

SAFEGUARDING ADULTS POLICY

This policy will enable Kemfa care Services Limited to demonstrate its commitment to keeping safe the Service Users with whom it works alongside. Kemfa care Services Limited acknowledges its duty to act appropriately to any allegations, reports or suspicions of abuse. It is important to have the policy and procedures in place so that all members of our office staff, Service Users, carers and management can work to prevent abuse, know what to do in the event of abuse and can act to prevent further abuse.

The policy statement and procedures have been drawn up in order to enable Kemfa care Services Limited to:

- Promote good practice and work in a way that can prevent harm, abuse and coercion occurring to ensure that any allegations of abuse or suspicions are dealt with appropriately and the person experiencing abuse is supported.
- To stop that abuse occurring.

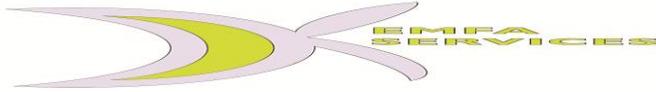
It is acknowledged that significant numbers of people are abused and it is important that Kemfa care Services Limited has a Safeguarding Adults policy, a set of procedures to follow which puts in place preventative measures to try and reduce that number.

In order to implement the policy Kemfa care will work:

- to promote the freedom and dignity of the person who has or is experiencing abuse.
- to promote the rights of all people to live free from abuse and coercion
- to ensure the safety and wellbeing of people who do not have the capacity
- to decide how they want to respond to abuse that they are experiencing
- to manage services in a way which promotes safety and prevents abuse
- recruit staff ensuring all necessary checks are made
- provide effective management for staff through supervision, support and training

Kemfa care Services Limited

- will ensure that all staff are familiar with this policy and procedures
- will work with other agencies within the framework of the Safeguarding Adults Policy and procedures, under 'No Secrets' guidance (DoH 2000)
- will inform Service Users that where a person is in danger or a crime has been committed then a decision may be taken to pass information to another agency without the Service User's consent
- will make a referral to the local authorities Adult Safeguarding Team by completing an 'AP1' form
- will Endeavour to keep up-to-date with national developments relating to preventing abuse and welfare of adults



- will ensure that the designated persons understand his or her responsibility to refer incidents of adult abuse to the relevant statutory agencies

The designated persons for Safeguarding Adults in Kemfa care Limited is either the Registered Manager (Emmanuel Adegboye) or the Care Manager (Emanuel Adegboye) who can be contacted on 01268726368. They should be contacted for support and advice on implementing this policy and associated procedures.

The roles and responsibilities of the named persons are:

- to ensure that all staff are aware of what they should do and who they should go to if they have concerns that someone may be experiencing, or has experienced abuse or neglect
- to ensure that concerns are acted on, clearly recorded and referred to the Basildon Adult Safeguarding Team where necessary
- to follow up any referrals and ensure the issues have been addressed any recommendations from the safeguarding adult process must be considered
- to reinforce the utmost need for confidentiality and to ensure that staff adhere to good practice with regard to confidentiality and security. This is because it is around the time that a person starts to challenge abuse that the risks of increasing intensity of abuse are greatest
- to ensure that staff working directly with Service Users who have experienced abuse, or who are experiencing abuse are well supported and receive appropriate supervision

This policy should be read in conjunction with the Basildon & Thurrock Multi-Agency Safeguarding Adults and Procedures document. These are kept in our office at

Basildon Enterprise Centre,
33 Noble Square,
Unit 26,
Basildon,
Essex,
SS14 1LT

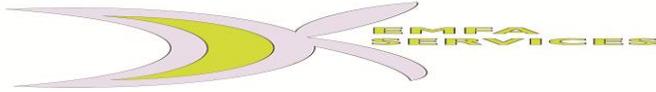
SAFEGUARDING ADULTS PROCEDURES:

Introduction

Kemfa care Services Limited provides a domiciliary care service to vulnerable people living in their own homes. These procedures have been designed to ensure the welfare and protection of any adult who accesses services provided by Kemfa care Services. The procedures recognise that adult abuse can be a difficult subject for carers to deal with. Kemfa care is committed to the belief that the protection of adults from harm and abuse is everybody's responsibility and the aim of these procedures is to ensure that all managers and staff act appropriately in response to any concern regarding adult abuse.

