



KERRY COMMUNITY TRAINING CENTRE SAFEGUARDING ADULTS POLICY & PROCEDURES

Safeguarding Adults Policy - Kerry Community Training Centre

Safeguarding Adults Policy/Procedures - Developed for Kerry Community Training Centre by Clara Learning Limited

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Glossary of Terms

Abuse A single or repeated act, or omission, which violates a person's human rights or causes harm or distress to a person. The main areas of abuse which cause people harm are physical abuse, emotional abuse, sexual abuse, neglect of the person and financial abuse. It is important to note that this is not an exhaustive list.

Adult at Risk of Abuse

A person who is aged 18 years or older who needs help to protect themselves from harm at a particular time. A distinction should be made between an adult who is unable to safeguard him or herself, and one who is deemed to have the skill, means or opportunity to keep him or herself safe, but chooses not to do so.

Throughout this document, when the word 'adult' is used, it means 'adults at risk of abuse'.

Capacity In line with the Assisted Decision-Making (Capacity) Act 2015, 'capacity' means 'decision-making capacity' and refers to the ability to understand, at the time that a decision is to be made, the nature and consequences of the decision in the context of the available choices at that time.

Exploitation The deliberate maltreatment, manipulation or abuse of power and control over another person to take advantage of another person or situation.

Harm The impact of abuse, exploitation, or neglect on the person. Harm arises from any action, whether by a deliberate act or an omission that may cause impairment of physical, intellectual, emotional, or mental health and well-being.

Person Allegedly Causing Concern

The person against whom a safeguarding concern has been raised or has alleged to have caused abuse to an adult at risk of abuse

Safeguarding Measures that are put in place to reduce the risk of harm, promote, and protect people's human rights and their health and wellbeing, and empowering people to protect themselves.

Safeguarding Concern

Information in relation to the possibility of occurrence of any of the specified types of abuse to an adult.

Safeguarding and Protection Team

The HSE Safeguarding and Protection Team will take referrals of safeguarding concerns from services, organisations and directly from the public. The Safeguarding and Protection Team is a social work led service that provides advice and guidance to health and social care professionals, Safeguarding Coordinators, relevant service managers, and to members of the public.

Self-neglect A spectrum of behaviours defined as the failure to, (a) engage in self-care acts that adequately regulate independent living or (b) take actions to prevent conditions or situations that adversely affect the health and safety of oneself or others.

Staff Refers to all Kerry Community Training Centre employees, volunteers, contractors, and board directors/members who work or have contact with adults who may be at risk of abuse.

Zero Tolerance

The requirement that there should no acceptance of abuse or neglect in any circumstance.

Section 1 – Introduction

Kerry Community Training Centre CLG is a funded programme overseen by a Board of Management under the governance of Kerry ETB. The purpose of Kerry Community Training Centre is to provide early school leavers along with others that may be disadvantaged between the ages of 16 and 21 years an opportunity to avail of educational and training opportunities. This is conducted in safe environment with the aim of facilitating their social inclusion and personal development.

The development of this safeguarding policy and procedure document is part of the commitment to promoting Adult Safeguarding in Kerry Community Training Centre, while creating a safe and welcoming environment for all learners.

Kerry Community Training Centre is committed to the protection and welfare of adults who avail of our services. We are committed to creating a culture of safety. The term safeguarding is intended to be used in its widest sense. Kerry Community Training Centre believes effective safeguarding is about:

- Promoting the welfare of adults.
- Preventing harm from occurring through early identification of risk and appropriate, timely interventions; and
- Protecting adults from the harm caused by abuse and neglect.

1.1 Purpose and Scope

The purpose of this Safeguarding Adults Policy is to set out Kerry Community Training Centre's principles and procedures and provide information to support staff in the prevention, identification and effective management of safeguarding concerns which may arise through their work with people with disabilities.

This Safeguarding document suite is for all Kerry Community Training Centre staff including:

- Employees (full time, part time and temporary).
- Contractors.
- Volunteers.
- Board Directors

This document applies to an adult (aged 18 years and over) who may be vulnerable and at risk of abuse who needs help to protect themselves from harm at a particular time in their lives.

1.2 Legislation and National Policy

This policy is underpinned by the following pieces of legislation that relate to adult safeguarding. Further information about each Act and Policy is listed in Appendix 2.

- UN Convention on the Rights of Persons with Disabilities
- European Convention on Human Rights 2003
- Assisted Decision Making (Capacity) Act 2015
- National Vetting Bureau (Children and Vulnerable Persons) Acts 2012-2016.
- The Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012
- The Domestic Violence Act 2018
- Data Protection Act 2018
- Protected Disclosures Act 2014

The HSE Safeguarding Vulnerable Persons at Risk of Abuse Policy and Procedures (HSE, 2014) is the current policy for HSE / HSE funded services. Although Kerry Community Training Centre is not a HSE funded service, it is a national policy and provides guidance for any organisation who may engage with adults. The HSE has indicated that it plans to transition to a revised safeguarding policy following the publication of a health sector-wide policy by the Department of Health. In addition, The Law Reform Commission are due to publish a report on the future regulation of adult safeguarding services.

In 2019, the Health Information & Quality Authority with the Mental Health Commission published **National Standards for Adult Safeguarding**. These standards have been approved by the Minister for Health and places a responsibility on all residential services for older people and people with disabilities and all publicly funded health and social care services to begin implementing these national standards. Therefore, it is envisaged that all health services will adopt these national standards, approved by the Minister for Health, to promote people's rights, health and wellbeing and reduce the risk of harm. These standards are a source of best practice approaches for any organisation working with adults.

