

Protection of Vulnerable Adults Policy

This policy defines the arrangements and procedures in place within the clubs that ensures the protection of vulnerable adults from abuse.

1. POLICY PRINCIPLES:

The club instructor will develop and implement procedures and strategies, which are designed to protect vulnerable adults from abuse. These strategies will:

- Identify who is at risk.
- Define what is meant by abuse and identify the types of abuse that can occur.
- Promote instructor/volunteer awareness of the common indicators associated with each type of abuse and ensure that at least one named officer undergoes specific training.
- Specify the procedures to be followed in the event of alleged or suspected abuse.

2. ABUSE OF VULNERABLE ADULTS – INDICATORS AND MANAGEMENT PRACTICES:

Definitions of a Vulnerable Adult (Department of Health Guidance “No Secrets” March 2000)

- Someone who is aged 18 or over and who is or may be in need of community care services by reason of mental or other disability, age or illness and who is, or may be, unable to protect himself/herself from significant harm or exploitation.
- The club also applies this policy to those not receiving community care services but that are considered to be vulnerable to abuse.

Definitions of Abuse:

- Abuse is a violation of an individual’s human and civil rights by any other person or persons. For vulnerable adults this will focus upon others who have influence over them.
- These violations may be intentional or unintentional.
- These violations may be a single act or a repetition of acts over a period of time.

Definitions of significant harm

Significant harm refers to:

“Ill treatment (including sexual abuse and forms of ill treatment that are not physical): the impairment of, or an avoidable deterioration in, physical or mental health and the impairment of physical, emotional, social or behavioural development”.

Categories of Abuse:

For the purpose of this Policy, abuse is classified into the following categories:

- Physical – can include hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions.
- Abuse in care settings – care settings include residential and nursing homes, hospitals, day centres, sheltered housing schemes, group or supported housing projects.
- Sexual – can include rape, sexual assault, sexual acts to which the person has not consented, could not consent to or was pressured into consenting to.
- Psychological or emotional – includes threats of harm or abandonment, deprivation or contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks.
- Financial and / or material – can include theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.
- Neglect / acts of omission – includes ignoring medical or physical care needs, failure to provide access to appropriate health, social or educational services, the withholding of the necessities of life such as medication, adequate nutrition or heating.

- Discrimination – includes racism, sexism, abuse based on a persons disability and other forms of harassment, slurs or similar treatment.

Symptoms/Indicators of Abuse:

Instructors/Volunteers will receive appropriate training/policies in the detection of abuse through symptoms, indicators and behaviour. These indicators are summarised as follows:

Physical Abuse:

- Unexplained bruising
- History of unexplained falls or minor injuries
- Slap, kick, pinch or finger marks
- Unexplained burns and scalds in unusual locations or of an unusual type
- Injury mark similar to an object
- Untreated medical problems
- Weight loss / complaints of hunger
- Dehydration
- Nervous/fearful watchfulness; fear of physical contact

Abuse in care settings:

- No flexibility in bed time / deliberate waking
- Left on toilet or commode for a long time
- Inappropriate restraint or restriction
- Lack of personal clothing or possessions
- People referred to or spoken to disrespectfully
- Deprived or stark environment and lack of stimulation

Sexual Abuse:

- Pain, itching, bruising or bleeding in the genital area
- Stained/bloodstained underclothes
- Bruises to the thighs and upper arms
- Change in usual behaviour for no apparent or obvious reason
- Discomfort when sitting or walking
- Sexually transmitted diseases
- Frequent infections
- Severe upset or agitation when being bathed, dressed, undressed or medically examined
- Pregnancy when unable to consent

Psychological / Emotional Abuse:

- Excessive fears
- Tearfulness
- Ambivalence about carer
- Fearful of the carer / avoiding eye contact or flinching on approach
- Unusual weight gain or loss / changes in appetite
- Low self esteem
- Insomnia or need for excessive sleep
- Emotional withdrawal
- High levels of anxiety, agitation or paranoia

Financial or material abuse:

- Unexplained or sudden withdrawal of money from accounts
- Unexplained or sudden inability to pay bills
- Person lacks belongings or services which they should be able to afford

- Missing personal property (jewellery, cash etc)
- Purchase of items the person does not require or use
- Recent changes of deed or title to property
- Extraordinary interest by family members or others in the vulnerable persons assets

Neglect: (not self neglect or refusing help)

- Neglect of accommodation
- Inadequate heat or light
- Poor physical condition e.g. malnourished, pressure sores, ulcers
- Inadequate or unclean clothing
- Failure to ensure privacy and dignity

Discrimination:

- Slurs and offensive remarks regarding ethnic origin, religion, culture, gender, sexual orientation, disability or age
- Discriminatory practices in service delivery

Action to be taken in the event of alleged/suspected Abuse:

The Vulnerable Adult Officer is designated as the key contact person within the club with direct responsibility for deciding on the appropriate action to be taken as directed by their local policies any alleged or suspected incidences of abuse. Any instructor/student/volunteer with concerns regarding possible abuse of a vulnerable adult will report the matter directly to the Vulnerable Adult Officer in accordance with the Whistle-blowing Policy.

N.B. If an allegation or suspicion relates to the named Vulnerable Adult Officer then club instructor should be approached.

Reporting such matters to agencies outside the club will take into account the balance which needs to be maintained for the confidentiality of the vulnerable person's affairs, the vulnerable person's capacity to consent to the matter being taken further and the duty of care to report suspected abuse.

The Vulnerable Adult officer will assess the allegations / suspicions and decide upon the appropriate action to be taken:

- If the incident is not considered to fit the criteria of abuse the Vulnerable Adult Officer they can deal with the situation directly.
- If the incident is considered to fit the criteria of abuse the Vulnerable Adult Officer or other senior person within the organisation should refer the matter to Social Services in accordance with the process outlined in the Multi-agency Policy, Procedures and Practice Guidelines for the Protection of Vulnerable Adults in Hull and the East Riding of Yorkshire.

In all cases, the Vulnerable Adults Officer is responsible for maintaining complete records of the allegations made, including dates, times and persons involved and actions taken. This action may be of two types:

- Corrective action – action to be taken against alleged or confirmed perpetrators (as set out in the disciplinary procedure) involved in incidents of abuse, and the discreet and sensitive handling of the abused person.
- Preventive action – strategies to be implemented with the objective of halting further abuse and / or limiting the opportunities for potentially abusive practices.