

Procedures Manual

Title: PROTECTION AND PREVENTION OF ABUSE

SD-14

1.0 SCOPE.

1.1 The system and good practice used to prevent abuse.

2.0 AIMS AND VALUES

2.1 To ensure that vulnerable adults protected from all forms of abuse.

2.2 To ensure that effective policies and procedures are in place to prevent abuse.

2.3 To protect staff and service users where abuse is alleged, disclosed or suspected.

3.0 CONTENTS

6.0 Underlying Principles.

7.0 Definitions and Categories of Abuse.

8.0 Preventing abuse.

9.0 Dealing with suspected or reported abuse.

10.0 Records that must be kept.

4.0 REFERENCED DOCUMENTS

C4-001 Accident/Incident/Near Miss Report

C4-040 Medication Error Form

C4-067 Service User Body Chart

C4-075 Service User's Personal Support Plan

C4-077 Service User's Daily Report Record/Nursing Report/Sleepover Report/After School Club Report

C4-114 Children First Standard Report Form.

QP-15 HSE Children First 2011

QP-24 Health Board's Policy on Record Retention Periods 1999

QP-25 Protection & Prevention of Abuse Policy

QP-33 Child Care Act 1991

C4-SCB Staff Communications Book

C4-SUPMPB Service User Personal Monies and Property Book.

MA-11 Reporting Poor Practice

MA-15 Confidentiality & Access to Records

MA-24D Management of Complaints procedure.

HR-012 Recruitment Policy & Procedure

HR-019 Induction & Probation Policy & Procedure

WIDA's Code of Behaviour

Implementing Protecting Our Future, HSE

5.0 RESPONSIBILITIES

5.1 The manager, designated liaison persons and all staff & volunteers.

This is the procedure to be followed

In the absence of HSE/National Procedures on Protection of Vulnerable Adults, this procedure is informed by HSE Policy on Elder Abuse, 'Implementing Protecting Our Future'

6.0 UNDERLYING PRINCIPLES

(adapted from Protecting Our Future, HSE 2002)

This procedure is informed by the following principles :

- WIDA are committed to supporting the rights of vulnerable adults to lead independent life based on self-determination
- WIDA recognises people who are unable to make their own decisions and/or to protect themselves, their assets and their bodily integrity, and will take steps to ensure adequate protection for them.
- WIDA recognises that the right to self-determination can involve risk and will endeavour to ensure that such risk is recognised and understood by all concerned and is minimised where possible.
- WIDA acknowledges that although intervention may, in some cases, compromise the individual person's right to independence and choice, the principle of 'least restrictive alternative' should apply at all times.
- WIDA will ensure that the law and statutory requirements are known and used appropriately so that older people receive the protection of the law and access to the judicial process.

7.0 DEFINITIONS & CATEGORIES OF ABUSE

(Implementing Protecting Our Future)

- 7.1 Abuse is a single or repeated action or inaction occurring within any relationship where there is an expectation of trust which causes harm or distress to a vulnerable adult or violates their human and civil rights.
- 7.2 An individual's human and civil rights can also be violated through inadequacy of care or inappropriate programmes of care.
- 7.3 Where it is in a service user's best interests, this procedure can be utilised in cases of crimes committed by strangers and also severe self-neglect where a vulnerable adult may pose a risk to his/herself.
- 7.4 There are many different types of abuse, which can be perpetrated through negligence, ignorance or with intent.
- 7.5 **Physical Abuse**
Including hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions.
- 7.6 **Sexual Abuse**
Including rape and sexual assault or sexual actions to which the vulnerable adult has not consented, or could not consent, or into which he/she was compelled to consent.

7.7 Psychological Abuse

Including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks.

7.8 Financial or Material Abuse

Including theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

7.9 Neglect and Acts of Omission

Ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of necessities of life, such as medication, adequate nutrition and heating. Failure to provide appropriate equipment.

7.10 Discriminatory Abuse

Including racism, ageism, sexism, and other forms of harassment, slurs or similar treatment.

