

Safeguarding Policy – Quick Reference Guide

Pages:	Reference:	Details:
5 - 8	Safeguarding and legislation	Explain the law that underpins safeguarding in England and Wales.
8	Definition of Safeguarding	Clarifies what a Safeguarding is.
9 - 11	Persons affected and Types of Abuse	Notes who is affected and the types of Abuse you may encounter.
11 - 13	Helping Hands commitment to safeguarding outlined	Explains how Helping Hands is committed to safeguarding the Adults in our care.
14-15	Definitions of Section 42 enquiry and Safeguarding Adults Board	Outlines what a Section 42 is and what the Safeguarding Adults Board does.
15	Criminal Act	This section outlines that if a Criminal Act has taken place, it is very important not to start an investigation unless the Police/safeguarding Board have agreed.
16	Local safeguarding policy, Disclosure and Barring Service and Whistleblowing and Disciplinary measures	Discusses how important it is to use your local safeguarding board polices. The Disclosure and Barring Service process is outlined. Whistleblowing is explained and Disciplinary measures requiring HR input.
16 - 18	Complaints, Reporting and escalating a Disclosure.	How these should be applied.
18 - 19	Legality of Sharing Information and sharing information	This explains the legality around information sharing and how to share safely.
19 - 20	Media Interest and making safeguarding personal	This section explains that any media interest or likely interest in a safeguarding must be referred to the GMD as the Nominated Individual. Making safeguarding personal explains how the aim is to get the outcome desired by the person involved. It also outlines where outcomes desired may be an issue and to liaise with your QABP and Safeguarding lead.
20 - 21	Capacity, Consent and Best interests	The section outlines how the law is applied in relation to safeguarding's.

23	References and Associated Documents	Includes a link to Wales Safeguarding Procedures website (CIW)
The Appendices below show the Safeguarding processes to follow in England and Wales		
24	Appendix one - Internal Helping Hands Safeguarding Escalation Process v4 11/03/24	This appendix shows the internal process that must be followed when a safeguarding has been raised.
25	Appendix two - Deciding if you need to raise a safeguarding concern v1 06/09/23	This flow chart explains when you may need to raise a safeguarding.
26	Appendix three - Barring and Referral flow chart	This flow chart explains when you need to make a DBS referral.
27 - 32	Welsh Safeguarding procedures	The procedure outlines the contacts and processes for the individual areas of Wales.

Title of Document	Safeguarding Adults Policy		
Name of Department	Quality		

What type of document is this?	Policy	This sets out instructions for how a particular procedure in Helping Hands is to be routinely carried out	
Which Helping Hands POL/SOP/W. I does this document relate to?	Safeguarding Children Whistleblowing Policy Recruitment and Selection Policy Duty of Candour Duty of Candour Confidentiality Safeguarding Reporting Access Right Verification and Consent	Reference number of POL/SOP/ W. I	POL-036 POL-019 POL-038 POL-047 SOP-035 WI-046 WI-049 WI-055

Which Operational Priority/Priorities does this document link to?	Governance Framework	Superior Client Care	People, Performance & Culture	Business Growth

Custodian of document	Group Managing Director	Committee/Group responsible for this document	Policy Committee
Approval date and committee chairperson signature	25.03.2025	When is its next scheduled review?	25.03.2026

Who does it apply to?	All Helping Hands staff			
	Does it apply to bank workers?	Yes	Does it apply to agency staff?	Yes

Purpose of the Policy	To ensure comprehensive understanding among all staff regarding the identification and reporting of safeguarding concerns, as well as the implementation of measures to prevent serious safeguarding issues whenever feasible.		
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Role	Responsibility
All Managers and Branch and Service Staff	To ensure that all safeguarding concerns are reported and managed correctly. To advise staff members when required on what is a safeguarding concern and how they must escalate safeguarding concerns, and to whom. To support the Care Quality Commission (CQC) and the Care Inspectorate Wales (CIW) of notifiable safeguarding reports, logging on internal systems and notifying the CQC or CIW. To ensure the safety of all customers.
Carers	To ensure the proper reporting of any safeguarding concerns and to accurately identify safeguarding issues. To obtain guidance, when necessary, from line managers, the Quality team, the Clinical team, or the Safeguarding Lead.
Quality Team	To support all services with all Local Authority, CQC and CIW notifiable safeguarding reports and to ensure that all safeguarding reports are logged internally via the correct electronic notification form on Access.
Quality Director	To ensure that all monthly safeguarding reports are reported monthly to the Responsible Individual and trend analysis is completed quarterly. To ensure the Senior Leadership team support with high-risk cases needing legal advice.
Safeguarding Lead	To ensure that the Safeguarding Policy and Procedures are being followed by all staff. To support all services with all Local Authority, CQC and CIW notifiable safeguarding concerns. To support the Care Quality Commission (CQC) and the Care Inspectorate Wales (CIW) in the event of safeguarding concerns. To ensure the safety of all clients. To ensure that the requirements of the Nursing and Midwifery Council Code of Conduct relating to the safety of vulnerable people who may need protection or additional support are upheld at all times by the Clinical team.
Clinical Team	To advise staff members when required on what is a safeguarding concern and how they must escalate safeguarding concerns, and to whom. To support Care Quality Commission (CQC) and the Care Inspectorate Wales (CIW) of notifiable safeguarding reports, logging on internal systems and notifying the CQC or CIW. To ensure the safety of all clients. To ensure that the requirements of the Nursing and Midwifery Council Code of Conduct relating to the safety of vulnerable people who may need protection or additional support are upheld at all times.

1.0 Legislation and Regulation

1.1 The Care Act 2014

The six key principles:

1. Empowerment – people are supported and encouraged to make their own decisions and informed consent
2. Prevention – it is better to take action before harm occurs
3. Proportionality – the least intrusive response appropriate to the risk presented
4. Protection – support and representation for those in greatest need
5. Partnership – local solutions through services working with their communities. Communities have a part to play in preventing, detecting, and reporting neglect and abuse.
6. Accountability – accountability and transparency in delivering safeguarding.

1.2 Health and Social Care Act, 2008 (Regulated Activities) Regulations 2014

Regulation 12: Safe care and treatment

Regulation 12 aims to prevent people from receiving unsafe care and treatment and avoidable harm or risk of harm. To comply with this regulation, Helping Hands must assess the risks to people's health and safety during any care provided and ensure that staff have the qualifications, competence, skills, and experience to keep people safe. Additionally, Helping Hands must demonstrate that all reasonable steps have been taken to ensure the health and safety of their customers and to manage risks that may arise during their care. By developing an individual support plan for each customer, Helping Hands can identify their specific health conditions, care needs, equipment in use, environmental circumstances, and any associated risks. Helping Hands can take steps to mitigate these risks where possible, ensuring that the care they receive is personalised, safe, and appropriate for their needs. Ongoing care reviews and assessments are conducted as scheduled or when needs change to ensure that any concerns are identified. This includes when customers are first admitted to the service or if they temporarily leave and then return from another place of care or if care is shared with another provider.