Kerry Community Training Centre has structured its policy approach to safeguarding adults in line with the Health Information & Quality Authority / the Mental Health Commission published National Standards for Adult Safeguarding (2019) and HSE policy, guidance, and resources.

1.3 Principles to Safeguard Adults from Harm

Kerry Community Training Centre has adopted the adult safeguarding principles as set out in the Health Information & Quality Authority (HIQA) with the Mental Health Commission (MHC) Adult Safeguarding National Standards (2019). These principles should not be viewed in isolation, as all the principles interact with each other to ensure that 'services' (organisation wide and specific programmes or services) place people using their services at the centre of what they do. The principles are:

Empowerment

People are empowered to protect themselves from the risk of harm and to direct how they live their lives on a day-to-day basis according to their will and preferences.

A rights-based approach

People's rights should be promoted and protected.

Proportionality

Staff should take proportionate action which is the least intrusive response appropriate to the risk presented and takes account of the person's will and preferences.

Prevention

It is the responsibility of services to act before harm occurs.

Partnership

Effective safeguarding requires working in partnership.

Accountability

Organisations are accountable for safeguarding people using their services.

Our Safeguarding principles apply to everyone in our organisation and staff must conduct themselves in a way that reflects Kerry Community Training Centre's beliefs and values.

It is the responsibility of Kerry Community Training Centre's Board of Directors and Senior Leadership Team to ensure that policies and procedures are in place and operating effectively. This Safeguarding Adults Policy reflects national policy and legislation and will be reviewed every two years or sooner if there has been a material change in any issues to which it refers.

1.4 Risk Management

Kerry Community Training Centre has effective procedures for assessing and managing risks regarding safeguarding, in line with our risk management policy. In assessing and managing risks, the aim is to minimise the likelihood of a risk occurring or its potential impacts. In safeguarding terms, the aim of risk assessment and management is to prevent abuse occurring, to reduce the likelihood of it occurring and to minimise the impacts of abuse by responding effectively if it does occur. We recognise that no endeavour, activity, or interaction is entirely risk-free and, even with good planning, it may not be possible to eliminate all risk.

Our key risk management considerations are:

- The assessment and management of risk should promote independence, real choices, and social inclusion.
- Risks change as circumstances change.
- Risk can be minimised but not eliminated.
- Identification of risk carries a duty to manage the identified risk.
- Involvement from adults, their families (where appropriate), advocates and partners from a range of services and organisations helps to improve the quality of risk assessment and decision making.
- Defensible decisions are those based on clear reasoning.
- Risk-taking can involve everybody working together to achieve desired outcomes.
- The standards expected of staff must be clear, communicated and adhered to.
- Sensitivity should be shown to the experience of people affected by any risks that have been taken and where an event has occurred.

Section 2 – Roles and Responsibilities

The following fundamental safeguarding practice principles apply to all staff in our organisation. It is the duty of all staff to be familiar with this policy and procedures. The HSE has 13 key principles which Kerry Community Training Centre has adopted as best practice approaches

- Safeguarding is everyone's responsibility
- Everyone must have a zero-tolerance approach to any form of abuse.
- The duty to share information about a safeguarding concern, in line with Kerry Community Training Centre's Procedures, rests with the person who has the concern.
- There should be no delay in sharing information about a safeguarding concern.
- It is necessary to ensure the immediate safety of the adult at risk of abuse.
- There should be no delay in implementing a safeguarding protection plan.
- Good collaborative working is central to safeguarding. Information about concerns of abuse should be shared with relevant organisations (e.g. the HSE and if required, A Garda Síochána) within the rules of data protection and client confidentiality.
- Any information about an adult must be managed appropriately and shared or processed based on "necessity" with relevant statutory authorities.
- Safeguarding is founded on an approach where the adult is at the heart of all decisions and actions.
- A health or social care professional already known to the adult at risk of abuse, or assigned to them, should be involved in the management of the concern, where possible and appropriate.
- Considerations of capacity and consent are central to adult safeguarding. The right of a person to make decisions and remain in control of their life must be respected.

There are a few key roles within Kerry Community Training Centre that support those working with adults who may be vulnerable and at risk, to carry out their safeguarding responsibilities effectively.

2.1 *Role of All Staff*

Adult safeguarding is everyone's responsibility. All Kerry Community Training Centre staff must be alert to the possibility that adults with whom they are in contact may be vulnerable and at risk from abuse or neglect and respond appropriately to protect adults at risk of abuse. Promote the welfare of adults in all interactions.

- Be aware of Kerry Community Training Centre safeguarding policy and procedures.
- Comply with the policy and procedure to ensure the safeguarding of adults at risk from all forms of abuse.
- Support an environment in which adults are safeguarded from abuse or abusive practices through the implementation of preventative measures and strategies.
- Avail of any relevant training and educational programmes.
- Be aware of the signs and indicators of abuse.
- Support adults at risk of abuse to report any type of abuse or abusive practice.
- Ensure that any concerns or allegations of abuse are reported in accordance with this policy.