Preventing Abuse

Kemfa care Services is committed to putting in place safeguards and measures to reduce the likelihood of abuse taking place within the services it offers and that all those involved within Kemfa



care will be treated with respect. Therefore this policy needs to be read in conjunction with the following policies:

- Equal Rights and Diversity
- Complaints
- Whistle blowing
- Confidentiality
- Disciplinary and Grievance
- Data Protection
- Recruitment and Selection

Kemfa care is committed to safer recruitment policies and practices for all staff. This includes enhanced CRB disclosures for staff, ensuring references are taken up and the appropriate Safeguarding training is provided for all staff members. The organization will work within the current legal framework for reporting staff that are abusers and Service Users will be encouraged to give their opinion on the running of the organization. Information will be available about abuse (the Service Users will be provided with the leaflet ('Everybody's business') on joining Grace and the Safeguarding/Complaints policy will be available to all Service Users and their carers/families.

Recognizing the signs and symptoms of abuse

Kemfa care is committed to ensuring that all staff undertake training to gain a basic awareness of the signs and symptoms of abuse. Kemfa care will ensure that the designated named persons and other members of staff have access to Safeguarding training.

'Abuse is a violation of an individual's human and civil rights by any other person or persons' - No Secrets: Department of Health, March 2000

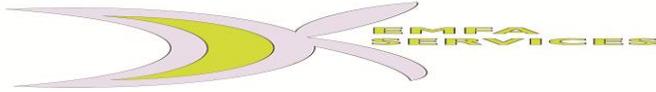
Physical Abuse:

Includes hitting, slapping, pushing, kicking, misuse of medication, being locked in a room, inappropriate methods of restraint, inappropriate sanctions or force feeding.

Indicators of Abuse

Physical Indicators of Abuse Include:

- Unexplained or inappropriately explained injuries
- Person exhibiting unexplained self-harm
- Unexplained cuts or scratches to mouth, lips, gums, eye, or external genitalia.
- Unexplained bruising to the face, torso, arms, back, buttocks, thighs in various stages of healing, collections of bruises that form regular patterns which correspond to a shape of an object or which appear on several areas of the body.
- Unexplained burns on unlikely areas of the body e.g. soles of the feet, palms of the hands and back, water immersion burns, burns from an electric appliance.
- Unexplained or inappropriately explained fractures at various stages of healing to any part of the body
- Medical problems that go unattended



- Sudden and unexplained urinary/faecal incontinence
- Evidence of over/under medication
- Person flinches at physical contact
- Person appears frightened or subdued at the presence of particular people

Sexual Abuse:

Includes rape and sexual assault acts that the vulnerable adult has not consented to or could not consent to or was pressured into. This may include incest and situations where the alleged abuser touches the abused person's body (e.g. breasts, buttocks, genital area), exposes his/her genitals (possibly encouraging the abused person to touch them) and to coerce the abused person into participating in or watching pornographic videos or photographs. Denial of a sexual life to consenting adults is also considered abusive practice. Any sexual relationship that develops between adults where one is in a position of trust, power or authority in relation to the other e.g. Health Worker or Social Worker may also constitute sexual abuse.

Sexual Indicators of Abuse Include:

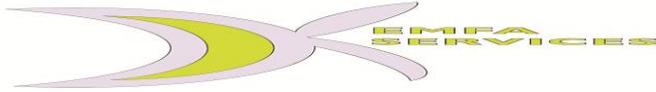
- Person has urinary tract infection, vaginal infections or sexually transmitted diseases that are not otherwise explained
- Person appears unusually subdued, withdrawn or has poor concentration
- Person exhibits significant change in behaviour or outlook
- Person experiences pain, itching or bleeding in the genital/anal area
- Persons underclothing is torn, stained or bloody
- A woman who lacks the mental capacity to consent to sexual intercourse becomes pregnant.

Psychological Abuse: (Emotional Abuse)

Includes threats of harm or abandonment, deprivation of contact, humiliation, rejection, blaming, controlling, intimidation, coercion, indifference, harassment, verbal abuse including shouting or swearing, isolation or withdrawal from services or support networks. Psychological abuse is the denial of a person's human and civil rights including, choice and opinion, privacy and dignity and being able to follow one's own spiritual and cultural beliefs or sexual orientation. It includes preventing the adult from using services that would otherwise support them and enhance their lives. Furthermore it includes the intentional and/or unintentional withholding of information e.g. information not being available in different formats/languages etc.

Psychological Indicators of Abuse Include:

- Untypical ambivalence, deference, passivity, resignation
- Person appears anxious or withdrawn, especially in the presence of the alleged abuser
- Person exhibits low self-esteem
- Untypical changes in behavior e.g. continence problems, sleep disturbance
- Person is not allowed visitors/phone calls
- Person is locked in a room in their home



- Person is denied access to aids or equipment, e.g. glasses, dentures, hearing aid, crutches
- Person's access to personal hygiene and toilet is restricted

Financial or Material Abuse:

Includes theft, fraud, exploitation, pressure in connection with Wills or property, or the misappropriation of property or benefits. It also includes the withholding of money or the unauthorised or improper use of a person's money or property, usually to the disadvantage of the person to whom it belongs. Staff borrowing money or objects from a Service User would also be considered abuse. Staff stealing money from a Service User.