To keep people who use the service safe and minimize any risks to their care and treatment, Helping Hands must be able to respond to and manage major incidents and emergency situations. This entails having contingency plans in place in case of adverse events such as fires, floods, major road traffic accidents, major incidents, or natural disasters.

Regulation 13: Safeguarding service users from abuse and improper treatment

Regulation 13 is intended to safeguard people who use services from suffering any form of abuse or improper treatment while receiving care and treatment. This includes discrimination or unlawful

restraint, as well as inappropriate deprivation of liberty under the terms of the Mental Capacity Act 2005. To meet the requirements of the regulation, Helping Hands has a zero-tolerance approach to any form of abuse, unlawful discrimination, or deprivation of liberty. Where such abuses are suspected, Helping Hands will respond as a matter of urgency and instigate appropriate actions such as investigations and internal or external referrals as necessary whilst aiming to protect the affected person from further harm and preventing future events where possible.

Regulation 18: Notification of other incidents

The intention of this regulation is to specify a range of events or occurrences that must be notified to CQC so that, where needed, CQC can take follow-up action.

As a regulated care provider, Helping Hands must notify CQC of all incidents that affect the health, safety and welfare of people who use our services. Failure to do so can result in a breach of regulation and possible prosecution.

The incidents referred to include any injury to a customer which, in the reasonable opinion of a health care professional, has resulted in: -

- An impairment of the sensory, motor, or intellectual functions of the customer which is not likely to be temporary (lasting more than 28 days). This includes impairments affecting sight, hearing, speech, smell, taste, or touch, problem solving, judgement making or thought processes and recall.
- Changes to the structure of a customer's body. This includes the development of a grade 3 or higher-pressure injury once a person has been admitted to a care service.
- The customer experiencing prolonged pain or prolonged psychological harm, or the shortening of the life expectancy of the service user. This includes post-traumatic stress disorder, psychosis or clinical anxiety or depression requiring treatment.
- Any injury to a customer which, in the reasonable opinion of a health care professional, requires treatment by that, or another, health care professional in order to prevent—the death of the service user, or an injury to the customer which, if left untreated, would lead to one or more of the outcomes mentioned above.

Regulation 20: Duty of candour

As a regulated care provider, Helping Hands is required by law to uphold the Duty of Candour. However, we strive to foster a culture of openness and transparency at all levels because we believe that this helps create a safe service. Our duty of candour means keeping our customers and their

advocates (if applicable) informed and updated. We also apologise if something goes wrong during the care we provide. Furthermore, we encourage all staff to report safeguarding concerns and use lessons learned from any events and near misses to identify areas where improvements to the safeguarding of our customers may be needed.

1.3 Health and Safety at Work etc Act 1974

This is occupational health and safety legislation in the workplace to protect staff and the public (our customers).

Care Inspectorate Wales (CIW)

1.4 The Regulation and Inspection of Social Care Act 2016 (RISCA)

Part 8: Requirements on service providers is to ensure that service providers have in place the mechanisms to safeguard vulnerable individuals to whom they provide care and support.

Regulation 26: The service provider must provide the service in a way which ensures that individuals are safe and are protected from abuse, neglect, and improper treatment.

Regulation 27: There is an up-to-date safeguarding policy and procedure in place. Safeguarding policies and procedures are aligned to current legislation, national guidance and local adult and children's safeguarding procedures.

1.5 Domestic Abuse Act 2021

Domestic abuse is the use of controlling, coercive, threatening behaviour, violence or abuse between intimate partners or family members.

The abuse can be psychological, physical, sexual, financial and emotional.

Both men and women can be victims of domestic abuse, and both men and women can be the abusers.

The wider definition will have implications for older people. It effectively extends the offence of coercive and controlling behaviour, and the definition of "personally connected" means it is no longer a requirement for abusers and victims to still be in a relationship or to still live together.

1.6 Mental Capacity Act 2005

There will be circumstances where an individual adult appears not to be able to make a decision about whether to consent to information being shared with others. The Mental Capacity Act and the associated code of practice contain guidance about the consideration of a person's capacity, or lack of capacity, to give consent to sharing information. The starting assumption must be that the person has capacity unless it is established that they do not, and only then after all practical

steps to help the person make the relevant decision have been taken but have been unsuccessful. An unwise decision taken by the relevant person does not mean they lack capacity.

Where a decision is made on behalf of the person who lacks capacity to share personal information, it must still comply with the requirements of the Data Protection Act and be in their best interests. Sharing health information can be a contentious area. There is guidance from your safeguarding lead.

2.0 Purpose and scope

Safeguarding and promoting the welfare of adults at risk of harm.

This policy defines how Helping Hands operates to safeguard adults at risk of abuse or neglect. We have a duty of care and are committed to the protection and safety of adults at risk when they are in receipt of our care. We also want to protect and support our staff who work with or come into contact with our customers. This policy and accompanying procedures are to be read alongside our Recruitment and Selection policy and procedures and our Equality and Diversity policy and procedures. We will act in accordance with local safeguarding procedures, The Care Quality Commission (CQC) and Care Inspectorate for Wales (CIW), The Care Act 2014 and the Domestic Abuse Act 2021.

3.0 Definitions

Adults at risk of abuse or neglect.

For the purposes of this policy, adult at risk refers to someone over 18 years old who, according to paragraph 42.1 of the Care Act 2014:

- Has care and support needs.
- Is experiencing, or is at risk of, abuse or neglect.
- As a result of their care and support needs is unable to protect himself or herself against the abuse or neglect or the risk of it.

If someone has care and support needs but is not currently receiving care or support from a health or care service, they may still be an adult at risk.

4.0 What is Safeguarding Adults

Safeguarding involves protecting an adult's right to live in safety, free from abuse and neglect. It requires people and organisations to collaborate in order to prevent and stop the occurrence of abuse or neglect, while also ensuring the well-being of the adult is promoted. This includes taking into account their views, wishes, feelings, and beliefs when making decisions. It's important to

acknowledge that adults may have complex relationships and may feel uncertain or have unrealistic perceptions about their own situations.

5.0 Persons Affected

- All staff, including salaried staff, who have direct or indirect contact with customers
- All customers
- All customers' family members and visitors to customers' homes or Helping Hands offices

Safeguarding is everyone's responsibility. All members of staff are required to report any suspected abuse and be aware of the appropriate reporting and support procedure for safeguarding. It is important that Staff are also aware of the Government's PREVENT strategy. The aim of this is to stop people becoming terrorists or supporting violent extremism in all its forms. This can also be a safeguarding issue but has different reporting mechanisms.

The Safeguarding Lead will discharge their safeguarding functions in a way that ensures that customers are safeguarded from harm and promotes their welfare. They are responsible for following up with the Quality Team and Registered Managers any suspected reports of abuse and for ensuring that the Police or other appropriate external bodies are informed as required.

6.0 Types of Abuse

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

6.1 Forced Marriage

A forced marriage is where one or both people do not (or in cases of people with learning disabilities or reduced capacity, cannot) consent to the marriage as they are pressurised, or abuse is used, to force them to do so. It is recognised in the UK as a form of domestic or child abuse and a serious abuse of human rights.