2.2 Role of Managers

Kerry Community Training Centre's managers will ensure:

- This policy for the safeguarding of adults at risk of abuse is in place and staff are compliant with its procedures.
- Procedures are adhered to when a concern of abuse is raised.
- A culture of zero tolerance for any type of abuse or abusive practice.
- Our organisations guiding principles are promoted.
- The policy and procedures are made available to all staff and safeguarding information is available to all persons accessing services and their advocates and families, in an accessible format.
- All staff receive the appropriate information/training about the implementation of this policy and procedure suite.
- A record of all staff "sign off" on Kerry Community Training Centre policies, procedures and guidelines pertaining to adult safeguarding is maintained.
- Safeguarding is part of our organisations Induction Programme.
- Any concerns or allegations of abuse are managed in accordance with this policy and procedures.

2.3 Role of the Safeguarding Coordinator

The Safeguarding Coordinator in Kerry Community Training Centre is Terrance Glancy.

Kerry Community Training Centre's Safeguarding Coordinator will:

- Be available to receive concerns or allegations of abuse regarding adults.
- Collate relevant information.
- Ensure the appropriate people are informed and work collaboratively to ensure the necessary actions are identified and implemented to keep the adult safe from harm.

- Ensure all reporting obligations are met (internally to the service and externally to the statutory authorities) - this includes sharing of information with the HSE and/or A Garda Síochána and/or TUSLA and/or HIQA.
- Contribute, if appropriate, to Safeguarding Initial Assessments undertaken by health and care professionals.
- Support the line manager and other personnel in addressing the issues arising.
- Maintain appropriate records.

Section 3 – Recognising and Responding to Safeguarding Concerns

All Kerry Community Training Centre staff have a responsibility to recognise indicators of abuse, raise a concern and respond appropriately.

Concerns or allegations of abuse may come to light in one of a number of ways:

- Direct observation of an incident of abuse.
- Disclosure by the adult themselves.
- Disclosure by a relative or friend.
- Observation of signs or symptoms of abuse.
- Anonymous reporting.
- Concerns raised through a complaint process.
- During our organisation's engagement with the adult.

Kerry Community Training Centre staff must be aware that abuse can happen in many different contexts or settings including the following but not limited to:

- **Stranger Abuse** - abuse by someone unfamiliar to the adult
- **Familial Abuse** - abuse by a family member
- **Professional Abuse** - misuse of power and trust by professionals and a failure to act on suspected abuse, poor care practice or neglect.
- **Peer Abuse** - abuse of one adult with a disability by another adult with a disability.
- **Identity Abuse** - the use of personal characteristics that are central to the victim to demean, manipulate or control the person.

3.1 Definitions and Categories of Abuse

The majority of adults can protect themselves and may simply need advice or guidance. Others may require support to protect themselves and require plans to reflect actions which reduce the risk of potential abuse. A minority of people cannot protect themselves adequately from abuse and will require an additional protection. Safeguarding should also be viewed as responding to concerns to prevent abuse across a continuum.

Kerry Community Training Centre recognises that there are a number of adults who may be described as being "at risk of abuse". **For the purpose of this policy the definition of an adult "at risk of abuse" is a person aged 18 years or over, who is at risk of experiencing abuse, neglect, or exploitation by a third party, and lacks mental or physical capacity to protect themselves from harm at this time in their lives.**

Abuse is a single or repeated act, or omission, which violates a person's human rights or causes harm or distress to a person. For the purposes of this policy, abuse is understood to mean abuse by a third party.

Harm: The impact of abuse, exploitation, or neglect on the person. Harm arises from any action, whether by a deliberate act or an omission that may cause impairment of physical, intellectual, emotional, or mental, health and wellbeing.

In line with national guidance from the HSE, there are nine adult safeguarding types of abuse, any, or all of which may be perpetrated as the result of deliberate intent, negligence or lack of insight and ignorance. A person may experience more than one form of abuse at any one time. The nine adult safeguarding categories of abuse are;

1. Physical Abuse
2. Sexual Abuse
3. Emotional/Psychological Abuse (including Bullying and Harassment).
4. Financial or Material Abuse.
5. Organisational Abuse
6. Neglect
7. Discriminatory Abuse
8. Human Trafficking
9. Online or Digital Abuse

Further detail on each category and indicators can be found in Appendix 2.

3.2 Responding to Safeguarding Concerns

If in the course of their work a Kerry Community Training Centre staff member is concerned or has a suspicion about the safety and welfare of an adult who may be at risk of abuse, they will take any immediate actions to safeguard anyone at immediate risk of harm including seeking emergency medical assistance or the assistance of An Garda Síochána, if it is appropriate.

If the adult has made a direct disclosure of abuse:

- Listen to what the adult has to say and reassure them that they are doing the right thing by sharing the information with you.
- Reassure the adult that you are treating the information sensitively and that you will work alongside others to keep them safe from harm.
- Support the adult who may be distressed, by reassuring the person what you will do, in line with Kerry Community Training Centre's Safeguarding Policy and Procedures.
- Advise the adult of the concern as you understand it and always seek to ascertain their will and preference.

Do not:

- Appear shocked or display negative emotions.
- Press the individual for details.
- Make or express judgments.
- Promise to keep secrets.
- Give sweeping reassurances.

Where there is a concern that a criminal offence may have taken place, or a crime may be about to be committed, staff will contact An Garda Síochána immediately.

It is important for staff to preserve evidence through a written record and take steps to preserve any physical evidence (if appropriate).

Section 4 - Reporting a Safeguarding Concern

A concern of abuse or neglect will always elicit a response from Kerry Community Training Centre, as we understand that ignoring the signals or failing to intervene appropriately may result in ongoing or further harm to an adult who may be vulnerable and at risk.

