

HCCN Safeguarding Adults Policy

1. Introduction

Safeguarding is a responsibility for every organisation.

Living a life that is free from harm and abuse is a fundamental human right and an essential requirement for health and wellbeing. Safeguarding adults is about taking reasonable steps to protect people from harm, and ensure the safety and well-being of all people who come into contact with our charity.

We work with people managing a diagnosis of cancer. HCCN trustees, activity leaders, contractors and volunteers are our 'frontline'. In the time that we see an adult our aim is to prevent harm or abuse occurring and to empower the 'person at risk' to take action if a concern arises.

We are committed to working with the NHS and the Cambridgeshire and Peterborough Safeguarding Adults Partnership Board (SAB) to promote safer communities, to prevent harm and abuse, and to deal with suspected or actual cases of abuse.

Our procedure aims to ensure that the safety needs and interests of adults who benefit from our charity's activities are always respected and upheld. It is a balanced policy reflecting risk with a proportional response:

- Operational risk – everyone needs to recognise and act on their suspicions
- Recruitment risk – activity leaders, contractors and volunteers will be reference checked and DBS checks will be applied for appropriate roles
- Reputational risk – our risk assessments will include a review of safeguarding

2. Who safeguarding applies to

People's wellbeing is at the heart of the care and support system under the Care Act 2014, and the prevention of abuse and neglect is one of the elements identified as going to make up a person's wellbeing.

In the context of the legislation, specific adult safeguarding duties apply to any adult who:

- has care and support needs
- is experiencing, or is at risk of, abuse or neglect
- is unable to protect themselves because of their care and support needs.

Safeguarding duties apply regardless of whether a person's care and support needs are being met, whether by the local authority or anyone else.

An adult with care and support needs may be:

- an older person
- a person with a physical disability, a learning difficulty or a sensory impairment
- someone with mental health needs, including dementia or a personality disorder
- a person with a long-term health condition
- someone who uses substances or alcohol to the extent that it affects their ability to manage day-to-day living.

This is not an exhaustive list. In its definition of who should receive a safeguarding response, the legislation also includes people who are victims of sexual exploitation, domestic abuse and modern slavery. These are all largely criminal matters, however, and safeguarding duties would not be an alternative to police involvement, and would only be applicable at all where a person has care and support needs that mean that they are not able to protect themselves.

Adult safeguarding duties apply in whatever setting people live, with the exception of prisons and approved premises such as bail hostels. They apply regardless of whether or not someone has the ability to make specific decisions for themselves at specific times. There may be times when a person has care and support needs and is unable to protect themselves for a short, temporary period – for example, when they are in hospital under anaesthetic.

People with care and support needs are not inherently vulnerable, but they may come to be at risk of abuse or neglect at any point due to:

- physical or mental ill-health
- becoming disabled
- getting older
- not having support networks
- inappropriate accommodation
- financial circumstances
- being socially isolated.

3. Your responsibilities when you have safeguarding concerns

- Assess the situation i.e. are emergency services required?
- Ensure the safety and wellbeing of the individual

- Establish what the individual's views and wishes are about the safeguarding issue and procedure
- Maintain any evidence
- Follow local procedures for reporting incidents/risks
- Remain calm and try not to show any shock or disbelief
- Listen carefully and demonstrate understanding by acknowledging regret and concern that this has happened
- Inform the person that you are required to share the information, explaining what information will be shared and why
- Make a written record of what the person has told you, using their words, what you have seen and your actions.

4. How to make a report of suspected abuse

Volunteers, contractors and activity leaders should initially raise any concern they may have with their line manager.

The charity's nominated safeguarding lead is trustee, Jan Davis.

HCCN the charity's primary contact will be the NHS; the lead nurse, Karen Moseley, will adhere to the Hinchingsbrooke Hospital Safeguarding policy.

5. Policy implementation and culture

The Nominated Charity Trustee will ensure the implementation of the Safeguarding policy. They will maintain an overview of safeguarding concerns, take a lead on liaising with other agencies and keep informed about local developments in safeguarding. They will ensure that all volunteers, contractors and activity leaders at HCCN have access to relevant training and support.

6. Reviewing this Policy

This policy will be reviewed every 12 months and each review will consider any reports made during the previous period to ensure the development of a rounded all-embracing policy.

VERSION HISTORY			
Revision	Date	Changes	Review date
1.0	10/2017	First version	
2.0	03/2022	Significant rewrite to take reflect the requirements of The Care Act 2014	