Financial Indicators of Abuse Include:

- Lack of money, especially after benefit/pension day
- Inadequately explained withdrawals from accounts
- Disparity between assets/income and living conditions
- Power of Attorney obtained when the person lacks the capacity to make this decision
- Recent changes of deeds/title of house
- Recent acquaintances expressing sudden or disproportionate interest in the person and their money
- Service User not in control of their direct payment or their individualized budget.

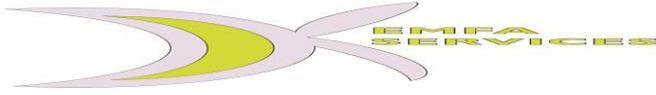
Neglect/Acts of Omission:

Neglect or 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. Neglect also includes a failure to intervene in situations that are dangerous to the person concerned or to others, particularly when the person lacks the mental capacity to assess risk for himself or herself. Neglect and poor professional practice may be isolated incidence and pervasive ill treatment and gross misconduct. It may happen within a person's own home. Repeated instances of poor care may be an indication of more serious problems.

Neglect Indicators of Abuse Include:

- Person has inadequate heating and/or lighting
- Person's physical condition/appearance is poor e.g. ulcers, pressure sores, soiled or wet clothing
- Person is malnourished, has sudden or continuous weight loss and/or is dehydrated
- Person can not access appropriate medication or medical care
- Person is not afforded appropriate privacy or dignity
- Person and/or carer have inconsistent or reluctant contact with Health and Social Services
- Caller/visitors are refused access to the person
- Person is exposed to unacceptable risk

Discriminatory Abuse:



Discriminatory abuse includes racist, sexist, homophobic, ageist comments or jokes or comments and jokes based on a person's disability or any other form of harassment. Any of the above forms of abuse with discrimination as a motive, not responding to dietary needs or not providing appropriate spiritual support. Excluding a person from activities on the basis they are not liked is also discriminatory abuse.

Discriminatory Indicators of Abuse Include:

Indicators for discriminatory abuse may not always be obvious and may be physical abuse/assault, sexual abuse/assault, financial abuse, neglect, psychological abuse/harassment so all indicators listed above may apply. As a result of discrimination someone may reject their own cultural background and/or racial origin. Be aware that the above lists are only an indication that abuse is happening and disclosure from an individual may well be offered. The presence of one or more of these signs does not confirm abuse.

However, the presence of one or a number of these indicators may suggest the potential for abuse and the situation must be investigated further.

- Person known to be isolated or regarded as vulnerable within the community
- Person has no independent advocate

In addition there is a certain factor, which may increase the risk of a person being financially abused.

- The existence of financial problems
- Person is eligible for high levels of benefit
- Person is unable to administer their own money due to lack of capacity/numeracy skills.

Multiple Forms of Abuse:

This may occur in an ongoing relationship or in an abusive service setting, to one person or to more than one person at a time, making it important to look beyond single incidents or breeches in standards, to underlying dynamics or pattern of harm. Any or all types of abuse may be perpetrated as a result of a deliberate attempt and targets of vulnerable people.

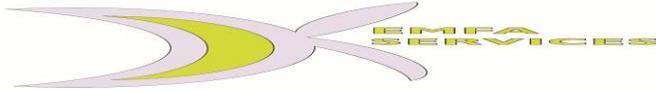
Recognition of Adult Abuse

Who may be the Abuser?

A vulnerable adult may be abused by a wide range of people including professional staff, family members, carers, neighbours, friends, associates, strangers and people who deliberately exploit older people. There is often particular concern if abuse is perpetrated by someone in a position of authority, who uses his or her position to their detriment.

Factors making Abuse more likely to Occur

There are some factors and situations that may place people at particular risk of being abused. The presence of one or more of these factors does not automatically suggest that abuse is happening or could happen, but they should be considered.



- Providing personal assistance may present more opportunity for abuse. E.g. where a person needs assistance in managing urinary and/or faecal continence
- Role reversal, e.g. daughter or son providing personal assistance for a parent may increase personal stress
- Living in the same household as a known abuser
- Where there is a family history of abuse

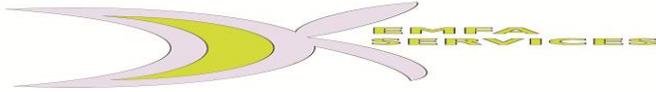
- Where there is a change in lifestyle of a member of the household, e.g. unemployment, employment, illness etc, which may increase stress
- Where an adult is dependent on others or others who are dependent on them
- A member of the household experiences emotional or social isolation
- Differences in communication or a breakdown in communication
- Person known to be isolated or regarded as vulnerable within the community
- Person has no independent advocate

If the Carers:

- Feel lonely, isolated and physically and emotionally exhausted
- Habitually lose their temper
- Have felt they cannot cope or continue to care for the Vulnerable Adult
- Perceive the Vulnerable Adult as being deliberately awkward
- Are unrealistic in their expectations leading to disappointment and increased risk of the person becoming a scapegoat
- Have to cope with behavioral and sexual problems in the Vulnerable Adult
- Have previously admitted to or have been seen to roughly handle the dependant
- Have diminished communication with the Vulnerable Adult either through choice or through incapacity
- Are living on a low income or in poor housing which is placing the family under extra stress
- Feel that family relationships over the years have been poor
- Have not been provided with sufficient resources from agencies
- See the person with the disability as inferior

If the Vulnerable Adult:

- Has hit out at the carer
- Cannot converse normally
- Is unable to communicate to explain what has happened to them
- Does not have English as their first language
- Disturbs the carer at night
- Lacks purposeful activity
- Exhibits odd or embarrassing behavior
- Is self-harming



- Is not helpful or co-operative
- Is rejecting and/or ungrateful
- Has a negative behavioural trait
- Regularly disappears from home
- Is less able to avoid abusive situations because of a physical disability
- Have high levels of personal care needs

The Health, Safety & Welfare of the Vulnerable Adult

Kemfa care have a responsibility towards all vulnerable adults who have been abused, but may also have a responsibility in relation to some perpetrators of abuse, this will vary depending on who the perpetrator is.

PROCEDURES:

Responding to people who have experienced or are experiencing abuse

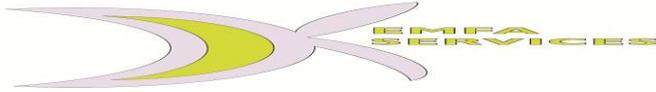
Kemfa care recognises that it has a duty to act on reports, or suspicions of abuse or neglect. It also acknowledges that taking action in cases of adult abuse is never easy.

How to respond if you receive an allegation:

- reassure the person concerned
- listen to what they are saying
- record what you have been told/witnessed as soon as possible
- remain calm and do not show shock or disbelief
- tell them that the information will be treated seriously
- do not start to investigate or ask detailed or probing questions
- do not promise to keep it a secret
- explain that what you have been told must be reported to your Manager, however, everything would be dealt with in the proper manner and they should not worry
- report straight away to the Care Manager of Kemfa care

If you witness abuse or abuse has just taken place the priorities will be:

- to call an ambulance if required
- to call the police if a crime has been committed
- to preserve evidence
- to keep yourself and the Service User safe
- to inform the designated named person in Kemfa care
- to record what happened and fill in a Company Incident Form



All situations of abuse or alleged abuse will be discussed with the designated named person. The alleged victim may be told that this will happen. This stage is called 'the alert'. If it is appropriate and there is consent from the individual, or there is a good reason to override consent, a referral will be made to the 'Adult Safeguarding Services Team' using an 'AP1' Form. If the individual experiencing abuse does not have capacity a referral will be made without that person's consent.

Managing allegations made against a member of staff:

Kemfa care Services will ensure that any allegations made against members or a member of staff will be dealt with swiftly. Where a member of staff is thought to have committed a criminal offence the staff member will be immediately suspended from work until further investigation. If a crime has been witnessed the police should be contacted immediately. The safety of the individual(s) concerned is paramount and it should be ensured that they are safe and away from the person(s) who are the alleged perpetrators.

The designated named persons will liaise with the local authorities Safeguarding Team to discuss the best course of action and to ensure that Kemfa care disciplinary procedures are co-ordinated with any other enquiries taking place as part of the ongoing management of the allegation.

Recording and Managing Confidential Information:

Kemfa care Services Ltd is committed to maintaining confidentiality wherever possible and information regarding Safeguarding Adults issues should be shared only with those who need to know. For further information please see Kemfa care Confidentiality Policy.

All allegations/concerns should be recorded in writing. The information should be factual and not based on opinions, record what the person tells you, what you have seen and witnessed if appropriate. The information that is recorded will be kept secure and will comply with data protection. This information will be secured in a locked filing cabinet in the organization's office. Access to this information will be by the designated named persons only.