4.1 Reporting Procedure

If a safeguarding concern arises, Kerry Community Training Centre staff will:

- Ensure (in so far as it possible) the adult is safe from immediate danger.
- Contact An Garda Síochána if the adult is in immediate danger.
- Inform Kerry Community Training Centre's Safeguarding Coordinator immediately and at the latest within 24 hours of the incident or suspected concern.
- Complete a clear written record.
 - When the disclosure was made, or when you were told about or witnessed the incident or when the concern first came to light.

- Who was involved and any other witnesses, including other learners and other staff.
- Exactly what happened or what you were told, using the person's own words, keeping it factual and not interpreting what you saw or were told.
- Any other relevant information, for example previous incidents that have caused you concern.

Staff must remember to:

- Include as much factual detail as possible and any other relevant info.
- Make sure you have identified your name on the report and dated it.
- Give the report to Safeguarding Coordinator.
- Safeguarding concerns records are confidential and need to be stored in a safe and secure place.

The Safeguarding Coordinator will:

- Be available to receive information from staff about safeguarding concerns.
- Assess the information received and determine if reasonable grounds exist.
- Submit a report to the HSE Safeguarding and Protection Team and An Garda Síochána (if appropriate) if there are reasonable grounds for concern.

If the Safeguarding Coordinator is concerned about an adult but unsure of whether the concerns should be reported.

- Contact the HSE Safeguarding and Protection Team in the relevant CHO area and An Garda Síochána (if appropriate) to discuss the concern
- This consultation provides an opportunity to discuss the concern in general and to decide whether a formal report of the concern to the HSE Safeguarding and Protection Team in the relevant CHO area and An Garda Síochána (if appropriate), is appropriate at this stage.
- Keep a record of this contact including, date, time method of contact, name of social worker and any advice given.
- Request that the HSE Safeguarding and Protection Team confirm their advice to you in writing for your records.

If the advice from the HSE Safeguarding and Protection Team is there are reasonable grounds for concern, the Safeguarding Coordinator will submit a report to the HSE Safeguarding and Protection Team and An Garda Síochána (if appropriate).

If the advice from the HSE Safeguarding and Protection Team is there are no grounds for concern of abuse, the Safeguarding Coordinator will;

- Make a written record of the reasons for not reporting to the HSE Safeguarding and Protection Team including any actions taken by Kerry Community Training Centre as a result of the concern.
- Provide the staff member who raised the concern with a clear written record of the reasons why the concern is not being reported to the HSE Safeguarding and Protection Team at this stage.
- Advise the staff member who raised the concern that if they continue to be concerned, they are free to make a report to the HSE Safeguarding and Protection Team or An Garda Síochána directly.

If the Safeguarding Coordinator decides not to make a report but the staff member raising the concern believes that reasonable grounds exist, they can make a report directly to the HSE Safeguarding and Protection Team and inform the Safeguarding Coordinator they are reporting independently.

If the adult at risk of abuse is in a HSE or HSE funded service, then the Kerry Community Training Centre Safeguarding Coordinator will inform the Designated Officer / Safeguarding Coordinator for that service.

4.2 *Flow Chart for Reporting Procedure*

M A I N T A I N W R I T T E N R E C O R D S	Concern raised / allegation of Abuse.	W I T H I N D A Y 1
	Staff member immediately ensures adults safety.	
	Staff Member informs his/her Line Manager and Kerry Community Training Centre's Safeguarding Coordinator – the need for support and intervention is considered with the adult (e.g. medical attention if required).	
	An Garda Siochana informed, if appropriate	
	Staff member completes an internal reporting form and sends to the Kerry Community Training Centre's Safeguarding Coordinator.	
	If the information received indicates a concern of abuse to an adult at risk, Kerry Community Training Centre's Safeguarding Coordinator reports the concern to the HSE Safeguarding and Protection Team.	
	Kerry Community Training Centre Safeguarding Coordinator informs senior manager as appropriate.	
	Kerry Community Training Centre 's Safeguarding Coordinator responds to the feedback from the HSE Safeguarding and Protection Team in relation to any appropriate actions required.	
	Kerry Community Training Centre to contribute to any safeguarding plan (as appropriate to the role of Kerry Community Training Centre).	

4.3 *Decision Making Capacity*

Kerry Community Training Centre is committed to the principles and requirements of the Assisted Decision Making (Capacity) Act 2015 and once it commences in law this section of the policy will be updated accordingly. This Act will assist in complying with human-rights obligations contained in the Constitution of Ireland, the European Convention on Human Rights, and the United Nations Convention on the Rights of Persons with Disabilities.

All persons should be supported to act according to their own wishes. Only in exceptional circumstances (and these should be communicated to the adult when they occur) should decisions and actions be taken that conflict with a person's wishes, for example to meet a legal responsibility to report or to prevent immediate and significant harm. As far as possible, people should be supported to communicate their concerns to relevant agencies.

The Act requires staff to presume capacity of a person as a starting position in decision making and to exhaust all possibilities to enable a person to make a decision. It requires staff to gain consent from the person or only those who have legal authority to act for the person. The HSE National Consent Policy (2022) provides detailed guidance regarding consent and capacity, and Kerry Community Training Centre is committed to the principles and best practice set out in the HSE's national Consent Policy.

4.4 *Anonymous and Historical Concerns*

All concerns or allegations of abuse must be reported to the Safeguarding Coordinator regardless of the source or date of occurrence.

Critical issues for consideration include:

- The significance/seriousness of the concern/complaint.
- The potential to obtain independent information.
- Potential for on-going risk.

