

Section 4:

Vulnerable adults

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Introduction

As a church community we recognise the importance of providing a safe and caring environment. The church has an obligation to follow good practice and principles in relation to the care of vulnerable adults and contribute towards our communities becoming places that are safer and free from prejudice.

The church as a whole desires that all, including vulnerable groups within our society are able to take part in the life of the church in an environment which helps them to grow spiritually and cares responsibly for them.

Vulnerable people constitute a large section of our communities. The needs of individuals can change; they may need care and support to live at home or in suitable accommodation which satisfies their needs.

Church members who visit people's homes and hospitals or run activities within the church must be alert to signs of poor care and support. This can include extended family members, and can involve listening to those who have concerns about vulnerable adults.

Policy statement

It is the policy of the Presbyterian Church of Wales, the Union of Welsh Independents and the Baptist Union of Wales to safeguard the welfare of all vulnerable adults with whom we work. As churches, we are fully committed to safeguarding the wellbeing of our members and those entrusted to our care. Members of the church, paid staff and volunteers will at all times show respect to others, promoting an ethos of listening to vulnerable people and ensuring their safety, conducting themselves in a way that reflects the principles of the Christian Church.

The church will care for vulnerable adults, and will safeguard them by way of good practice in relation to:-

Safer recruitment of workers (section 2)

Promoting good working practice with vulnerable adults (section 4.1)

Training and supporting their workers in their role and in the protection of vulnerable adults (section 4.2)

The procedures and guidelines included in this document should be freely available to all workers and leaders and members within the church.

Who is an 'vulnerable adult'?

An vulnerable adult is someone who is over 18 and may be:

- in need of community care services because of a disability, age or illness, and is unable to take care of him or herself, or
- is unable to stop someone else from harming or exploiting them.

An vulnerable adult may be someone with a learning disability, mental health needs, a physical or sensory impairment, or may be elderly and frail.

However, it is important to note that in relation to regulated activity with adults, the definition focuses on the activities provided which will mean that an adult will be considered vulnerable at that *particular time*. For example, at the point at which someone is receiving help with their personal care, they are considered vulnerable. This does not label adults as 'vulnerable' because of their personal characteristics or location.

Values

All human beings are made by God in His image. The image of God is His gift to us. Jesus treated all with compassion and dignity and particularly those who were most vulnerable.

We have a caring and compassionate God and we too are called to show His love and compassion as we work with others especially the most vulnerable.

Praise be to the God and Father of our Lord Jesus Christ, the Father of compassion and the God of all comfort, who comforts us in all our troubles, so that we can comfort those in any trouble with the comfort we ourselves receive from God. (2 Corinthians 1:3-4)

Churches today have a unique opportunity to show Jesus' love, care and compassion. Every church should model in its worship, fellowship and mission, a community where:-

- All people are listened to, given a sense of belonging, nurtured, and kept safe;
- Carers are supported and encouraged;
- Those who work with vulnerable people are supported.

The church recognises the right of everyone to be treated as an individual first and foremost, whatever their circumstances, and to be encouraged and helped to participate in the life of the church. It declares that threatening, violent or degrading behaviour is never acceptable.

The church recognises that everyone has a right to privacy, to live as independently as possible and to decide how to live his/her life. They have a right to full citizenship, whatever their race, sexuality, disability, age or religion.

The church wishes to promote good working practice, to create a safe and positive environment for vulnerable people in our churches and communities and for those working and volunteering in our midst.

4.1 Good practice when working with vulnerable adults

Within our churches, we have many skilled and compassionate people who share their time, gifts and faith as they work with vulnerable people within our church communities.

Although much of the following section may appear to be “common sense” it is important that, across our different teams and churches, we are all working towards the same stated high standards in our work with Vulnerable Adults. This is also useful to enable us to share expectations of roles with new workers and volunteers.

Good Practice and legislation are not intended to restrict the pastoral work undertaken by our churches in any way but rather shows our commitment to safeguarding and best practice.

A. GOOD PRACTICE PRINCIPLES

1. Listen and find out what the individual’s wishes are.
2. Ensure that everyone has the opportunity to take part or not as they wish. Never force anyone to take part in an activity. Ensure that the choices offered to individuals are fully understood by them.
3. Don’t take things for granted. For example, ask if someone is happy for you to use his/her first name.
4. Use positive and appropriate language, and seek advice when the person with whom you are dealing has specific communication needs.
5. Respect the individual’s independence. Do not encourage the person to become dependent on you.
6. Always treat an individual with dignity and respect their privacy particularly when helping with their personal care requirements.
7. When visiting people, remember to knock on the door before entering the building or room.
8. Be aware of the length of visits.
9. When visiting hospitals or care homes always inform a member of staff that you are there.
10. Touch is an essential part of everyday life and a way of communicating affection, warmth and reassurance. Consider how appropriate physical contact is, whether instigated by you or the other person. We all have different boundaries and these should be respected. Holding a hand or offering a hug is often a good way to comfort, but ask first rather than assume.
11. When dealing with an individual’s financial affairs, it is vital that you do so with honesty, sincerity and transparency.
12. Do not partake in pastoral care which is beyond your responsibility and competence.
13. Don’t dismiss any concerns or worries you may have about someone’s safety. Seek advice or refer the situation straight away.
14. As well as being mindful of the safety of the vulnerable person, also be mindful of your own safety and protect yourself from allegations. Behaviour should be open, transparent and accountable.
15. Generally do not accept material or financial gifts. If it would upset or offend someone if you were to refuse the gift, make sure that you inform an elder/ deacon or leader as soon as possible. This will avoid any accusation or confusion later.
16. Be wise if visiting others on your own.
17. Avoid visiting vulnerable people at night except in emergencies.

B. GENERAL PRACTICAL GUIDELINES

Working with vulnerable people may involve group work, or one to one work with an individual. Not all of these points are relevant to every situation. It is important to note that when individuals visit as a 'friend', not within the formal 'ministry' of the church, these procedures would not apply although this may not always be easy to define.

1) In planning and preparing activities please be aware of the following practical arrangements:-

- Always seek the consent of the individual before undertaking activities with them. This will usually be verbal consent.
- Organisations have a responsibility to assess the risk involved in the activities that are provided. A risk assessment template works as a checklist to make sure you have considered the possible problems and risks in an activity, and helps to plan appropriate steps or actions (see Form 10). We do informal risk assessments all the time without even thinking about it. For example, we would say, "It's dangerous to climb up on the bench I'll go and get a ladder..." Often it is sufficient to do an informal check before the start of an activity but for organised group activities it is usually good practice to complete a written risk assessment at least annually. This can then be shared with trustees and those working together during an activity. (Further guidelines in Appendix 4).
- If possible, each group activity should include someone who has a First Aid qualification.
- Make sure that a telephone is installed on the premises or that a mobile telephone is available during every activity to call for support or assistance.

2) Safe locations

- Ensure that all sites/locations used by the church are safe to carry out any activity.
- Buildings being used for groups or activities should be properly maintained. The external fabric of the building, plus all internal fixtures, fittings, lighting, fire exits and equipment should meet the required safety standards. An annual review should also be carried out and, where necessary, action taken. All electrical equipment should have undergone an electrical safety test. In the UK these are known as PAT (Portable Appliance Testing).
- Always be aware of potential dangers or risks in the premises/building and the equipment and activities. In a building, the following may be considered hazardous: loose-fitting carpets, uneven floors, over-filled cupboards, very high shelves, blocked fire exits, glass doors, missing light bulbs, overloaded power points, trailing electrical cables, loose window fastenings. Be aware of these within the church building, but also in places you are visiting in order to keep yourself safe.
- Move items which could cause injury during the activity, or avoid them.
- Be aware of the location of fire exits, and ensure that they are clear. Know where the nearest fire extinguishers are located. These must be checked regularly by a qualified person. Occasionally, fire drills should be conducted to ensure that everyone know the evacuation procedure to follow in the event of fire. It is helpful to have a record of these.
- Do not use any area where maintenance work is taking place, and 'screen off' such areas where possible.

3) Staffing

- Ensure that there are enough staff and volunteers to carry out all tasks safely and effectively and to support each other.

4) Food and drink

If food and drink are provided during an activity, the following should be considered:

- Workers should follow good personal hygiene.
- Basic health and hygiene regulations should be adhered to.
- All food and drink is stored appropriately.
- Great care should be taken with hot drinks.
- Snacks and mealtimes are appropriately supervised.
- Fresh drinking water is available at all times.
- Systems are in place to ensure that those at risk do not have access to food/drinks to which they are allergic. Typically this can be nuts, milk, eggs, fish, shell fish and gluten.
- If meals are being prepared, the person with responsibility for this should possess a Basic Food Hygiene Certificate or equivalent and be knowledgeable in areas such as food preparation, handling, storage, disposal of waste etc.

5) First Aid

Under the Health & Safety (First Aid) Regulations, it is the duty of every employer to provide at least one First Aid container for each work location. Its contents should be stored in a waterproof container and the designated worker should regularly check the contents.

6) Accident and Incident Record

Any accident, 'near miss' or incident should be recorded, including the date of the incident, details of witnesses and any further action required. (See Form 9: Accident/Incident Form).

7) Insurance

- You must ensure that any activity is covered by an Insurance Policy held either by the local church or the relevant department of the denomination.
- Good practice clearly minimises risk, however, adequate insurance cover should also be in place for each and every activity.
- Appropriate steps should be taken to prevent injury, loss or harm of any kind, and to recognise any situation whereby any vulnerable persons could be harmed during a church activity.
- In the event of an accident/near miss, or if abuse is detected or suspected, it is vital to notify the insurance company immediately, otherwise the insurance cover could be adversely affected.

4.2 Protecting Vulnerable adults

A. How might an adult suffer abuse?

It is important that those who work with vulnerable people are able to recognise signs and symptoms of abuse, because often they are unable or unwilling to ask for help directly.

Abuse is defined as:

A violation of an individual's human and civil rights by another person or persons which results in significant harm. (In Safe Hands, National Assembly for Wales, July 2000)

Abuse may be:

- a single or repeated act, or multiple acts;
- a lack of appropriate action;
- perpetrated as a result of deliberate intent;
- negligence or ignorance; and/or
- an act of omission (failing to act) or neglect.

Abuse may involve the vulnerable adult being persuaded or forced to enter into a financial or sexual arrangement to which they have not, or could not, consent. Abuse can occur in any relationship and fundamentally is an abuse of trust, including failure to meet a duty of care.¹

B. Who abuses vulnerable adults?

Abuse can happen within a family, within institutional premises, or in the community at large. Vulnerable people can be abused by someone whom they know or, more infrequently, by a stranger.

- An abuser is often someone known to the vulnerable person.
- Sometimes, the abuser may be an adult who holds a position of authority and/or trust; this could apply within the church.
- The abuser can be of any background.
- An abuser may be male or female.
- There is no certain way of identifying a potential abuser; they don't appear different from the rest of society.

¹ (November 2010) Wales Interim Policy & Procedures For the Protection Of Vulnerable Adults From Abuse

C. Categories of abuse and possible signs

Type	Definition	Possible indicators
PHYSICAL	An action or a failure to act, including striking, kicking, intentional injury or scalding/burning, lack of nutrition, lack of personal care. Misuse of medication, or refusing to administer medication or inappropriate use of medication to restrict an individual. Restricting sleep. Forcing an individual to work in dangerous circumstances.	<ul style="list-style-type: none"> • A history of unexplained injuries. • Bruises, especially those which are out of sight or of a particular shape. • Pressure injuries. • Hypothermia. • Dehydration. • Poor personal cleanliness. • Being extremely tired. • Incorrect medical records.
SEXUAL	Any sexual act to which the individual has not consented. Denying an individual the right to express his/her sexuality, or refusing to meet that person's needs within socially acceptable boundaries.	<ul style="list-style-type: none"> • Physical symptoms – bleeding, bruising or infection. Stomach pains. • Behaviour which is not understood by a vulnerable adult. • A change in behaviour. • Self-harm; being introverted/ extroverted.
PSYCHO-LOGICAL	Threats, bullying, harassing, belittling, denying one's human rights, denying one's right to privacy. Denying dignity and respect, not including the individual when making decisions, being over-protective, denying the right to take risks, shaming, racism, excluding or confining someone. Inappropriate use of faith/religion. Verbal abuses, making someone feel worthless.	<ul style="list-style-type: none"> • Restless, anxious or quiet when with a carer. • Complaining of being belittled. • Depression. • Being afraid of making decisions. • A change in eating or sleeping habits. • Tearful, feeling that the world is coming to an end. • The carer talking inappropriately or belittling.
FINANCIAL OR MATERIAL	Theft, fraud, pressurising someone to change his/her will, improper use of state benefits.	<ul style="list-style-type: none"> • Unexplained failure to pay bills. Withdrawing money from an account without reason. • Inconsistency in terms of assets and living conditions. • Reluctance to receive help. • Items disappearing, e.g. jewellery, personal effects. • Carer showing excessive interest in a vulnerable adult's finances and assets.
NEGLECT	Lack of care, including preventing or restricting access to healthcare. Failure to care for someone, including medical care. Failure to undertake a risk assessment. Failure to administer medication. Failings in terms of nutrition, heating and personal care.	<ul style="list-style-type: none"> • Poor personal cleanliness. • Depression and loneliness. • Poor nutrition, pressure bruises, lack of medication or too much of it being administered. • Unusually unkempt. • Lack of basic care. • Intentionally placing the individual at risk. • Lack of adequate heating.

INSTITUTIONAL ABUSE

A lack of appropriate care and support stemming from poor practice across the entire care provision.

Institutional abuse thrives when the wishes and aspirations of the individual are sacrificed to maintain the day to day running of the service or organisation.

When care providers utilise unduly strict arrangements, practices, policies and procedures, it can effect negatively on the individual's right to respect, independence, dignity and choice.

Possible indicators of institutional abuse

- Insufficient training and supervision of staff
- Poor management which undermines joint-working, and stifles new ideas and developments
- Lack of flexibility, e.g. enforcing strict times for going to bed or to the toilet.
- Lack of clothing and personal effects
- Failing to motivate individuals to participate in activities, and lack of choice
- Not allowing the individual to express ideas regarding the decor of the establishment
- Lack of choice with menus, and poor menu planning
- Improper use of medical technology
- Abuse of power and control
- Treating those who need care and support with a lack of respect and dignity
- Failing to acknowledge a person's individuality in terms of dress, beliefs, faith/religion, nutrition and culture

D. Initial Response to a Concern or Allegation

If there is a concern that a vulnerable adult may have been abused or a direct allegation of abuse is been made, it is important the person receiving this information does the following:

1) Make notes as soon as possible:

- Write down exactly what has been said, when s/he said it, what was said in reply and what was happening immediately beforehand (e.g. a description of an activity). (You may use Form 11 in Section 7 – reporting a concern form).
- Describe any injury, its size, and a drawing of its location and shape. Write down dates and times of these events and when the record was made.
- Write down any action taken and keep all hand written notes, even if subsequently typed up.
- These notes should be passed on to the church safeguarding co-ordinator to assist them should the matter need to be referred to Adult Social Services or the police. Any referral should be confirmed in writing within 48 hours and you should expect an acknowledgement of your written referral within one working day of receiving it.
- If the church does not have a safeguarding co-ordinator, or deputy, or they are not contactable or they are the subject of the concerns, the statutory agencies should be contacted directly.

2) Seek advice:

- If your church does not have a safeguarding co-ordinator you can contact the IPP Safeguarding Officer or the General Secretary of your denomination.
- The Churches Child Protection Advisory service (CCPAS) can also offer independent advice and operate a 24 hour confidential helpline and website.

3) In urgent cases:

- If there are concerns that someone may have been deliberately hurt or is at risk of ‘significant harm’, contact Adult Social Services or the police straight away.
- If urgent medical attention is needed, an ambulance should be called or they should be taken to hospital.

4) DO NOT:

- Investigate any circumstances, assertions or disclosures yourself. It is not your role or that of the church to decide whether or not abuse has taken place. Your responsibility is to report the matter to the appropriate person.

E. How to respond to an adult who discloses abuse

- Be patient, and sympathise with the complainant.
- Listen carefully, but do not question the person about what has happened or press them to disclose further information.
- Show acceptance of what they say by reflecting back words or short phrases they have used.
- Reassure them that he/she is doing the right thing by disclosing the information to you, and that you are treating the information seriously.
- If in your opinion a vulnerable adult is in serious danger, contact the Police or Adult Social Services immediately.

Do:

- Let the person know what you intend doing, with whom you will share the information and why, and – in simple terms – what will happen next.
- Make detailed notes as soon as possible after the disclosure and date and sign them. Keep it factual and do not express your opinion. Your report/notes could be used at a later date in a court of law.

Do not:

- Promise to keep secret any kind of abuse which is drawn to your attention. For example do not say “This will never happen to you again” or “I won’t mention it to anyone else”.
- Express shock or disbelief.
- Do not discuss the matter with the individual who is accused or suspected of committing the abuse. In no circumstances should you investigate any circumstances, assertions or disclosures. It is not your role or that of the church to decide whether or not abuse has taken place. Your responsibility is to report the matter to the appropriate person.

F. What TO DO IF YOU: HEAR, SEE or SUSPECT SOMETHING?