A pressure put on people to marry against their will may be:

- Physical – for example, threats, physical violence or sexual violence.
- Emotional and psychological – for example, making someone feel like they are bringing ‘shame’ on their family.
- Financial abuse - for example taking someone’s wages, may also be a factor.

The Anti-Social Behaviour, (Crime and Policy Act 2014) made it a criminal offence in England, Wales and Scotland to force someone to marry, this includes:

- Someone overseas to force them to marry (whether or not the forced marriage takes place).
- Marrying someone who lacks the mental capacity to consent to the marriage (whether they are pressured or not).

6.2 Honour Based Violence

Honour based violence is a crime or incident, which has or may have been committed to protect or defend the honour of the family and/or community. Such crimes cut across all cultures, nationalities, faith groups and communities. They transcend national and international boundaries.

Possible indicators of honour-based violence are:

- May include murder, un-explained death (suicide) fear of/or actual forced marriage.
- Controlling sexual activity, domestic abuse (including psychological, physical, sexual, financial, or emotional abuse) child abuse.
- Rape, kidnapping, false imprisonment, threats to kill, assault, harassment, forced abortion.

6.3 Female Gender Mutilation (FGM)

Female genital mutilation (FGM) is a procedure where the female genitals are deliberately cut. Injured or changed, but there’s no medical reason for this to be carried out. It is also known as female circumcision or cutting, and by other terms. FGM is usually carried out on young girls between infancy and the age of 15, most commonly before puberty starts.

The Female Genital Mutilation Act 2003 legislation requires regulated health and social care professionals in England and Wales to make a report to the police where, in the course of their professional duties they are either:

- Informed by a girl under 18 that an act of FGM has been carried out on her; or
- Observe physical signs which appear to show that an act of FGM has been carried out on a girl under 18 and they have no reason to believe that the act was necessary for the girl’s physical or mental health or for the purpose connected with labour or birth.

6.4 Hate Crime

Hate crimes are any crimes that are targeted at a person because of hostility or prejudice towards that person's disability, race, ethnicity, religion, belief or sexual orientation transgender identity. This can be committed against a person or property.

6.5 Elder Abuse

Elder abuse refers to intentional or negligent acts by a carer or trusted individual that causes harm to an older person. Elder abuse takes many forms, including financial exploitation, physical abuse and emotional abuse.

7.0 Our Commitments to Safeguarding

Helping Hands has a zero-tolerance approach to abuse. Under the Care Act 2014, Helping Hands recognises its duty to care for and protect adults at risk of abuse. It is committed to promoting wellbeing, preventing harm, and responding effectively to any raised concerns. Swift and personalised safeguarding responses will be provided to adults.

Furthermore, Helping Hands is committed to collaborating with other agencies to develop and implement procedures for protecting adults at risk from abuse. It has a duty to ensure all its functions are carried out with regard to safeguarding and promoting the adults at risk of abuse. This policy aims to stop abuse where it is happening and prevent abuse where there is a risk that it may occur.

There are no excuses for not taking reasonable action to protect adults at risk from abuse, exploitation, radicalisation, and mistreatment. All citizens of the United Kingdom have their rights protected under the Human Rights Act 1998. People eligible to receive health and community care services may be additionally vulnerable to the violation of these rights due to disability, impairment, age, or illness.

This policy, along with its associated documents, is supported by the Helping Hands Recruitment and Selection Policy and Procedure, which embeds the Key Safeguarding Employment Standards. These standards aim to ensure that children, young people, and vulnerable adults, when placed in the care of others, are treated with respect and are free from all forms of abuse or mistreatment. The Skills for Care Code of Conduct outlines best practice behaviours for adult social care workers, and the Care Certificate defines the minimum standards for knowledge and skills for care staff. These are measurable ways for Helping Hands to ensure that their employees are all working to the same expected standards and to embed a culture of safe and effective care.

We are committed to and follow the six key principles (1.1) of safeguarding adult's work.

Helping Hands Home Care is committed to the following:

- The welfare of the adult at risk is paramount.

- All adults at risk have the right to protection from abuse.
- Safeguarding is everyone's responsibility: for services to be effective each professional and organisation should play their full part; and
- All suspicions and allegations of abuse must be properly reported to the relevant internal and external authorities and dealt with swiftly and appropriately.
- Arrangements which set out clearly the processes for sharing information procedures with other professionals as well as the adult affected or their advocate.
- Staff must be clear on appropriate behaviour and responses. Where appropriate, failure by staff to maintain standards may be dealt with using Helping Hands Home Care Disciplinary Procedures.
- Clear whistleblowing procedures are suitably referenced in staff training and codes of conduct, and a culture that enables issues about safeguarding and promoting welfare to be addressed.
- All staff are aware of the policy and procedures for the safeguarding and protection of adults at risk through appropriate safeguarding training and supervision, creating an environment where staff feel able to raise concerns and feel supported in meeting their safeguarding role.
- Staff are given a mandatory induction, which includes familiarisation with safeguarding responsibilities and procedures to be followed if anyone has any concerns.
- Adult Safeguarding training is mandatory for all salaried staff and carers and requires refresher training to be completed annually.
- All staff should have regular reviews of their own practice to ensure they have a good understanding in their work with adults at risk of abuse and their families. This should take place during the appraisal and supervision processes and through completing regular mandatory safeguarding training.
- Any learning points are circulated through team meetings or the Weekly Bulletin.
- A clear line of accountability for the provision of safe services exists.

The Quality Director along with the Safeguarding Lead is to take responsibility for safeguarding arrangements:

- A designated lead for safeguarding is appointed.
- Safe recruitment practices are in place, including policies on when to obtain a DBS check and what safeguards are in place for staff who are waiting for DBS checks to be completed.

Helping Hands Home Care will ensure that staff understand:

- What they need to do, and what they can expect of one another, to safeguard adults at risk of abuse using this policy. The policy is provided at Induction and available on the internal policy site.
- Core legal requirements, making it clear what individuals and Helping Hands should do to keep adults at risk of abuse and employees safe. In doing so, Helping Hands seeks to emphasise that effective safeguarding systems are those where:
 - All staff who come into contact with adults at risk of abuse and their advocates are alerted to their needs and any risks of harm that individual abusers, or potential abusers may pose.
 - The requirement to share appropriate information in a timely way and can discuss any concerns about an individual adult with colleagues and Local Authority Adult Social Care Service.
 - The necessity to use their expert judgement to put the adult's needs at the heart of the safeguarding system so that the right solution can be found for everyone.
 - The necessity to contribute to whatever actions are needed to safeguard and promote a person's welfare.
- All staff working with adults at risk are afforded a position of status and authority in relation to the customer. Care services will be provided in an environment which lessens the imbalance of power and encourages independence and self-advocacy for customers. All working practices will minimise the risk of abuse by being sensitive to individual, gender, and cultural needs.
- We recognise that abuse is a symptom of social, institutional, and individual discrimination. Disabling attitudes and practices allow for the belief that it is somehow acceptable to treat vulnerable people with little respect and for people not to be informed, consulted, included, or empowered in order to exercise choice and take decisions which affect their lives. Preventing discrimination is essential to abuse prevention. We are committed to work within our organisation, the services we provide, and in partnership to promote the rights of our customers.

