NPLS carries out “regulated activities” as defined by the Safeguarding Vulnerable Groups Act 2006 (amended by Protection of Freedoms Act 2012). NPLS has to have Disclosure and Barring Service (DBS) checks completed when recruiting staff or volunteers who will be in contact with adults and people in later life.

As a provider of regulated activities NPLS is also required to make a referral to the Disclosure and Barring Service (DBS) whenever a worker or volunteer is reasonably considered to be guilty of misconduct that has harmed or placed an adult at risk of harm.
2. Definitions

1. **Definition of abuse** is a violation of an individual’s human and civil rights, by any other person or persons. Main different forms of abuse are:
   - **Physical abuse** - for example, hitting, pushing, shaking, over medicating or otherwise causing physical harm
   - **Sexual abuse** - for example, unwanted touching, kissing or sexual activity or where the vulnerable person cannot or does not give their consent
   - **Emotional abuse** - including verbal abuse, humiliation, bullying or the use of threats.
   - **Financial abuse** - the illegal or improper use of a person’s money, property, pension book, bank account or other belongings.
   - **Neglect** - the repeated deprivation of help that an adult at risk needs which, if withdrawn, will cause them to suffer. This can also be a criminal offense of “wilful neglect”.
   - **Discriminatory abuse** - including racist or sexist abuse, and abuse based on a person’s disability, and other forms of harassment, slurs or similar treatment. This is also known as hate crime.

2. **Definition of Adult at risk:**
   An adult at risk is defined as a person aged 18 years or over who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation.

3. **Definition of line manager**
   For all staff and volunteers except the Care Co-ordinator, the line manager is the Care Co-ordinator.
   For the Care Co-ordinator the Line manager is the Care Co-ordinator’s line manager.
   The Safeguarding Lead Person (SLP) is the Care Co-ordinator’s line manager.
   The Chairman is the chairman of the Synagogue Council.

3. **Objectives**

   - Provide mechanisms to help safeguard individuals from abuse and/or exploitation
   - Provide a framework for effective working
   - Reduce and prevent incidences of abuse
   - Respond quickly and sensitively to suspicions or disclosed incidents of abuse
• Ensure that abuse of an individual does not occur as a result, either directly or indirectly, of any of the services offered by NPLS

• Increase awareness of issues concerning the abuse of individuals of all ages.

• Provide a process for staff who have issues of concern in respect to suspected, disclosed or observed abuse

• Ensure that adults are empowered to speak out for themselves and know that they will be supported during any investigations of abuse.

4. Procedure

4.1 Action to be taken when abuse is known about or suspected

• **Witnessing.** When a person witnesses abuse they must immediately ensure the safety of the person being abused and inform their line manager immediately or within no more than 24 hours of the incident.

• **Alerting:** where an incident of concern is disclosed, suspected or witnessed, the person receiving the information must record as much detail as possible of what they know. They should notify their line manager as soon as practicable, both verbally and in a written document.

• **Reporting:** When a concern about abuse has been raised, a line manager should discuss the issue with the person who raised the concern, to find out about the particular incident. A detailed verbal report about the incident must take place at the same time. The more information you can provide in the report the better. However, it is essential that, **you do not press the issue** if the information required is not forthcoming without asking direct or searching questions. At this stage, you are an observer/recorder only, not an investigator. The line manager should decide whether to make a report directly to the relevant local authority adult protection (or equivalent). This manager also must send a complete NPLS alert form (Appendix A) to the Safeguarding Lead person within 24 hours. The manager can consult this person as a part of the decision-making process. In all cases accurate signed and dated written records must be maintained.

• **Alleged staff or volunteer abuse:** Where suspected abuse is alleged to be malpractice by a staff member or volunteer, the HR whistle-blowing policy or internal disciplinary procedure will be invoked.

4.2 Why follow / procedures?

Safeguarding people who are at risk is rarely a clear-cut process. Each situation has its unique circumstances and each individual has specific needs. It is essential
therefore that NPLS has a straightforward and effective procedure in place for dealing with a wide variety of safeguarding concerns. The process must take into account the needs of people with physical and/or mental issues, the well-being of staff and the protection of NPLS’s good name. These procedures provide the method by which NPLS monitors, evaluates and maintains high quality responses to abuse concerns. See Appendix B for the full Safeguarding Process.