In relation to historical complaints the welfare and wishes of the person and the potential for on-going risk will guide the intervention. Any person who is identified in any complaint, whether historic or current, made anonymously or otherwise, will be made aware of the information received. The HSE Safeguarding and Protection Teams and TUSLA Child and Family Agency can advise and guide on the most effective course of action, depending on the level of current risk to adults and/or children.

Section 5 - Procedure for Responding to Allegations of Abuse against Kerry Community Training Centre Staff

Should an allegation of abuse in relation to an adult be made against a Kerry Community Training Centre staff member, it will be assessed promptly and carefully by the organisation in accordance with the Kerry Community Training Centre's Safeguarding Adults Policy and Procedure, the rules of natural justice, and any relevant Human Resource procedures and employment law. Kerry Community Training Centre has a dual responsibility in respect of both the adult and the staff member and therefore two separate procedures will be followed:

1. The safeguarding reporting procedure to the HSE/ An Garda Síochána in respect of the adult at risk of abuse.
2. The internal personnel procedure for dealing with allegations of abuse against a staff member, set out in Kerry Community Training Centre's Disciplinary Procedures, which is outlined in the Employee Handbook

An allegation of abuse against a staff member may relate to staff who has:

- Behaved in a way that has or may have harmed an adult.
- Possibly committed a criminal offence in relation to an adult.
- Behaved towards an adult(s) in a way that indicates they may pose a risk of harm of abuse.

When Kerry Community Training Centre receives an allegation against a staff member, **the priority is to ensure that no adult who avails of services is exposed to unnecessary risk** and Kerry Community Training Centre will take necessary protective measures. These measures will be proportionate to the level of risk.

The Safeguarding Coordinator will be informed, and the allegation will be managed in accordance with the reporting procedure set out in in this policy document. The Safeguarding Coordinator will liaise with statutory bodies (HSE, An Garda Síochána) to ensure that actions taken by our organisation do not undermine or frustrate any other process or investigations.

Section 6 - Safeguarding Adults Practice Approaches

6.1 Record Keeping and Storage

Our ability to safeguard adults requires accurate records to be maintained therefore it is essential that all staff keep contemporaneous records of all safeguarding concerns, this includes all contacts, consultations and any actions taken.

All records relating to safeguarding, such as records of concerns, allegations, or disclosures, or reports to statutory authorities will be kept in a safe and confidential manner. All safeguarding records held are managed by the Safeguarding Coordinator and managed in line with Kerry Community Training Centre's Data Protection Policy.

6.2 Confidentiality

Where safeguarding concerns arise, information will be shared on a 'need to know' basis. No undertaking regarding secrecy can be given to adults in relation to safeguarding concerns, disclosures, or allegations. The provision of information to the statutory agencies for the protection of an adult who is vulnerable and at risk of abuse, is not a breach of confidentiality or data protection. Kerry Community Training Centre will cooperate with the HSE and An Garda Síochána in the sharing of information and records as appropriate where a safeguarding issue arises.

6.3 Information Sharing – Adults who may be at risk of abuse

Data protection legislation including the General Data Protection Regulation (GDPR) and the Data Protection Act 1988 to 2018 (together the "Legislation") provide rules which apply to the collection, use and processing of personal information concerning individuals ("data subjects").

Kerry Community Training Centre recognise that in the course of our work situations may arise where the sharing of information does not always require consent to process the personal data of the adult. These are safeguarding situations, where certain conditions are met and there is a legal basis for processing such personal data.

A person raising a safeguarding concern should, as appropriate, be informed that disclosures of information to others including An Garda Síochána and the HSE can occur where certain considerations apply, including situations where:

- An adult at risk is the subject of repeated abuse.
- The risk of further abuse exists.
- There is reason to believe that a crime may have been committed.
- There is a risk of abuse to another person(s) in a vulnerable situation.

- There is reason to believe that the person alleged to be causing concern is a risk to themselves/others.
- There is an existing legal obligation to report such as Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012.

While respecting an adult's right to self-determination, situations can arise where information is suggestive of abuse and/or a crime, although the adult with decision-making capacity has indicated that they do not wish for a safeguarding intervention or wish to make a statement of complaint. If the threat or the risk of abuse is of a serious nature to the adult or another person, our Safeguarding Coordinator will consult with the HSE Safeguarding and Protection team for advice and guidance.

When sharing information regarding a concern of abuse, it is essential to be clear whether the adult is at immediate and serious risk of abuse. If this is the case, it is essential to outline the protective actions to be taken and already in place. The will and preference of the adult at risk, where these have been, or can be ascertained, must be included. The role of others may be important in this regard (advocate/key worker/family/nominated person).

6.4 Self-Neglect Guidance

We are committed to the protection of adults where concern have arisen due to an adult seriously neglecting their own care and welfare and putting themselves and/or others at serious risk. Kerry Community Training Centre understands that self-neglect is not a category or type of abuse, however, it is reasonable to consider self-neglect concerns as part of the wider safeguarding agenda. The definition of self-neglect includes:

- The inability or unwillingness to provide for oneself the goods and services needed to live safely and independently.
- An adult's profound inattention to health or hygiene, stemming from an inability, unwillingness, or both, to access potentially remediating services.
- The result of an adult's inability, due to physical and /or mental impairments or diminished capacity, to perform essential self-care tasks.
- The failure to provide for oneself the goods or services, including medical services, which are necessary to avoid physical or emotional harm or pain.