8.0 Section 42

The Care Act, 2014 gives a clear legal framework as to how local authorities should act in the protection of adults who are at risk of abuse or neglect. Under Section 42 of The Care Act, 2014 local authorities are required to make proportionate enquiries (or to make sure that, as the lead agency, enquiries are carried out by the relevant organisation) where there is a concern about the possible abuse or neglect of an adult at risk. The Local Authority will lead the Section 42 enquiry. The particular circumstances of each individual case will determine the scope of each enquiry, as well as who leads it and the form it takes. The Local Authority may decide that another organisation should carry out the enquiry, but the Local Authority will retain overall accountability. This may or may not be preceded by an informal information-gathering process if that is necessary to find out whether abuse has occurred or is occurring and therefore whether the Section 42 duty applies.

An enquiry may be a conversation with the individual concerned (or with their representative or advocate). It may need the involvement of another organisation or individual. Or it may require a more formal process, perhaps leading to a formal multi-agency plan to ensure the wellbeing of the adult concerned. Whatever form the enquiry takes, the following must be recorded:

- details of the safeguarding concern and who raised it
- the views and wishes of the adult affected, at the beginning and over time, and where appropriate the views of their family
- any immediate action agreed with the adult or their representative
- the reasons for all actions and decisions
- details of who else is consulted or the concern is discussed with
- any timescales agreed for actions
- sign-off from a line manager and/or the local safeguarding lead or designated adult safeguarding manager.

Non-statutory enquiries (known as 'other safeguarding enquiries') may also be carried out or instigated by local authorities in response to concerns about carers, or about adults who do not have care and support needs but who may still be at risk of abuse or neglect and to whom the Local Authority has a 'wellbeing' duty under Section 1 of the Care Act 2014.

9.0 Safeguarding Adults Boards

The purpose of a Safeguarding Adults Board (SAB) is to help and safeguard adults with care and support needs. It does this by:

- assuring itself that local safeguarding arrangements are in place as defined by the Care Act 2014 and statutory guidance

- assuring itself that safeguarding practice is person-centred and outcome-focused working collaboratively to prevent abuse and neglect where possible
- ensuring agencies and individuals give timely and proportionate responses when abuse or neglect have occurred
- assuring itself that safeguarding practice is continuously improving and enhancing the quality of life of adults in its area.

SABs have three core duties. They must:

- develop and publish a strategic plan setting out how they will meet their objectives and how their member and partner agencies will contribute
- publish an annual report detailing how effective their work has been
- commission safeguarding adult's reviews (SARs) for any cases which meet the criteria for these.

To meet their core duties and objectives, SABs will require information including general and personal data. Personal data is needed to undertake, for example, safeguarding adult's reviews and general data is needed to identify trends and patterns in safeguarding activity, abuse and neglect. The grounds on which SABs can require information to be supplied to them are specified in Section 45 of the Care Act. Legal advice may need to be sought on how to enforce this power effectively.

Multi-agency working, information-sharing and clear and open communication processes are key to good safeguarding practice. There may be overlap between approaches and processes to safeguard people. The SAB should be satisfied that there are clear mechanisms for managing this.

The effectiveness of SABs is dependent on collaborative working between board members, and between the SAB and other boards and partner agencies such as a police force or community interest care provider. Collaborative working may be complicated by a range of factors, such as geographical area covered by different agencies, statutory responsibilities, accountabilities and priorities of different agencies and different IT systems in use, which can affect timely information sharing. SABs need to recognise these factors and work through them. However, due to the Care Act 2014 other boards and partner agencies have a duty to cooperate with a SAB.

10.0 Criminal Act

If a criminal act of abuse is suspected internal investigations should not be carried out until agreement has been given by the Police and local authority safeguarding team.

11.0 Local Safeguarding Policy

Local safeguarding policies should always be referred to as they do differ across the UK. All Registered Managers should have a copy of their local safeguarding policy available and ensure that this is followed.

For Wales Helping Hands safeguarding contacts, Local Authority contact details and referral processes, **see Appendices Four, Five and Six.**

12.0 Disclosure and Barring Service

Upon completion of safeguarding investigation, if evidence points to the allegation of abuse to be true against a member of staff, they may need to be reported to the Disclosure and Barring Service (DBS) if they meet the criteria. Contact your HR Advisor for advice. (**See Appendix Three – Barring Referral Flow Chart.**)

Any staff member who resigns from Helping Hands prior to completion of a safeguarding investigation where the allegation is against them will be reported to the Disclosure and Barring Service (DBS) as a matter of urgency if they meet the criteria. Additional notification will be made to other relevant professional bodies such as the Nursing and Midwifery Council as necessary. (**See Appendix Three – Barring Referral Flow Chart.**)

13.0 Whistleblowing

This is the term used when a worker reports information about wrongdoing. The wrongdoing will typically (although not necessarily) be something they witnessed while they were at work. A member of staff might report that a colleague has failed to follow correct procedures for moving and handling, not recorded medication given, or not followed the organisation's guidance on managing money or risks to staff or other people. Whistleblowing may include disclosure of safeguarding issues. The Helping Hands Whistleblowing Policy clearly outlines the correct whistleblowing procedure and recognises that it is important to ensure that all whistleblowing concerns are treated seriously by creating a culture of transparency.

14.0 Disciplinary measures

Ignoring and not reporting safeguarding concerns may result in disciplinary measures. Any decision regarding potential disciplinary actions should be made in consultation with the Helping Hands HR team and must not compromise the safe treatment and care of customers.

15.0 Complaints

Upon receiving a complaint, we may need to decide whether it falls under the Helping Hands Complaints Policy or if it should be handled as a safeguarding incident. In the same way, a

safeguarding alert may not necessarily involve abuse or neglect and should be considered a complaint. Advice should be sought from the Police if there's a potential crime or an allegation of a crime having been committed.

16.0 Reporting and Escalating a Disclosure

Before you can report and escalate a disclosure, it's important to know the main principles and what information you should share.

When making decisions about what information to share, the most important consideration is whether sharing information is likely to support the safeguarding and protection of an adult/child. So, keep these principles in mind:

Principles

- **Necessary and Proportionate:** When making decisions about what information to share, consider how much information you need to release. Anything you share from the disclosure must be proportionate to the need and level of risk.
- **Relevant:** Only share relevant information to those who need it. This will allow others to do their job effectively and make informed decisions.
- **Adequate:** The information you share needs to be of the right quality so it can be understood and relied on.
- **Accurate:** Information must be accurate, up to date and should clearly explain what's fact and what's an opinion. If the information you have is historical, make sure to explain it.
- **Timely:** To reduce the risk of missed opportunities and offer support and protection to an Adult, information should be shared in a timely manner. Timeliness is key in emergency situations, and it might not be appropriate to seek consent for information sharing if it can cause delays and put an Adult or young person at an increased risk of harm. Ensure that enough information is shared as well as the urgency with which to share it.
- **Secure:** The information should be shared appropriately and securely.
- **Record:** You should record information sharing decisions, and whether the decision is taken to share. If the decision is to share, reasons should be cited, such as what information has been shared and with who in line with your workplace procedures. Any information you do have should also not be kept longer than necessary.

