevant guidance documents.
- Training will ensure staff understand forms of abuse, their responsibilities to prevent/report, and referral routes.
- Staff receive training on the Mental Capacity Act 2005, including potential deprivation of liberty and authorisation procedures.
- The Service Users’ Finances Policy will be given to staff at induction.
- All service users receive a copy of the Service Users Handbook.
- Formal supervisions at least every two months with records kept (see Employee Supervision Policy).
- The DBS Referral Form, which can be downloaded from <https://www.gov.uk/government/publications/dbs-referrals-form-and-guidance>

Other Safeguarding Powers

- The Mental Capacity Act 2005 provides a framework for decision-making for adults who lack capacity.
- Safeguarding Vulnerable Groups Act 2006 provides a legal framework for pre-employment vetting.
- The Sexual Offences Act 2003 outlines offences where a person's choices about sexual activity may be affected by mental disorder.
- The Care Act 2014 describes local authority responsibilities to investigate abuse of adults, and the Care & Support Statutory Guidance outlines investigation of abuse.
- We will also consider risks arising from online environments (e.g., social media, remote/virtual services), radicalisation ("Prevent" duty) and other emerging risks, and integrate these into our safeguarding approach. zurich.co.uk+1

Review, Monitoring & Governance

- The Board of Trustees holds ultimate responsibility for safeguarding and will receive an annual safeguarding report, including number and nature of incidents, outcomes, learning points, training compliance and risk assessments. GOV.UK
- Our staff and service-user monitoring information will be reviewed yearly and reported to the Director.
- This policy will be reviewed annually in consultation with stakeholders to ensure implementation is effective.

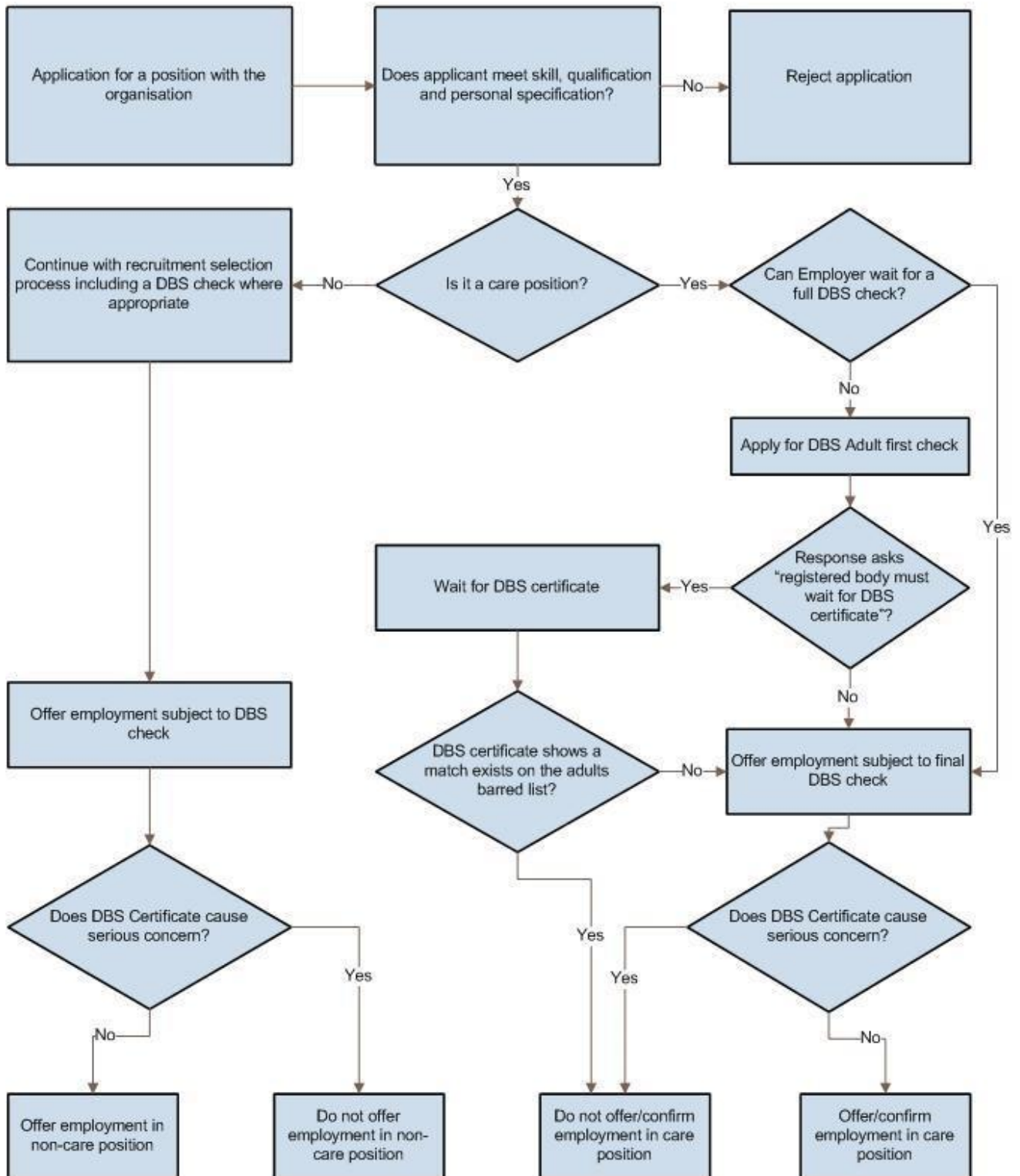
Version control:

This policy is version 2: November 2025.

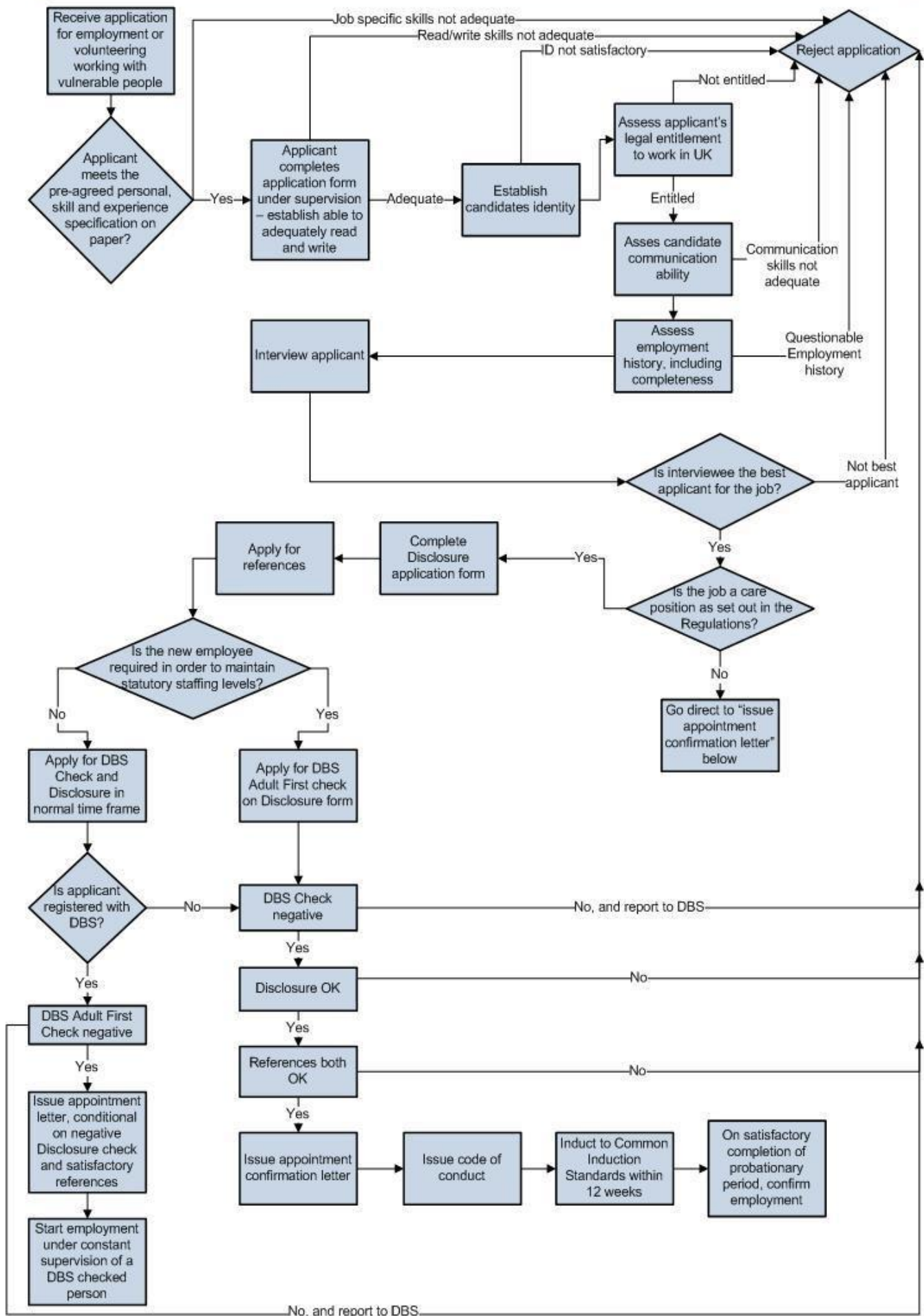
Next scheduled review: November 2026.