Self-neglect in adults is a spectrum of behaviours defined as the failure to:

- Engage in self-care acts that adequately regulate independent living or,
- To take actions to prevent conditions or situations that adversely affect the health and safety of oneself or others.

Concerns regarding extreme neglect can arise for a variety of people in diverse circumstances. Therefore, our staff will remain open to considering the possibility that a vulnerable person may not be acting in their own interest and that their welfare is being seriously compromised.

- Considering the possibility of extreme self-neglect is a responsibility and our service to the person availing of services.
- Discuss the concerns with appropriate people and directly with the adult
- If concerns cannot be addressed directly, they will be directed to the HSE Safeguarding and Protection Team who will assist in an assessment of the severity of the situation.

If any staff member has a concern of extreme self-neglect of an adult, the Safeguarding Coordinator must be contacted to consider the details of the concern. The Safeguarding Coordinator can consult with the local HSE Safeguarding and Protection Team for advice and guidance as set out in this safeguarding document suite.

6.5 Concerns about an Adult's Welfare

During the course of how we work with adults, concerns regarding the welfare of an adult may emerge. Whilst this Safeguarding Adults policy addresses concerns of possible abuse to an adult at risk, we cannot ignore welfare concerns. Welfare concerns are different to a specific concern of abuse. Sometimes, welfare concerns, when explored in more detail can also raise a concern of abuse and any concern of abuse to an adult at risk must be responded to in line with this policy and procedure.

For welfare concerns, where there is no concern of abuse to the adult, it is advisable to consult with the Safeguarding Coordinator in Kerry Community Training Centre. In some situations, it may be appropriate for a conversation to take place with the adult with a view of seeking consent to access help and support. If the adult does not wish for any help or support and staff in Kerry Community Training Centre remain concerned about the adult's welfare, it is possible to access advice from the HSE or other organisations (without sharing personal identifiable information unless directed to do).

It is important to document welfare concerns as at times a pattern of welfare concerns may require action in line with this Safeguarding Adults Policy and Procedure.

The following information sources and organisations may be of assistance in providing help and support for welfare concerns regarding adults. Any action taken should be with the consent of the adult, who may indicate their preference for the type of support and assistance. (This list is not intended to be an exhaustive and complete list).

1. The persons GP, with their agreement
2. HSE Disability Services - www.hse.ie
3. Samaritans - www.samaritans.org
4. Pieta House - www.pieta.ie
5. Citizens Information - www.citizensinformation.ie
6. HSE Addiction Services - www.hse.ie

Appendices

Appendix 1 - *Legalisation*

There are a number of key pieces of legislation that relate to adult safeguarding. The information below gives a brief overview of relevant legislation, (it is not intended as legal opinion or advice, and the original legislation should be consulted as required).

Assisted Decision Making (Capacity) Act was signed into law on 31 December 2015. The Government has committed to full commencement in November 2022. The Act provides for the reform of the law relating to persons who require or may require assistance in exercising their decision-making capacity, whether immediately or in the future. The Act applies to everyone over 18 and will have wide-ranging implications.

National Vetting Bureau (Children and Vulnerable Persons) Acts 2012-2016. Under these Acts it is compulsory for employers to obtain vetting disclosures in relation to anyone who is carrying out relevant work with children or vulnerable adults. The Acts create penalties for persons who fail to comply with their provisions. Statutory obligations on employers in relation to Garda vetting requirements for persons working with children and vulnerable adults are set out in the Acts.

The Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012 came into force on 1st August 2012. It is an offence to withhold information on certain offences against children and vulnerable persons from An Garda Síochána.

The Domestic Violence Act 2018 replaces the Domestic Violence Act 1996 and the Domestic Violence (Amendment) Act 2002 and improves legal protections available to victims of domestic violence. The Act introduces factors that the Court shall consider when deciding on an application for an order under the Domestic Violence Act. These factors include (but are not limited to); history of violence by the respondent towards the applicant or any dependent person (i.e. child), any conviction of the respondent for an offence under the Criminal Justice (Theft and Fraud Offences) Act 2001 that involves loss to the applicant or child, increase in severity or frequency of violence towards the applicant or their children, exposure of children to violence inflicted by the respondent on the applicant or other child, any action of the respondent, not being a criminal offence, which puts the applicant or a dependent person in fear for his or her own safety or welfare.

Data Protection Act 2018 applies to the processing of personal data. It gives a right to every individual, irrespective of nationality or residence, to establish the existence of personal data, to have access to any such data relating to him or her, and to have inaccurate data rectified or erased. It requires data controllers to make sure that the data they keep are collected fairly, are accurate and up to date, are kept for lawful purposes and are not used or disclosed in any manner incompatible with those purposes. It also requires both data controllers and data processors to protect the data they keep and imposes on them a special duty of care in relation to the individuals about whom they keep such data.

Protected Disclosures Act 2014 is defined in the Protected Disclosures Act 2014 as a disclosure of relevant information related to wrongdoing made by a worker in the manner specified under the Act. The Protected Disclosures (Amendment) Bill 2022 passed both Houses of the Oireachtas. A commencement order is expected shortly.