See Appendix One – Internal Helping Hands Safeguarding Escalation Process and Appendix Two – Deciding if You Need to Raise a Safeguarding Concern

17.0 Legality of Sharing Information

The General Data Protection Regulation, the Data Protection Act 2018 and human right law don't limit justified information sharing for the purposes of keeping people safe. They provide a framework to ensure personal information is shared appropriately.

Be open with the individual and seek their agreement - unless it's unsafe or inappropriate to do so.

If in doubt, seek advice from the safeguarding lead or local safeguarding board.

Where possible, share information with consent and respect the wishes of those who don't consent to have their information shared. Consider safety and wellbeing. Information sharing must be necessary, proportionate, relevant, adequate, accurate, timely and secure. Record decisions and reasons. Following the guidelines above will help you if you are ever a part of a disclosure. The next step is equally as important as you will need to record all this sensitive information and then escalate it to the relevant people.

18.0 Sharing Information

When you're asked to share information, you need to consider the following questions to help you decide if and when to share. Is there a clear and legitimate purpose for sharing information? Do you have consent to share? Does the information enable an individual to be identified? Have you identified a lawful reason to share information without consent? How you should share information. In relation to how you should share information, consider these issues as well. Identify how much information you will share. Separate facts from opinions. Ensure you give the right information to the right individual. Ensure that you share the information securely. Be transparent and inform them that the information has been shared. When you're asked to share information, you need to consider the following questions to help you decide if and when to share:

- Is there a clear and legitimate purpose for sharing information?
- Do you have consent to share?
- Does the information enable an individual to be identified?
- Have you identified a lawful reason to share information without consent?

All Helping Hands employees are obliged to follow General Data Protection Regulations (GDPR) under the Data Protection Act 2018. Information regarding safeguarding concerns should only be shared on a 'need to know' basis, and confidentiality should always be maintained. All staff

involved in safeguarding concerns should be mindful that investigations may be compromised through inappropriate information sharing and the sharing of sensitive information that is part of an ongoing investigation may result in a breach of GDPR and disciplinary or legal action.

Information should be securely shared using the *DataRequest* inbox, where information will be redacted if necessary and password protect the document.

19.0 Media interest

Helping Hands is aware that safeguarding incidents, can, on occasion generate interest from local or national media. Employees should not offer any information regarding Helping Hands, its staff or customers without authorisation from the Group Managing Director/Chief Marketing Officer.

20.0 Making Safeguarding Personal

- As an organisation we follow Making Safeguarding Personal principles.
- Making Safeguarding Personal is a shift in culture and practice in response to what we now know about what makes safeguarding more effective from the perspective of the person being safeguarded. It is about seeing people as experts in their own lives and working alongside them in a way that is consistent with their rights and capacity and that prevents abuse occurring wherever possible.
- Safeguarding should focus on the individual and their desired outcomes. It's important to involve the at-risk adult in a conversation about how to address their safeguarding situation. This approach enhances their involvement, choice, and control, and ultimately improves their quality of life, well-being, and safety. In most cases, meeting people's care and support needs is essential. It's also crucial to provide support and recognition to those who care for them. Above all, it's about listening and offering options that empower individuals to help themselves.
- It is imperative that all safeguarding partners adopt a comprehensive community-based approach in the establishment of safeguarding arrangements. It is essential for all organisations to acknowledge that safeguarding adult arrangements serve the purpose of protecting individuals, considering their diverse preferences, histories, circumstances, and lifestyles.
- To evidence that the safeguarding process is personalised, it is necessary to collect information about the extent to which this shift has a positive impact on people's lives.

- Whilst every effort must be made to work with adults experiencing abuse within the present legal framework there will be some occasions on which adults at risk will choose to remain in dangerous situations. It may be that even after scrutiny of the legal framework, staff will conclude that they have no power to gain access to a particular adult at risk. Staff may find that they have no power to remove the adult from a situation of risk, investigate the adult's financial affairs, or intervene positively because the adult refuses all help or wants to terminate contact with the professionals.

It may not always be possible to provide satisfactory solutions. At the age of 18, people are legally entitled to adult status regardless of any disability or impairment they may have. It is, therefore, essential that wherever possible it is the adult at risk who will decide on the chosen course of action, considering the impact of the adult at risk's mental capacity where relevant. However, the people and organisations caring for, or assisting them, must do everything they can to identify and prevent abuse happening wherever possible and evidence their efforts.

In these extremely difficult circumstances, staff will be expected to continue to exercise as much vigilance as possible.

The Senior Leadership Team will give full support to staff over problems when handling cases of adults remaining in high-risk situations, provided that:

- It is evident from case records that Safeguarding Adults procedures have been properly followed.
- Every effort has been made, on a multi-agency basis, to intervene positively to protect the adult at risk.
- Legal advice has been obtained and acted upon.
- And ultimately that the adult at risk has been fully consulted and involved as far as practicable in every decision relating to their situation.

In situations as above, please do involve your Safeguarding Lead and Quality Assurance Business Partner for advice.

21.0 Capacity, Consent and Best Interests.

The consideration of capacity is crucial at all stages of Safeguarding Adults procedures. For example, determining the ability of an adult at risk to make lifestyle choices, such as choosing to remain in a situation where they risk abuse; determining whether a particular act or transaction is abusive or consensual; or determining how much an adult at risk can be involved in making decisions in each situation.

The key development affecting this area of work is the implementation of the Mental Capacity Act 2005, which provides a statutory framework to empower and protect adults at risk who may not be able to make their own decisions. It makes it clear who can take decisions in which situations

and how they should go about this. It enables people to plan for a time when they may lose capacity. It applies to anyone aged 16 years and over, therefore appropriate liaison needs to occur for young people aged 16 to 18 years with Children's Services where relevant as part of Safeguarding Adults work.

The whole Act is underpinned by a set of five key principles:

- A presumption of capacity - every adult has the right to make his or her own decisions and must be assumed to have capacity to do so unless it is proved otherwise.
- The right for individuals to be supported to make their own decisions - people must be given all appropriate help before anyone concludes that they cannot make their own decisions.
- That individuals must retain the right to make what might be seen as eccentric or unwise decisions.
- Best interests - anything done for or on behalf of people without capacity must be in their best interests; and
- Least restrictive intervention - anything done for or on behalf of people without capacity should be the least restrictive of their basic rights and freedoms.

Helping Hands encourages you to report safeguarding's to protect vulnerable adults at risk of harm from abuse.

