

Status: Reviewed by June 2021 board	Review date: June 2022
-------------------------------------	------------------------

## Key Contacts:

**Berny Simcox**  
**CEO/Safeguarding Officer**  
Phone: 07515 355796

**John Anderson**  
**Chair of Board**  
Phone: 07951 021655

Responsibility for making a Serious Incident Report rests with the The Wild Mind Project' Board of Directors. The Safeguarding Officer (or, in their absence, the Chair of Board) shall be responsible for notifying the Directors of any safeguarding issues that may need to be reported to the public authorities.

Further guidance on reporting serious incidents is available from the Charity Commission's website at:

<https://www.gov.uk/government/organisations/charity-commission>.

<https://www.gov.uk/guidance/how-to-report-a-serious-incident-in-your-charity>

## 1 Purpose of Policy

1.1. The Wild Mind Project is committed to providing a safe environment for its employees, Directors, volunteers and service users. As an organisation that works with adults at risk, we recognise we have a duty of care. The Wild Mind Project takes the risk of abuse of adults seriously, and is committed to protecting adults at risk and preventing abuse. All employees and volunteers in whatever setting or role will take necessary action to report an incident when a concern arises or take appropriate action to prevent further abuse.

## 2. Scope of Policy

2.1. This policy covers the responsibilities of staff and volunteers in relation to the protection of adults at risk. If any member of the staff, volunteer or Director is being abused or is abusing another person within the organisation, then the internal Grievance and/or Disciplinary Procedure should be followed.

## 3. General Principles

Where abuse is suspected The Wild Mind Project will aim to ensure:

3.1. Adults have a right to independence, choice and self-determination. This right extends to being able to have control over information about themselves and in most cases to determine which information is shared, and in what ways.

3.2. We will always recommend the abused person to allow their case to be referred to Social Services and/or the Metropolitan Police, as appropriate. However, we will respect the person's privacy if they do not allow this, as long as we believe they have capacity to make decisions.

3.3. We will not allow the person to impose confidentiality on the The Wild Mind Project representative to whom they have disclosed the abuse. In all cases it must be made clear that all details of the conversation will be passed to the Director(s) as appropriate.

3.4. It is essential to consider whether the adult at risk is capable of giving informed consent. If they are, The Wild Mind Project should obtain written consent to share information and/or refer the case. The Wild Mind Project should routinely agree and explain what information will be shared with other people or organisations.

3.5. If after a discussion with the adult at risk who has mental capacity, they refuse any intervention their wishes will be respected unless:

3.5.1. There is a public interest, for example, not acting will put other adults or children at risk, or,

3.5.2. There is a duty of care to intervene, for example, a crime has been or may be committed.

3.6. There must be absolute confidentiality within the organisation and the abused person should be assured of this.

3.7. If, after discussion with the Director(s) it is decided that the adult at risk lacks capacity and abuse is suspected, The Wild Mind Project will alert Adult Social

Services or the Police even if consent has not been given.

3.8. All decisions and actions are taken in line with The Mental Capacity Act 2005.

3.9. In a stressful situation a person suffering abuse may later change their mind about pursuing their complaint. The person who suspects abuse must be protected by careful case recording, which will make clear what was agreed with the person who is thought to be abused.

3.10. Further support should be signposted, either from within The Wild Mind Project or from other specialist organisations. This is particularly important if the person does not wish to report the abuse, and care should be taken that members of staff and volunteers of The Wild Mind Project are protected from taking on more than they are trained for.

3.11. Members of staff, volunteers and Directors should never at any time allow themselves to be put at risk.

## **4. Who is an adult at risk?**

The term 'adult at risk' replaces 'vulnerable adult'. An adult at risk can be defined as:

4.1. Over 18.

4.2. People who may be in need of care because they are frail, learning or physically disabled, cognitively impaired or sensorially impaired.

4.3. People with mental health needs such as dementia or a personality disorder

4.4. People with a long-term condition/illness.

4.5. People who misuse alcohol or substances.

4.6. A carer such as a family member/friend who provides personal assistance and care to adults who is themselves subject to abuse.