Appendix 2 – *Definitions of Abuse HSE link to be made*

1. Physical Abuse

The use of physical force, the threat of physical force or mistreatment of one person by another which may or may not result in actual physical harm or injury. Physical abuse includes:

- Hitting, slapping, pushing, shaking, burning, scalding, and pulling hair, kicking, exposure to heat or cold, force-feeding, misuse of medication, inappropriate restraint, or sanctions.
- All forms of physical force contact which results in harm to another person including excessive force in the delivery of personal care, forced feeding, rough handling, unwarranted physical pressure (gripping, squeezing) shaking, misuse of incontinence wear, hitting with a weapon or implement, misuse of medication, failing to give medication, poisoning, restricting activities or forcing activities.
- Inappropriate deprivation of liberty (e.g., being locked in/forced confinement in an area), denied treatment or experiencing threat of physical violence.

Indicators of physical abuse:

- Unexplained signs of physical injury – bruises, cuts, scratches, burns, sprains, fractures, dislocations, hair loss, missing teeth.
- Unexplained/long absences at regular placement.
- The adult appears frightened, avoids a person, demonstrates atypical new behaviour; asks not to be hurt.

2. Sexual Abuse

Any behaviour (physical, psychological, verbal, virtual/online) perceived to be of a sexual nature which is controlling; coercive, exploitative, harmful, or unwanted towards another person. Abusive acts of a sexual nature include but are not limited to:

- Rape and sexual assault, indecent exposure, intentional touching, fondling, molesting, sexual harassment, or sexual acts to which the adult has not consented, or could not consent, or to which he or she was compelled to consent.
- Sexual violence and abuse can take many forms and may include non-contact sexual activities, such as indecent exposure, stalking, grooming. It may involve physical contact, including but not limited to non-consensual penetrative sexual activities or non-penetrative sexual activities, such as intentional touching (known as groping), exposure of the sexual organs and any sexual act intentionally performed in the presence of another without their consent.
- Inappropriate touch anywhere, masturbation of either or both persons, penetration or attempted penetration of the vagina, anus, or mouth, with or by a penis, fingers or other objects.

- Exposure to pornography or other sexually explicit and inappropriate material enforced witnessing of sexual acts, sexual media harassment.
- Inappropriate and sexually explicit conversations, remarks, threats, intimidation, inappropriate looking/ touching, sexual teasing/innuendo, grooming, taking sexual photographs/video footage, making someone watch sexual acts/ pornography, making someone participate in sexual acts. Includes digital/ social media and online sexual abuse/ production of sexual images.
- Female genital mutilation (FGM) is considered a form of both physical and sexual abuse.

Indicators of sexual abuse:

- Trauma to the genitals, breast, rectum, mouth, injuries to face, neck, abdomen, thighs, buttocks, STI's and human bite marks.
- An adult demonstrates atypical behaviour patterns such as sleep disturbance, incontinence, and aggression, changes in eating patterns, inappropriate or unusual sexual behaviour and anxiety attacks.
- Indicators of sexual exploitation would include poor concentration, withdrawal, sleep disturbance.
- Excessive fear/apprehension of, or withdrawal from, relationships.

Fear of receiving help with personal care and reluctance to be alone with a particular person.

3. Emotional/Psychological Abuse (including Bullying and Harassment)

Behaviour that is psychologically harmful to another person and which inflicts anxiety or mental distress by threat, humiliation, or other verbal/non-verbal conduct.

Emotional or psychological abuse includes:

- Failing to value the individual, abuse of power in which the perpetrator places their opinion/view/judgement as superior to the individual, harsh value judgements, conveying to the individual that they are worthless, unloved, inadequate, or a nuisance.
- Threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks, patronising approaches to care and support for example 'elder speak' or spoken to like a child, intolerance of religious beliefs, intolerance of cultural beliefs, and in the case of married/cohabiting couples denying the right to shared and appropriate accommodation.
- Failure to show interest in or provide opportunities for a person's emotional development or need for social interaction.
- Outpacing – where information /choices are provided too fast for the adult to understand, putting them in a position to do things or make choices more rapidly than they can tolerate.

- Denying the individual, the opportunity to express their views in a manner which is comfortable to them, deliberately silencing them or ignoring them or their communications written or spoken, making a subjective comment about the way an individual chooses to express themselves, imposing unrealistic expectations on the individual.
- Deprivation of liberty, persistent criticism, sarcasm, humiliation, hostility, intimidation or blaming, shouting, cursing, or invading someone's personal space.
- Unresponsiveness, not responding to calls for assistance or deliberately responding slowly to a call for assistance.
- Risk of abuse via technology.

Indicators of emotional/psychological abuse:

- Mood swings, incontinence, obvious deterioration in health, sleeplessness, and feelings of helplessness/hopelessness, extreme low self-esteem, tearfulness, self-abuse or self-destructive behaviour.
- Challenging or extreme behaviours; anxious, aggressive, passive or withdrawn.
- The carer-person in need of care relationship may be vulnerable to abuse in both directions, neither deliberate but can be very harmful. Co-dependent relationships need to be considered as a new phenomenon with adults at risk of abuse and a potential risk from relatives with mental health or addiction issues.

4. Financial or Material Abuse

The unauthorised and improper use of funds, property or any resources including pensions, or others statutory entitlements or benefits. Financial abuse involves an act or acts where a person is deprived of control of their finances or personal possessions or exploited financially by another person or persons. This may include:

- Theft, coercion, fraud, undue pressure in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions, or benefits.
- Misuse of power of attorney and not contributing to household costs where this was previously agreed.
- Misusing or stealing the person's property, possessions or benefits, mismanagement of bank accounts, cheating the service user, manipulating the service user for financial gain, or putting pressure on the service user in relation to wills property, inheritance, and financial transactions.
- Denial of access to money or property, not contributing to household costs, use of bank and credit cards without permission, running up debts, forged signatures, deliberately overcharging for services activities/required treatments/therapies.

Indicators of financial abuse:

- No control over personal funds or bank accounts
- Misappropriation of money, valuables, or property
- No records or incomplete records of spending, discrepancies in the adult's financial records
- Forced changes to wills
- Not paying bills, refusal to spend money, insufficient monies to meet normal budget expenses

5. Organisational Abuse

The mistreatment of people brought about by the poor or inadequate care or support or systemic poor practices that affect the whole care setting. This can occur in any organisation or service, within and outside Health and Social Care provision. Organisational abuse may occur within a culture that denies, restricts, or curtails privacy, dignity, choice, and independence. It involves the collective failure of a service provider or an organisation to provide safe and appropriate services and includes a failure to ensure that the necessary preventative and/or protective measures are in place. Organisational abuse can be brought about by poor or inadequate care or support services, or systematic poor practice that affects the whole care setting. It can occur when an individual's wishes and needs are sacrificed for the smooth running of a group, service, or organisation.

Organisational abuse can be a one-off incident or repeated incidents and include:

- Neglect or poor standards of professional practice, which might be because of culture, structure, policies, processes, or practices within the organisation.
- Systematic and repeated failures culturally inherent within the organisation or service may be considered as organisational abuse.
- Failure to afford people the opportunity to engage socially and be involved in hobbies/activities that are meaningful to them, which in turn results in a failure for their psycho-social needs to be met.
- It can occur when service users are treated collectively rather than as individuals.
- Service user's right to privacy and choice not respected.
- Staff talking about an adult's personal or intimate detail in a manner that does not respect a person's right to privacy.

Indicators of organisational abuse include:

- Inflexible regimes and rigid routines which violate the dignity and human rights of the adults and place them at risk of harm
- Lack of, or poor-quality staff supervision and management. High staff turnover. Lack of training of staff and volunteers. Poor staff morale
- Poor record keeping. Poor communication with other service providers
- Lack of personal possessions and clothing, being spoken to inappropriately
- Poor governance of Staff and breaches of professional codes of practices

- The absence of visitors, family and friends discouraged from visiting
- Lack of flexibility and choice for those availing of services

6. Neglect

The withholding of or failure to provide appropriate and adequate care and support which is required by another person. It may be through a lack of knowledge or awareness, or through a failure to take reasonable action given the information and facts available to them at the time. Neglect and acts of omission include:

- Ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life such as medication, social activities, leisure/ educational opportunities or adequate nutrition and heating.
- Ignoring need, either physical or medical, knowing that a need exists, but choosing to not address that need, thereby leaving the person at risk of deterioration in health and wellbeing.
- Withdrawing or not giving help that an adult need's causing them to suffer for example malnourishment, untreated medical conditions, unclean physical appearance, improper administration of medication or other drugs, being left alone for long periods when the person requires supervision or assistance.
- Not meeting the social, psychological, or spiritual needs and not addressing required environmental factors/adaptations to adequately meet the needs of the adult.

Indicators of neglect include:

- Poor personal hygiene, dirty and dishevelled in appearance, and poor state of clothing
- Non-attendance at routine health appointments
- Social isolation
- Whilst there is a positive duty to provide care when in receipt of state carer's allowance there is no legal obligation on carers to continue in the caring role. Assessment of indicators needs to be mindful of identifying carer stress where the carer cannot cope or manage with the responsibilities.

7. Discriminatory Abuse

Unequal treatment, harassment or abuse of a person based on age, disability, race, ethnic group, gender, gender identity, sexual orientation, religion, family status or membership of the travelling community. Examples include:

- Being treated differently by individuals, family, organisations, or society because of any of the above
- Assumptions about a person's abilities or inabilities
- Not speaking directly to the person but addressing an accompanying person

Indicators of discriminatory abuse include:

- Isolation from family or social networks
- Indicators of psychological abuse may also be present

8. Human trafficking/Modern Slavery

Human trafficking/modern slavery involves the acquisition and movement of people by improper means, such as force, threat, or deception, for the purposes of exploiting them. It can take many forms, such as domestic servitude, forced criminality, forced labour, sexual exploitation and organ harvesting. Victims of human trafficking/ modern slavery can come from all walks of life; they can be:

- Male or female, children, or adults
- They may come from migrant or indigenous communities
- Any concerns that an adult at risk may be a victim of human trafficking/modern slavery must be reported to An Garda Síochána.

Indicators of Human trafficking/Modern Slavery include:

- People who have been trafficked may believe that they must work against their will
- Victims may be unable to leave their work environment and show signs that their movements are being controlled
- Victims may show fear or anxiety
- May be subjected to violence or threats of violence against themselves or against their family members
- May suffer injuries that appear to be the result of an assault.

9. Online or Digital Abuse

An abusive or exploitative interaction occurring online or in a social media context.

The risk of abuse via technology including:

- Exposure and uploading of inappropriate abusive material without consent
- Digital/social media and online sexual abuse/ production of sexual images
- Online financial abuse, theft of personal information
- Persuasion towards self-harm

Indicators of Online or Digital Abuse include:

- Becoming withdrawn, suddenly behaves differently, anxious, clingy, depressed, aggressive, problems sleeping, eating disorders
- Victim soiling their clothes, taking unnecessary risks, missing education/ training, changing eating habits, developing obsessive behaviours, having nightmares, increasing drug/alcohol usage