TRAINING

Is training required?	Safeguarding and GDPR
Details of training	<p>Safeguarding Adults awareness training is currently mandatory for all salaried staff in the form of annual online training. This is currently evidenced on the employees electronic training records on the Academy system.</p> <p>Any manager conducting a safeguarding investigation should be supported by the Safeguarding Lead.</p> <p>GDPR awareness training is currently mandatory annually for salaried staff. This is currently evidenced on the employees electronic training records on the Academy system. For frontline care staff, handling information is completed within the Care Certificate.</p> <p>Frontline care staff should complete the Care Certificate within 12 weeks of commencing their role as a Carer. This is essential training for care workers and includes modules for Adult Safeguarding and Duty of Care.</p>

	Frontline care staff should complete the Care Certificate within 12 weeks of commencing their role as a Carer. This is essential training for care workers and includes modules for Adult and Children Safeguarding and Duty of Care. Frontline care staff also completed a Safeguarding awareness module at the beginning of their employment and annually thereafter.
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COMPLIANCE

How is compliance with the POL going to be monitored	Compliance will be monitored through the use of Analytics reporting and Audits.
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EQUALITY IMPACT ASSESSMENT AND PROCEDURAL INFORMATION

	Yes / No	Comments
Does the document have a positive or negative impact on one group of people over another on the basis of their:		
• age?	Y	Positive Impact
• disability?	Y	Positive Impact
• gender reassignment?	Y	Positive Impact
• pregnancy and maternity (which includes breastfeeding)?	Y	Positive Impact
• race (including nationality, ethnic or national origins or colour)?	Y	Positive Impact
• marriage or civil partnership?	Y	Positive Impact
• religion or belief?	Y	Positive Impact
• sex?	Y	Positive Impact
• sexual orientation?	Y	Positive Impact
If you have identified any potential impact (including any positive impact which may result in more favourable treatment for one particular group of people over another), are any exceptions valid, legal and/or justifiable?	Y	Positive Impact, The SOP ensures that all groups are dealt with fairly with compassion, and that actions which may be necessary are done fairly.
If the impact on one of the above groups is likely to be negative:		
• Can the impact be avoided?	N/A	
• What alternatives are there to achieving the document's aim without the impact?	N/A	
• Can the impact be reduced by taking different action?	N/A	
• Is there an impact on staff, client or someone else's privacy?	N/A	<i>If yes, privacy impact assessment required</i>

What was the previous version number of this document?	01
Changes since previous version	Added reference to page 23 in the contents to highlight Wales Safeguarding Procedures Reviewed and amended the following appendices:

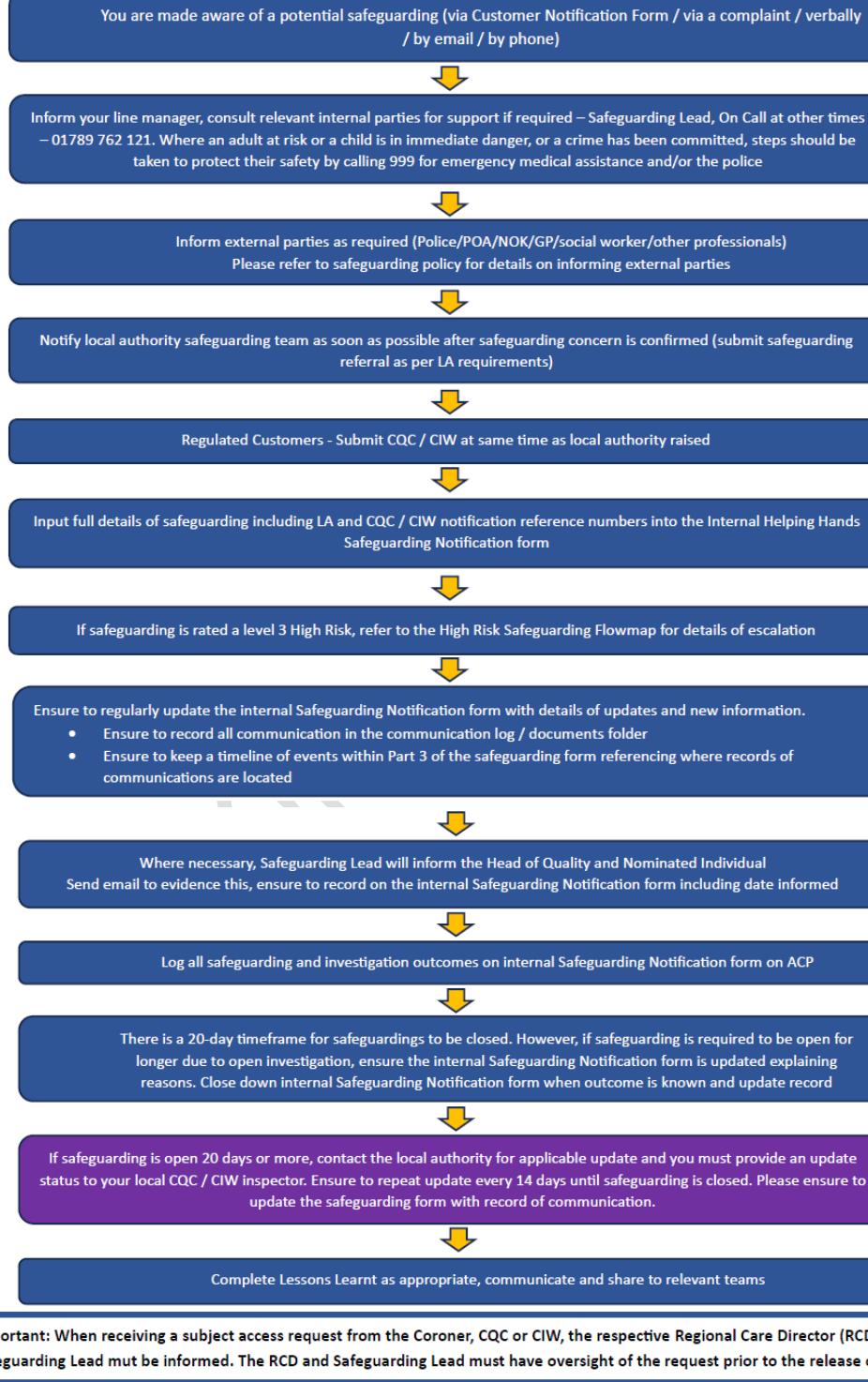
	Appendix one – flow chart more robust including details related to recording and update safeguarding forms Appendix four – updated dated with Safeguarding Lead contact details.
Author of the document	Safeguarding Lead
Who was involved in developing/reviewing /amending the POL?	Safeguarding Lead Quality Director Operations Quality Development Lead
How confidential is this document?	Public Can be shared freely within and outside of Helping Hands

References	England The Care Act 2014 Health and Social Care Act 2008 (regulated Activities) Regulations 2014 Care Quality Commission (Registration) Regulations 2009 Wales Social Services Well-Being (Wales) Act 2014 Regulation and Inspection of Social Care (Wales) Act 2016 The regulated Services (Service Providers and Responsible Individuals) (Wales) Regualtions 2017 Wales Safeguarding Procedures - https://safeguarding.wales/
Associated Documents	HHH-POL-019 - Whistleblowing Policy HHH-POL-001 - Complaints Policy HHH-POL-033 - Mental Capacity Act Policy HHH-POL-036 - Safeguarding Children Policy HHH-SOP-001 - Data Protection Policy HHH-POL-047 - Duty of Candour Policy HHH-SOP-035 - Duty of Candour Standard Operating Procedure HHH-POL-038 - Recruitment & Selection Policy HHH-W.I-046 - Confidentiality Work Instruction HHH-W.I-055 - Access Right Verification and Consent

Appendices

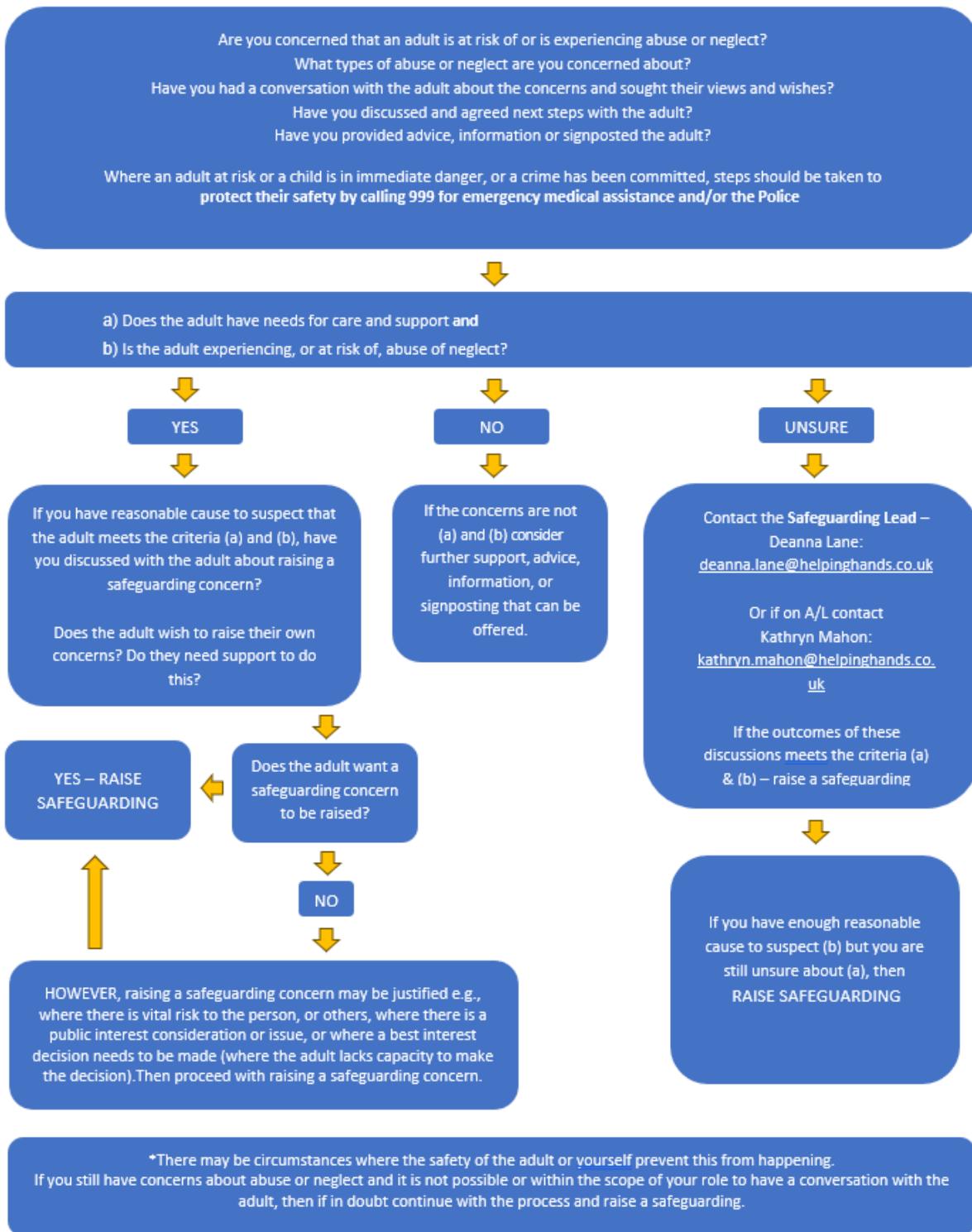
Appendix One

Internal Helping Hands Safeguarding Escalation Process



Appendix Two

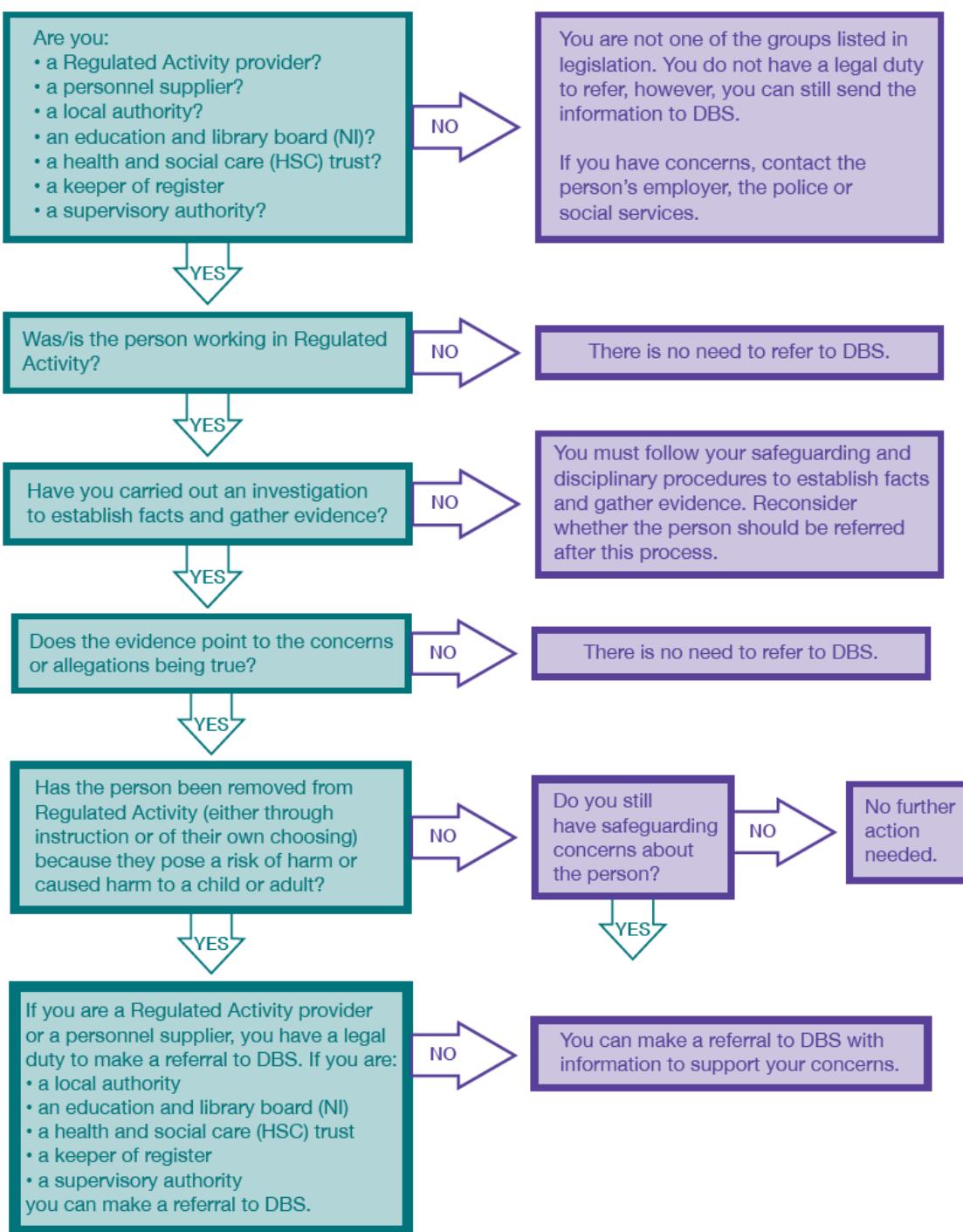
Deciding if You Need to Raise a Safeguarding Concern