4.3 Choice, consent and capacity

NPLS aims to empower adults with physical and/or mental issues to be in control of their own lives, to make informed choices and their own decisions wherever possible. Within the context of these procedures, NPLS seeks to protect individuals from abuse at the same time as promoting their dignity and right to live safely in the way they want, ensuring a crucial balance is maintained between autonomy and adult protection.

Adults have the freedom to choose whether they wish to change their current circumstances or not. Their wishes should be respected. A person is not to be treated as unable to make a decision merely because they make an unwise decision. The exception is where there is a statutory responsibility to intervene. This would occur if:

- A crime were suspected
- Allegations involved a NPLS member of staff or volunteer
- There was a risk of significant harm to that person or other people at risk.

Staff members/volunteers must work closely with people who are at risk to make sure they have as full an understanding as possible, of the support and options available to them. Volunteers/staff members must uphold the five key principles that are contained in the Mental Capacity Act. If there is any doubt about the ability of the person at risk to give meaningful consent, it is essential that staff members/volunteers consult their line manager.

There are occasions when the statutory duty to report abuse overrides consent; for example when:

- A member of staff/volunteer reasonably believes that there is immediate risk to life or limb
- The person at risk is a tenant, resident or patient in a statutory, voluntary or private institutional setting, and it is thought that any suspected or actual abuse may impinge on others’ rights and/or may involve situations where the alleged abuser is a member of staff.
4.4 Why is documentation necessary?
The necessity of maintaining detailed written documentation may be viewed as a burden on staff members’/volunteers’ time but it can be invaluable in dealing with complaints in a positive way. It has also made providing reliable witness statements for case reviews, at multi-agency boards and in court, much easier. Written records are essential for monitoring the standard of NPLS’ work and are good tools in learning about the needs of people with physical/mental issues and people in later life.

4.5 Abuse awareness training
To ensure staff know how to identify abuse concerns in the course of their work, they will be expected to attend awareness training and be made familiar with NPLS’ whistle blowing, and disciplinary policies. Managers will attend additional local authority training to enable them to address the support needs of their team members and comply with the demands of the referral/alerting process. Safeguarding training is delivered by the Care co-ordinator.

4.6 What to do if the abuser is a member of staff/volunteer
Where any staff member/volunteer is observed carrying out abuse, or is suspected of doing so, NPLS whistle-blowing policy will be invoked. This includes a situation in which a line manager may have colluded in an incident of abuse.

The person suspecting such malpractice must record as much detail as possible. Then notify a line manager or the lead safeguarding person as soon as practicable. If a line manager is implicated then another manager and the lead safeguarding person must be approached. Reference to NPLS’s whistle-blowing policy must be given here also.

4.7 Supporting the clients through the process.
It is important that:
• Clients are supported during and after safeguarding investigations in the way they wish.
• In the event of an alert, the person concerned is at the centre of the safeguarding process and, wherever possible, they remain in control and make their own decisions.

4.8 Sharing information about a client
It is vital that staff members/volunteers consult line managers and do not attempt to handle an abuse issue in isolation. The process of consultation with managers is designed to make sure each situation is considered carefully and any decisions to act, or not to act, are made with as much appreciation of the circumstances as possible.

4.9 Monitoring and storage of client records
Written documentation will record the reasons why action is being taken or not taken, as well as facts about what occurred. Every resource or service will keep their own records. All documentation will also be stored, collated and analysed by the
Safeguarding Lead Person (SLP) in NPLS in readiness for report writing or should NPLS be asked to explain how cases have been responded to.

4.10 Alerting authorities
It is vital that alerts are passed on as soon as possible to the local council and the police (where appropriate) once information has been received about abuse. For adults, NPLS will raise alerts to statutory authorities when managers deem this is warranted. Where necessary, the initial alert can be by telephone or email if this will result in getting better support for the abused person. This is to be followed by a formal confirmation in writing, with a copy to the Safeguarding Lead in NPLS. The Care Quality Commission expects councils to take alerts, from charities and the public, without consent being a prerequisite as this may adversely affect the process.

4.11 Investigations
It is not the role of the organisation to carry out investigations of abuse. The purpose or raising an alert to a statutory authority is to pass on information about a person who might be at risk

5. Overall Responsibility by the Chairman:

The Chairman has overall responsibility for ensuring the effective implementation of the NPLS Care Safeguarding Policy. The Chairman will fulfil the following responsibilities or delegate them to an appropriate person where necessary:

- Ensure that all information in respect of safeguarding vulnerable adults is stored securely.
- Provide support to colleagues, wherever practicable, to discuss any queries, prior, during and after a safeguarding protection concern.
- Oversee training and specialist support for NPLS staff and volunteers.
- Ensure line managers of all NPLS staff will report to statutory authority’s cases of abuse, document all actions, conversations and reasons for decisions made, informing the Safeguarding Lead Person at the same time.
- Ensure that all team members, paid and volunteer are familiar with the safeguarding policy and procedures.

The implementation and effectiveness of this policy will be monitored by the Chairman, not less than annually. The Chairman will also review the policy regularly (not less than annually) and recommend and implement action to ensure the policy is up to date and compliant with current legislation and guidance.
6. Management Responsibilities

- Ensure that all their staff have received training in safeguarding awareness.
- Ensure that their team members are familiar with NPLS’s whistle-blowing policy, disciplinary procedures and safeguarding policy.
- Ensure that all notifications of abuse, actual or suspected, are treated with the highest priority.
- When receiving a concern about abuse, discuss the issue with the person who raised the concern in order to ascertain the particular circumstances of the incident.
- If an adult, undertake a risk analysis on the information and decide whether to alert a statutory authority.
- Ensure that accurate, signed and dated written records are maintained throughout this process. The Safeguarding Lead will need to have access to documentation that includes a record of all actions, conversations and reasons for decisions made.
- If receiving a concern about abuse involving a member of staff, follow NPLS’s whistle-blowing and disciplinary policies.
- Conduct risk assessments for the roles within their teams; to determine whether their staff’s activities are defined by ‘regulated’ or ‘controlled’ activities (Regulated and controlled activities require Independent Safeguarding Authority (ISA) checks).
- Be aware that they, and their staff, may be exposed to difficult or disturbing cases of abuse. They should be able to offer effective supervision and support to their staff while also ensuring that any personal issues are communicated to their own managers.
- Ensure that no new member of staff starts their duties without an appropriate DBS check.
- Ensure attendance at all strategy meetings and co-operate fully with all authorities.

7. Staff and Volunteers Responsibilities

- If any paid member of staff or volunteer see or hear about the abuse of an adult, or have seen changes in behaviour or living patterns that make them suspect that someone is being abused, it is vital that they do not ignore what they have seen or suspected. The safety and welfare of people who use our services are paramount and a lack of response can have serious consequences for that individual.
- Staff must alert the relevant emergency services if there is an immediate risk to life or limb of the person(s) involved, or ensure they are kept safe immediately. Inform their line manager immediately and certainly within 24 hours of such an incident.
- Be aware of the whistleblowing policy and be comfortable alerting managers of any such situations.
Attend staff and volunteer meetings, supervision and appraisal, training and any handovers that are required.

Be clear on how to write a clear, concise and objective report of any incident.

Keep the organisation’s confidentiality policy.

**8. Safeguarding Lead Person’s (SLP) Responsibilities**

- Provide support for colleagues before, during and after any concerns raised and/or whistle-blowing case.
- Alert cases of abuse to the local authority or police and to the Independent Safeguarding Authority (ISA) where deemed necessary.
- Obtain feedback regarding the outcomes of alerts given to ISA or local authority or police.
- Follow clear governance procedure for the reporting of safeguarding alerts.
- Inform the NPLS Council of any abuse incidents involving NPLS staff members/volunteers.
- Collate and report data on safeguarding adult cases to the NPLS Council annually.
- Ensure that all information on safeguarding is stored securely, monitored and analysed, in line with NPLS Policy.
- Provide information on good practice in respect of issues of abuse.
- Review NPLS's safeguarding procedures and policy annually and update them when necessary.
- Provide a regular training programme for all staff on safeguarding.
## Appendix A

### NPLS

**SAFEGUARDING ALERT FORM**

(Initial Alert & Ongoing Record)

**NOTE:** Please email your completed form to peter.aron@ntlworld.com and chair@npls.org.uk

<table>
<thead>
<tr>
<th>DETAILS OF VULNERABLE ADULT: (i.e: name, address, dob, age)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

### ALLEGED, SUSPECTED, WITNESSED OR REPORTED ABUSE/INCIDENTS:

<table>
<thead>
<tr>
<th>RESOURCE:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFEGUARDING TEAM:</td>
<td></td>
</tr>
<tr>
<td>ALLEGATIONS AGAINST:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ALERTED BY: (Please tick where appropriate)</th>
<th>Self Referral</th>
<th>Family Member</th>
<th>Friend/Neighbour</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other (please give details)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DESCRIPTION OF THE ALLEGED, SUSPECTED OR WITNESSED ABUSE, WHAT WAS SEEN, SAID, WHO ELSE WAS PRESENT ETC.:</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>DATE AND TIME OF ALLEGED SUSPECTED OR WITNESSED ABUSE:</th>
<th>DATE AND TIME ALERT REPORTED:</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>ABUSE</th>
<th>Own Home</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>SETTING: (Please tick where appropriate)</td>
<td>Residential Care (Permanent)</td>
<td>Residential Care (Temporary)</td>
</tr>
<tr>
<td>----------------------------------------</td>
<td>------------------------------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td>TYPE OF ABUSE: (Please tick where appropriate)</td>
<td>Physical</td>
<td>Sexual</td>
</tr>
<tr>
<td>ANY ACTION TAKEN:</td>
<td>BY LOCAL AUTHORITY:</td>
<td>BY NPLS:</td>
</tr>
</tbody>
</table>

*Fill this section as necessary: (The case is ongoing and/or unresolved)*

**OUTCOME:**

**UPDATES:**

<table>
<thead>
<tr>
<th>Date:</th>
<th>Report:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Stage</td>
<td>Function</td>
</tr>
<tr>
<td>-------</td>
<td>----------</td>
</tr>
<tr>
<td>Concern raised – abuse incident or suspicion</td>
<td>If there is immediate risk to life or limb contact paramedics or other appropriate agency. Respond to client involved and write detailed case notes.</td>
</tr>
<tr>
<td>Consultation between manager and member of staff/volunteer</td>
<td>A discussion is held between the member of staff/volunteer and manager to talk about the concern. Written record made of the discussion, signed and dated by both.</td>
</tr>
<tr>
<td>Decision how and/or if to take action</td>
<td>Manager will decide, based on the information gained by the volunteer/member of staff, if the safeguarding process is necessary.</td>
</tr>
<tr>
<td>Give/discuss case details, consultation, and decision with SLP</td>
<td>Review risks, reasons for actions or inactions.</td>
</tr>
<tr>
<td>Alert statutory authority when appropriate</td>
<td>Local safeguarding team or social services or police are alerted about the case. This can be done verbally first, but formal written account must always be given. NPLS will keep copies of written correspondence and records of time, date and name of anyone spoken to. Feedback on the case will be requested.</td>
</tr>
<tr>
<td>Record-keeping, including outcomes</td>
<td>Whether the case has been alerted or not, outcomes are recorded, stored and kept in accordance with the Data Protection Act.</td>
</tr>
<tr>
<td>Feedback</td>
<td>Feedback given by a statutory authority will be kept in the case file.</td>
</tr>
<tr>
<td>Regular report</td>
<td>The SLP will generate a safeguarding annual report to be presented to the Chairman/NPLS Council as stipulated in NPLS’s policy</td>
</tr>
</tbody>
</table>