4.7. A person who is unable to demonstrate the capacity to make a decision and is in need of care and support.

## **5. What do we mean by abuse?**

Abuse is a breach of an individual's human rights. This may be a single act or happen repeatedly over a period of time. This may be because of:

5.1. Physical or mental aggression.

5.2. Neglect.

5.3. Persuading someone to agree to something against his/her will.

5.4. Taking advantage of someone who is unable to give consent.

### **5.5. Abuse can be:**

5.5.1. Physical - Including hitting, slapping, pushing, kicking, restraint or inappropriate sanctions.

5.5.2. Sexual - Including rape and sexual assault or sexual acts to which the adult at risk has not consented, could not consent or was pressured into consenting.

5.5.3. Psychological - Including and not limited to; emotional abuse, threats of harm or abandonment, controlling behaviour, intimidation and harassment.

5.5.4. Financial or material – Including, and limited to, theft, fraud, exploitation and the misuse or misappropriation of property, possessions or benefits.

5.5.5. Neglect or acts of omission - Including ignoring medical or physical care needs, failure to provide access to appropriate health care, social care, education services or misuse of medication, adequate nutrition or heating.

5.5.6. Discriminatory - Including racist, sexist behaviour or harassment based on a person's ethnicity, race, culture, sexual orientation, age or disability, and any other forms of harassment, slurs or similar treatment.

5.5.7. Institutional abuse - This can sometimes happen in residential homes, nursing homes or hospitals when people are mistreated because of poor or inadequate care, neglect or poor practice that affects the whole of that service.

5.5.8. This list is not exhaustive; there are many other types of abuse.

## 6. What you should do if you are concerned about abuse?

6.1. If you are concerned that any adult at risk is experiencing abuse or neglect, whether it is by an employee, carer, family member, neighbour or other, it is your responsibility to report any concern immediately or within 4 hours, to a manager or Director in The Wild Mind Project who is the designated contact person for the organisation.

Berny Simcox, CEO - [berny.simcox@thewildmindproject.org](mailto:berny.simcox@thewildmindproject.org) Tel: 07515 355796  
John Anderson, Chair of Board - [john.anderson241@btinternet.com](mailto:john.anderson241@btinternet.com) Tel 07951 021655

After discussing your concerns with a director and agreeing an alert should be raised, you must then alert Adult Social Services within 24 hours on the contact details below to raise a safeguarding alert:

**6.2 Richmond upon Thames:** telephone: 020 8891 7971 or text 07800 002439 or email [adultsocialservices@richmond.gov.uk](mailto:adultsocialservices@richmond.gov.uk)

Office hours are 9am to 5.15pm Monday to Thursday and 9am to 5.00pm on Friday. Where there is uncertainty about the appropriateness of raising a safeguarding alert, advice can be sought from Adult Social Services on the contact details above.

Out of hours enquiries: For emergency queries outside of office hours you can call London Borough of Richmond Upon Thames Adults Emergency Duty Team on telephone: 020 8744 2442 or Type Talk: 1800 1 020 8744 9414

The service is available from 5pm to 8am on Monday to Friday and 24 hours on weekends and Bank Holidays.

**6.3 Brighton & Hove:** telephone 01273 2955 55 or email

Office hours are 8.30am to 4.30pm Monday to Friday. Outside these hours' calls will be answered by CareLink Plus or email [accesspoint@brighton-hove.gov.uk](mailto:accesspoint@brighton-hove.gov.uk)

### 6.4. Suspected Crime

The police should be informed if a criminal activity is suspected. The police must be involved if:

6.4.1. There is an allegation from an adult to another person of sexual abuse.

6.4.2. There is a suspicion that sexual abuse has occurred.

6.4.3. There has been an alleged or suspected case of physical injury that has

caused harm to an adult constituting an assault, actual or grievous bodily harm.