7.11 Institutional Abuse

Including, but not limited to, impacting service user rights in order to meet the needs of the service- for example; rigid bedtimes, meal-times, sedation, lack of stimulation, restricting visitors or access to community, rigid routines etc.

8.0 PREVENTING ABUSE

8.1 WIDA acknowledges that central to protecting people from abuse is taking steps to ensure that vulnerable adults in our care:

- are aware of their rights
- are informed about how to complain and supported to do so
- feel that they will be listened to and supported by staff
- are not isolated from their natural support networks (friends, family & community) and have access to advocacy services.

8.2 Safe Recruitment Procedures for Workers & Safe Management of Workers.

8.3 In order to prevent abuse, WIDA are committed to best practice in the recruitment of staff and volunteers, recognising that safe recruitment procedures are central to safeguarding service users in our care.

- Staff will be recruited in line with our Recruitment Policy & Procedure (HR-012) and Induction & Probation Policy & Procedure (HR-019).
- Staff will adhere to HR- REF DOC WIDA Code of Behaviour

8.4 Recognising Abuse

8.5 In order to recognise and respond to abuse, staff must be willing to accept that abuse happens and familiarise themselves with the different types of abuse (outlined above).

In responding to abuse, staff must:

- (i) consider the possibility that a vulnerable could experience abuse;
- (ii) look out for signs of neglect or abuse;

- (iii) record relevant information.
- 8.6 Observations should be accurately recorded and should include dates, times, names, locations, context and any other information that may be relevant. Care should be taken as to how such information is stored and to whom it is made available
- 8.7 Reasonable grounds for concern
- An injury or behaviour that is consistent both with abuse and an innocent explanation, but where there are corroborative indicators supporting the concern that it may be a case of abuse.
 - Consistent indication over a period of time that a vulnerable adult is suffering from emotional or physical neglect.
 - Admission or indication by someone of an alleged abuse.
 - A specific indication from a vulnerable adult that he or she was abused.
 - An account from a person who saw the vulnerable adult being abused.
 - Evidence (e.g. injury or behaviour) that is consistent with abuse and unlikely to have been caused in any other way.
- 9.0 Dealing with Disclosures of Abuse.
- 9.1 Abuse can be suspected or disclosed by an individual. Disclosures should always be taken very seriously and should be acted upon without delay.
Staff should:
- Remain calm, avoid panic
 - Be mindful of how it difficult it is for the person to disclose this information
 - Avoid putting pressure on the person
 - Give time to listen closely to what they are being told and provide the service user with support and understanding.
 - Accept what the person is telling them
- Staff should not:
- Ask too many questions, other than to show support or seek clarity
 - Ask 'leading questions'
 - Show any signs of anger, disgust or disbelief
- 9.2 No undertaking of secrecy should be given by any member of staff, but rather it should be explained how the information will be shared with the Designated Liaison Person and potentially with the HSE/An Garda Síochána.
- 9.3 Reporting Concerns.
- 9.4 Staff should report any concerns or disclosures of abuse to their manager or directly to the Designated Liaison Person in a timely manner.
- 9.5 Where the concerns might involve their manager, staff should report the alleged abuse to another manager. The manager should ensure that every effort is made to protect the complainant by following the procedure for Reporting Poor Practice, MA-11 The failure of any member of staff to report abuse concerns may lead to disciplinary action.