Appendix Three – Courtesy of Gov.uk - Disclosure & Barring Service

Barring referral flow chart

We have put together the following flow chart to help you decide if it is appropriate to refer someone to us.



Appendix Four

Wales - Helping Hands Safeguarding Lead Contacts

Cardiff and Vale

- *Lead Contact: Lianne Panting - Safeguarding Lead*
- *Email: lianne.panting@helpinghands.co.uk*
- *Alternative Lead Contact: Claire Garside - Area Care Manager*
- *Email: claire.garside@helpinghands.co.uk*

Cwm-Taf

- *Lead Contact: Lianne Panting - Safeguarding Lead*
- *Email: lianne.panting@helpinghands.co.uk*
- *Alternative Lead Contact: Claire Garside - Area Care Manager*
- *Email: claire.garside@helpinghands.co.uk*

Gwent

- *Lead Contact: Lianne Panting - Safeguarding Lead*
- *Email: lianne.panting@helpinghands.co.uk*
- *Alternative Lead Contact: Claire Garside - Area Care Manager*
- *Email: claire.garside@helpinghands.co.uk*

North Wales

- *Lead Contact: Lianne Panting - Safeguarding Lead*
- *Email: lianne.panting@helpinghands.co.uk*
- *Alternative Lead Contact: Claire Garside - Area Care Manager*
- *Email: claire.garside@helpinghands.co.uk*

Powys

- *Lead Contact: Lianne Panting - Safeguarding Lead*
- *Email: lianne.panting@helpinghands.co.uk*
- *Alternative Lead Contact: Claire Garside - Area Care Manager*
- *Email: claire.garside@helpinghands.co.uk*

West Wales

- *Lead Contact: Lianne Panting - Safeguarding Lead*
- *Email: lianne.panting@helpinghands.co.uk*
- *Alternative Lead Contact: Claire Garside - Area Care Manager*
- *Email: claire.garside@helpinghands.co.uk*

Western Bay

- *Lead Contact: Lianne Panting - Safeguarding Lead*
- *Email: lianne.panting@helpinghands.co.uk*
- *Alternative Lead Contact: Kyle Williams-Roach - Branch Care Manager*

- Email: kyle.williams-roach@helpinghands.co.uk

Appendix Five

Wales – Local Authority Safeguarding Referral Contact Details

Cardiff and Vale: www.cardiffandvalersb.co.uk/adults/contact-adult-board/

Cardiff

- Tel: 02922 330 888
- Email: safeguardingadults@cardiff.gov.uk

Vale of Glamorgan

- Tel: 01446 700 111
- Email: adultsafeguarding@valeofglamorgan.gov.uk

<mailto:DutyTeamAdults@blaenau-gwent.gov.uk>

Cwm-Taf: www.cwmtafmorgannwg safeguardingboard.co.uk/En/Adults

Rhondda Cynon Taf

- Tel: 01443 425 003

Merthyr Tydfil

- Tel: 01685 725 000

Bridgend

- Tel: 01656 642 477

Cwm-Taf outside of office hours Emergency Duty Team: 01443 743 665

Gwent: www.gwentsafeguarding.org.uk/en/report-an-adult-at-risk

Blaenau Gwent

- Tel: 01495 315 700
- Email: DutyTeamAdults@blaenau-gwent.gov.uk

Caerphilly

- Tel: 0808 100 2500
- Email: IAAAdults@caerphilly.gov.uk

Torfaen

- *Tel: 01495 762 200*
- *Email: socialcarecalltorfaen@torfaen.gov.uk*

Newport

- *Tel: 01633 656 656*
- *Email: firstcontact.adults@newport.gov.uk or pova.team@newport.gov.uk*

Monmouthshire

- *Tel: 01873 735 492*
- *Email: MCCadultsafeguarding@monmouthshire.gov.uk*

Gwent outside of office hours Emergency Duty Team: 0800 328 4432

North Wales: www.northwalessafeguardingboard.wales

Anglesey

- *Tel: 01248 750 057*
- *Outside of office hours Emergency Duty Team: 01248 353551*

Gwynedd

- *Tel: 01766 772 577*
- *Outside of office hours Emergency Duty Team: 01248 353 551*

Conwy

- *Tel: 0300 456 1111*
- *Outside of office hours Emergency Duty Team: 0300 123 3079*

Denbighshire

- *Tel: 0300 456 1000*
- *Outside of office hours Emergency Duty Team: 0345 053 3116*

Flintshire

- *Tel: 03000 858 858*
- *Outside of office hours Emergency Duty Team: 0845 053 3116*

Wrexham

- *Tel: 01978 292 066*
- *Outside of office hours Emergency Duty Team: 0345 053 3116*

Powys: www.cysur.wales/contacts-and-useful-links/reporting-concerns-adult

- *Tel: 01597 827 666*
- *Email: people.direct@powys.gov.uk*

West Wales: www.cysur.wales/contacts-and-useful-links/reporting-concerns-adult

Carmarthenshire

- *Tel: 0300 333 2222 / 01554 756 741*
- *Email: cat@carmarthenshire.gov.uk*

Ceredigion

- *Tel: 01545 574 000*
- *Email: contact-socservs@ceredigion.gov.uk*
- *Outside of office hours Emergency Duty Team: 0845 601 5392*

Pembrokeshire

- *Tel: 01437 776 056*
- *Email: adult.protection.team@pembrokeshire.gov.uk* <mailto:adult.protection.team@pembrokeshire.gov.uk>
- *Outside of office hours Emergency Duty Team: 0300 333 2222* <mailto:socialcarecalltorfaen@torfaen.gov.uk>

Western Bay: www.wgsb.wales/30934

Swansea

- *Tel: 01792 636 519 / 636 854*
- *Email: CAP@swansea.gov.uk*

Neath Port Talbot

- *Tel: 01639 686 802*
- *Email: thegateway@npt.gov.uk* <mailto:thegateway@npt.gov.uk> <mailto:CAP@swansea.gov.uk>

Appendix Six

Wales – Safeguarding Referral Processes