6.4.4. An alleged or suspected case of cruelty, including where an adult is ill-treated or neglected.

6.4.5. There are allegations or suspicions that involve unusual circumstances e.g. organised or institutional abuse.

6.4.6. There is an alleged or suspected case of financial abuse.

If the crime is in the process of occurring call 999 otherwise call your local station using the following number: 101. The Director(s) should be consulted at the earliest opportunity.

Non-emergency crime allegations should first be discussed with the Director(s) then, if they agree, be referred to:

London Borough of Richmond Community Safety Unit -  
community.safety@richmond.gov.uk. This unit deals with hate crime and domestic violence as well as crime committed against vulnerable people.

Brighton and Hove – call 101.

6.5 Person alleged to have caused harm.

- In order to manage the risks involved, discussion with Adult Social Services or the police could be considered. Do not discuss the allegation with the person alleged to have caused the harm, unless the immediate welfare of the adult at risk requires this. However, where an immediate decision has to be made to suspend the member of staff, the person has a right to know in broad terms what allegations or concerns have been raised against them.

If the person alleged to be causing harm is an employee or volunteer, ensure that they are not in contact with the adult at risk or any others who may be at risk, such as whistle-blowers. Where the person alleged to be causing harm is another service user, it may be necessary to remove them from contact with the adult at risk. Arrangements should be put in place to ensure that their needs are met.

6.6 Regulated social care and health settings

If the adult at risk is allegedly abused in a regulated health or social care setting by a member of staff who is employed by a regulatory body, the Care Quality Commission (CQC) must be informed by the regulated service or by the Safeguarding Alert Manager in the council where the Safeguarding Adults concern has been reported to the local authority.

## 6.7 Mental Capacity and Consent

The Mental Capacity Act 2005 underpins the safeguarding process where the adult does not necessarily have the capacity. A mental capacity assessment will be carried out by a social worker to ascertain if the person has the capacity to make decisions regarding the abuse allegation and give consent to a safeguarding investigation. They may then appoint an Independent Mental Capacity Advocate (IMCA) to make decisions in the best interests of the adult at risk. If you suspect that someone is being deprived of their liberty in a care home or hospital the Deprivation of Liberty Safeguards provide a framework for protecting people who lack the mental capacity to make the decision as to whether they receive care and/or treatment in a care home.

## 7. What can The Wild Mind Project do to reduce the risk of harm?

After the alert has been raised with Adult Social Services, discuss with the Director(s) if any other measures or risk assessments can be undertaken. If an employee is involved then ensure they have no further contact until the case has been fully investigated, and the employee is cleared by the investigation. Pending the result of the investigation, a risk assessment should be carried out by the Directors(s) to determine whether the employee can continue with other service users. The investigation should also be viewed as a protection for the employee where the allegation is part of the adult at risk's mental state, or the allegation is malicious.

All employees and volunteers working with adults at risk will have enhanced DBS checks and will complete e-learning training on safeguarding.

It is everyone's responsibility to ensure that adults at risk are protected from abuse. This might be information concerning someone's general vulnerability due to their health condition, lack of support network, isolation, dependency on one-person, new friends etc.

Wherever possible you should be open and honest with the person themselves about the concerns that you have as the person has the right to know what information is being shared and with whom.

### **7.5 You can help an individual to protect himself / herself from abuse by enabling him / her to:**

7.5.1 Access information about adult abuse.

7.5.2 Access an independent advocacy scheme.

7.5.3 Talk about any concerns they may have.

7.5.4 Contact agencies including Adult and Community Services and the Police if required.

7.5.5 Develop safe and supportive relationships with others.

## **7.6 Staff can minimise the risk of adult abuse by:**

7.6.1. Developing an awareness of what adult abuse is by attending up to date training.

7.6.2. Acknowledging that it could happen to any adult anywhere and at any time.

7.6.3. Being alert to the support needs of carers. Being alert to risk factors.

7.6.5. Attending staff meetings and regular supervision to discuss and learn about care practices which could be abusive.