- 9.6 It is the responsibility of the Designated Liaison Person to ensure that correct procedures are followed in respect of all concerns brought to them by staff/volunteers and that where necessary, reports of suspected abuse of vulnerable adults are reported to external agencies without delay (HSE, An Garda Síochána).
- The Designated Liaison Person within WIDA is Ms. Claire Looney, Social Worker, WIDA, 2 Belmont Rd., Waterford. **051-897024**
 - The Deputy Designated Liaison Person is Ms. Teresa Harhen, Assistant Director of Nursing, WIDA, 2 Belmont Rd., Waterford. **051-897022**
- 9.7 In the event of an emergency, where staff think a vulnerable adult is in immediate danger An Garda Síochána should be contacted.
- 9.8 Upon receipt of a referral, the Designated Liaison Person should gather factual information as part of a preliminary investigation- including biographical details, nature of relationship with alleged perpetrator, other people/agencies involved with the service user and source of the allegation, disclosure or concern. It should then be considered whether there is an immediate risk to the person, whether he/she requires immediate medical treatment or examination and the service user's ability to communicate or provide informed consent
- 9.9 This preliminary investigation should be conducted with sensitivity to the person's needs and their understanding of the situation. Following this preliminary investigation, the designated person should consider whether the alleged abuse could have happened or whether there are reasonable grounds for concern in respect of the service user. If there are reasonable grounds for concern, the designated person should report the situation to the HSE Social Worker responsible for Protection of Vulnerable Adults.
- 9.10 Following a referral to the HSE Social Worker, the Designated Liaison Person should collaborate with the HSE including making a decision regarding contacting An Garda Síochána where a criminal act has been alleged and/or where there may be a risk to others now or in the future.
- 9.11 The alleged victim's carer should be informed of the allegation, disclosure or concern unless the person has made an informed choice that they do not wish for their carer to be informed, or if the carer is the alleged perpetrator and informing him/her of the allegation, disclosure or concern creates a further risk.
- 9.12 Where the alleged perpetrator is also a service user, the designated person should consider their needs separately to the needs of the alleged victim
- 9.13 **Allegations against Staff**
- 9.14 Where the alleged or suspected perpetrator is a member of staff, it should be reported to a manager without delay. The manager should conduct a preliminary screening in line with the Trust In Care Policy (QP-15) and if it is deemed as a result of the preliminary screening that an abusive interaction could have occurred, an investigation should proceed in line with Trust In Care (QP-15).
- 9.15 The manager should inform the Chairperson of WIDA's Board of Directors of the allegation and any actions being taken.

- 9.16 The manager should ensure that arrangements are put in place, which enable staff and service users affected by the incident to access counselling services if required.
- 9.17 Following any such investigation, the management and the Designated Liaison Person should consider whether there are any quality or service provision issues arising for WIDA and take any corrective actions required in order to minimise any future risk to service users in our care.
- 9.18 **Record Keeping**
- 9.19 Staff should record allegations, concerns and/or disclosures of abuse on the service user's file.
- 9.20 Any referrals to the Designated Liaison Person and Deputy Designated Liaison Person should be recorded in the Designated Liaison Person Book (DLPB), including actions taken and the outcome of the referral. Entries in the DLPB should be reviewed at least annually by the DLP & the deputy DLP in order to establish whether there are any quality or service provision issues arising and to ensure that any corrective actions identified have been followed up.
- 9.21 All records are to be maintained in line with MA-15 Confidentiality & Access to Records.

10.0 RECORDS THAT MUST BE KEPT

- 10.1 The manager should ensure that the following records are kept and maintained:
- Accident/Incident/Near Miss Report, (C4-001)
 - Staff Communications Book, C4-SCB.
 - Service User's Daily Report Record / Nursing Report / Sleepover Report / After School Club Form, C4-077 (A/B/C/D).
 - Service User's Person Centred Plan, C4-075(A/B/C)
 - Medication Error Form, (C4-040)
 - Service User Body Chart, (C4-067)
 - Service User's Personal Monies and Property Book, (C4-SUPMPB)
- 10.2 A record should be kept of all staff who have been trained in recognising and responding to abuse in line with the service's policy and procedure on Protection and Prevention of Abuse.
- 10.3 **WIDA Code of Behaviour**
- 10.4 Please refer to **HR- REF DOC WIDA Code of Behaviour** for guidance on appropriate conduct and boundaries between staff and service users.

10.5 **Complaints**

10.6 Please refer to HR-17 Management of Complaints for guidance on dealing with complaints from service users. This procedure should be made available to all service users/ parents/ representatives/ advocates in an accessible format.

10.7 **Missing Service User**

10.8 If a service user goes missing while in the care of WIDA, please refer to SD-20 'Missing Service User'.

10.9 **Accidents/Incidents**

10.10 All accidents/incidents/near misses are to be recorded on C4-001 Accident/Incident/Near Miss report form.