All amendments will be logged, including the nature of changes and date approved.

System Flowchart for Recruitment to Meet Regulations



Employee and Volunteer Verification Flow Chart, England and Wales



Safeguarding Incident Log

Service Username:	
Name of person investigating incident/completing this form:	
Name of person reporting incident (if not Service User):	
Service User location/room reference:	
Time and date of incident:	
Precise location of incident:	
Details of incident (include description of incident, as well as the names of any individuals who may have been involved, remember to take care not to lead the Service User):	

Name of witness':

Details of any injuries, was medical attention required?

What decision has been reached as a result of investigating the incident?

Name and designation of witness/advocate/support for Service User during discussion/report taking

What immediate action was taken?

What lessons have been learned from this incident and investigation?

Were any outside agencies contacted? If so, who?

Registered Manager recommendations, including Care Plan changes:

What actions will be taken to prevent further incidents?

Signature:

Print Name:

Title:

Date:

**Reported to
Management
Meeting by:**

Date:

One copy of this form to be held in the Service User's personal file, one copy in the Safeguarding Incident file.

Use additional sheets if necessary

Skin Marks/Bruising Assessment Tool – to be completed where appropriate

Service User's name:

Admission date:

Examined in person? (Y / N). If N, record name and designation of person providing information:

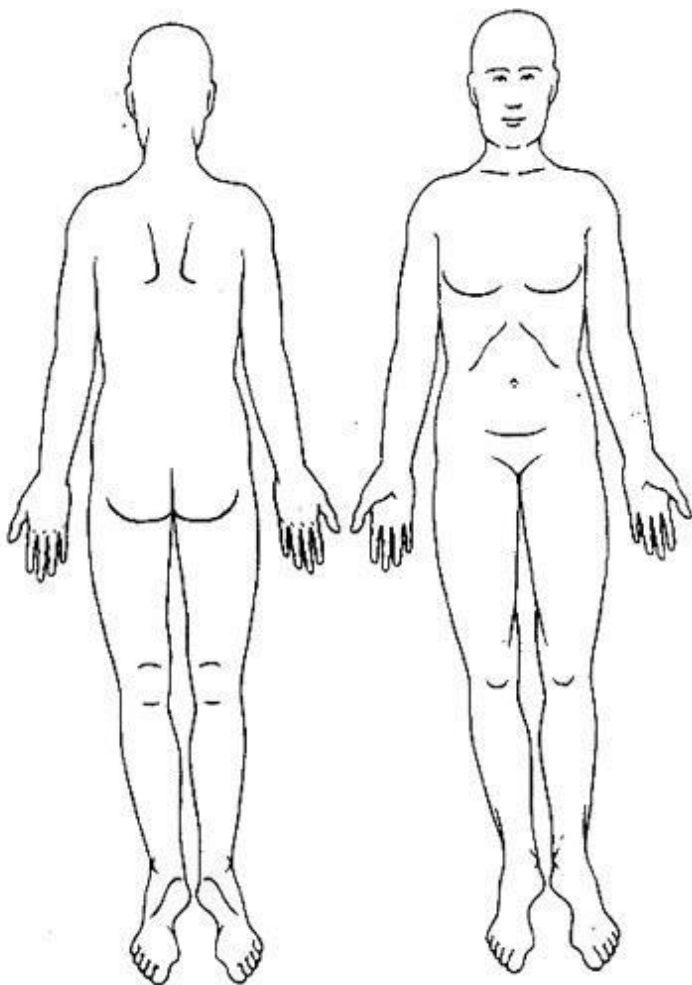
Name:

Date of examination:

Designation:

Signature:

Skin Marks/Bruising Diagram



Area of risk/mark/bruising identified

Description of risk/mark/bruising identified

Cause identified (specify)?

Care Plan created (Yes / No). If no, why?

OR – No skin lesions apparent (tick and sign for accountability. See above if accepting 2nd hand information):

Next review interval (maximum 1 month):

Therefore, next review date: ____ (use attached review form to note, or if changes are substantial, carry out this full assessment again)

Accountability signature (person completing to print name and sign):

Date of form completion:

Written: 13/12/19

Review: 13/12/22