7.6.6. Accessing support from colleagues and managers as required.

## **7.7 Carers can minimise the risk of adult abuse by:**

7.7.1. Accessing support with caring for the adult at risk.

7.7.2. Identifying appropriate ways to meet the adult at risks needs.

7.7.3. Finding someone to talk to about the caring experience.

## **7.8. Logging and monitoring safeguarding**

All alerts will be logged by a staff member or manager on the Charity Log database and monitored to ensure that all referrals have been investigated. After investigation is completed the outcomes will be logged as upheld or unfounded.

## **7.9. Further information**

For more information visit:

London Borough of Richmond's Safeguarding policy and procedures website:  
[http://www.richmond.gov.uk/local\\_safeguarding\\_procedures\\_jun\\_2014.pdf](http://www.richmond.gov.uk/local_safeguarding_procedures_jun_2014.pdf)(NB note this link is to a document update on June 2015).

Brighton and Hove Safeguarding Adult Board website: <https://www.bhsab.org.uk>

## 8. Confidentiality

It is essential that confidentiality is maintained at all stages of the process when dealing with safeguarding concerns. Information relating to the concern and subsequent case management should be shared on a need to know basis only, and **should be kept secure at all times.**

## 9. Glossary of Terms

**Adult:** any person who has attained the age of 18.

**Beneficiary of Assistance:** Someone who directly receives goods or services from The Wild Mind Project's programme. Note that misuse of power can also apply to the wider community that the NGO serves, and also can include exploitation by giving the perception of being in a position of power.

**Child:** A person below the age of 18

**Coercive behaviour:** is an act or pattern of acts that is used to harm, punish or frighten, intimidate or humiliate a person.

**Controlling behaviour** is an act or pattern of acts intended to make a person subordinate or dependent. It might include isolating them from support, exerting control over their everyday behaviour. It can extend to exploiting them for personal gain and/or depriving them of the resources they need for independence.

**Harm:** Psychological, physical and any other infringement of an individual's rights

**Psychological harm:** Emotional or psychological abuse, including (but not limited to) humiliating and degrading treatment such as bad name calling, constant criticism, belittling, persistent shaming, solitary confinement and isolation

**Protection from Sexual Exploitation and Abuse (PSEA):** The term used by the humanitarian and development community to refer to the prevention of sexual exploitation and abuse of affected populations by staff or associated personnel. The term derives from the United Nations Secretary General's Bulletin on Special Measures for Protection from Sexual Exploitation and Abuse (ST/SGB/2003/13)

**Safeguarding:** In the UK, safeguarding means protecting people's health, wellbeing and human rights, and enabling them to live free from harm, abuse and neglect.

In our sector, we understand it to mean protecting people, including children and at-risk adults, from harm that arises from coming into contact with our staff or programmes. One donor definition is as follows:

Safeguarding means taking all reasonable steps to prevent harm, particularly sexual exploitation, abuse and harassment from occurring; to protect people, especially

vulnerable adults and children, from that harm; and to respond appropriately when harm does occur.

This definition draws from our values and principles and shapes our culture. It pays specific attention to preventing and responding to harm from any potential, actual or attempted abuse of power, trust, or vulnerability, especially for sexual purposes.

Safeguarding applies consistently and without exception across our programmes, partners and staff. It requires proactively identifying, preventing and guarding against all risks of harm, exploitation and abuse and having mature, accountable and transparent systems for response, reporting and learning when risks materialise. Those systems must be survivor-centered and also protect those accused until proven guilty.

Safeguarding puts beneficiaries and affected persons at the center of all we do.

**Sexual abuse:** The term 'sexual abuse' means the actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions.

**Sexual exploitation:** The term 'sexual exploitation' means any actual or attempted abuse of a position of vulnerability, differential power, or trust, for sexual purposes, including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another. This definition includes human trafficking and modern slavery.

**Staff:** includes all permanent, temporary, freelance and volunteer staff.

**Survivor:** The person who has been abused or exploited. The term 'survivor' is often used in preference to 'victim' as it implies strength, resilience and the capacity to survive, however it is the individual's choice how they wish to identify themselves.

**Vulnerable Adult:** Sometimes also referred to as an 'at-risk' adult. A person who is or may be in need of care by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation.