

# Adult Protection Policy

# **Adult Protection Policy**

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## **1. Introduction/Policy Statement**

MS Ireland is dedicated to implementing and promoting measures to protect the right of all service users to be treated with dignity and respect and is committed to ensuring that the organisation provides a safe environment which is free from all forms of abuse, including discrimination, bullying, harassment or sexual harassment, neglect and mistreatment. In achieving this aim, MS Ireland is committed to ensuring that there are policies, procedures, guidance and training for staff and service users that prevent any infringement of this right.

MS Ireland acknowledges that a service user may be experiencing harm or abuse at home, in the community, or in some other service. MS Ireland will support employees/volunteers to recognise when someone is experiencing harm or abuse and to report these concerns in line with this policy.

## **2. Purpose/Scope**

The purpose of the document is to:

1. Raise the awareness of employees and volunteers on how to recognise abuse and neglect
2. Provide a reporting procedure where there is a concern that a service user is being abused
3. Provide a procedure for responding to allegations of harm or abuse

When referring to Service Users in this policy the age range is for all adults over the age of 18 years

## **Policy Context**

This policy must be considered within the context of a range of MS Ireland policies and External documents, for example:

- ✓ Health and Safety Policy
- ✓ Supervision and Support Policy
- ✓ Equal Status Acts, 2000 to 2008

## **3. Responsibilities of Employees/Volunteers**

MS Ireland is committed to ensuring the safe delivery of services and therefore it is essential that:

- ✓ All employees/volunteers fully understand their roles and have a clear understanding of the policies and procedures of MS Ireland
- ✓ All employees/volunteers attend training on this protection policy when directed by their line manager
- ✓ All employees/volunteers report their concerns in line with the procedure outlined in this document.

## **4. Procedure**

### **4.1 What is Abuse?**

For the purpose of this policy, abuse is considered to be any form of behaviour that causes harm or distress. Abuse may consist of a single act or repeated over a period of time, it may take one form or a multiple of forms. It may be physical, sexual, psychological/emotional or financial abuse. It may constitute neglect and/or poor

professional practice. It may take the form of incidents of poor or unsatisfactory professional practice, at one end of the spectrum, through to pervasive ill treatment or gross misconduct at the other.

Abuse may take place in many different settings, the home, community, work place setting or service centre etc. it may be perpetrated by parents, siblings, family members, neighbours, professionals, volunteers etc. Situations are rarely as straightforward as these categories and many situations may involve a combination of abuse elements.

### ➤ **Concerns of Abuse**

Good protection practice means that employees/volunteers know how to recognise abuse. This does not mean that they are responsible for deciding whether or not abuse has taken place-even for an expert that is a difficult decision-but they have a responsibility to be alert to behaviour by service users or workers which suggests that something is wrong. An employee/volunteer/service user may become concerned for the safety of a service user in a number of circumstances:

- An employee/volunteer may witness abuse;
- A third party informs the employee/volunteer of their concerns/suspicions regarding a service user;
- A service user discloses to a third party who informs the employee/volunteer;
- A service user discloses to an employee/volunteer that he/she is being abused;
- An employee/volunteer may overhear other people/service users discussing their concerns about a particular incident, employee/volunteer or other service user;
- An employee/volunteer becomes suspicious of unexplained injuries, behaviour or explanations that clearly lead to concerns for the well being of the service user.

There are several forms of abuse any or all of which may be perpetrated as the result of deliberate intent, negligence or ignorance.

### ➤ **Neglect and Acts of Omission**

Neglect can include ignoring medical or physical care needs, failure to provide access to appropriate health care, entitlements, social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.

### ➤ **Emotional/Psychological Abuse**

A person may be emotionally abused by a person providing care, a neighbour, relative or in the relationship between an employee/volunteer and a service user. Unless other forms of abuse are present, it is rarely manifested in terms of physical signs or symptoms. Examples of emotional abuse may include:

1. Persistent criticism, sarcasm, hostility or blaming;
2. Unresponsiveness;
3. Failure to show interest in, or provide appropriate opportunities for, a person's cognitive and emotional development or need for social interaction;
4. Use of unreasonable disciplinary measure or restraint;
5. Disrespect for differences based on social class, gender, race, culture, disability, religion, sexual orientation or membership of the Traveller Community;
6. Threats of isolation or withdrawal of services or supported networks

This list of possible examples should not be considered a complete list of possible indicators but used as a way of alerting staff/volunteers that abuse may be occurring.

### ➤ **Physical Abuse**

Physical abuse is any form of non-accidental injury that causes harm to a person. It may involve:

1. Hitting, shaking, slapping, burning, biting, pushing or kicking
2. Deliberate poisoning
3. Giving inappropriate medication, dangerous amounts of alcohol or illegal substances
4. Suffocation
5. The use of excessive force in delivering personal care e.g. dressing, bathing, administering medication

This list of possible examples should not be considered a complete list of possible indicators but used as a way of alerting staff/volunteers that abuse may be occurring.

### ➤ **Sexual Abuse**

Sexual abuse occurs when a service user is unable or does not give consent to sexual activity and is being “used” by another adult for his/her gratification or sexual arousal. Examples of sexual abuse include:

1. Intentional touching, fondling or molesting
2. Inappropriate and sexually explicit conversations, remarks, text messages and emails
3. Exposure of the sexual organs or any sexual act intentionally performed in the presence of the service user
4. Exposure to pornography or other sexually explicit and inappropriate material
5. Sexual exploitation of a service user, including any behaviours, gestures or expressions that may be interpreted as being seductive or sexually demeaning
6. Sexual activity between an employee/volunteer and a service user who may have diminished capacity to give consent or where the service user was compelled to consent

This list of possible examples should not be considered a complete list of possible indicators but used as a way of alerting staff/volunteers that abuse may be occurring.

### ➤ **Financial or Material Abuse**

The unauthorised and improper use of funds, property or any other resources belonging to a service user. This involves a theft or conversion of money, objects or property belonging to a person. It is accomplished by withholding, using force or through misrepresentation and the denial of access to personal monies, whether within the family or in residential care and also including exploitation, pressures in connection with wills, property, inheritance or financial transactions.

### ➤ **Institutional Abuse**

Institutional abuse occurs when practices or systems are employed by or within the organisation which deny service users their rights of choice, privacy and independence, and when employees/volunteers become desensitised and accept as reasonable, practices which their personal principles would lead them to question outside the organisation.

### ➤ **Discriminatory Abuse**

This included racism, sexism, ageism and other forms of harassment, slurs or similar treatment.

**Note: please refer to Appendix 4 or this document for a list of some indicators of abuse**

## **4.2 Service Users Disclosing Abuse**

### **Procedure**

It is important that a service user who discloses abuse feels supported and facilitated in what, for him or her, may be a frightening and traumatic process. He or she may feel perplexed, afraid, angry, despondent and guilty. A service user who divulges abuse makes a profound act of trust and should be treated with respect, sensitivity and care.

It is important to remember and adhere to the following:

1. React calmly, as over-reacting may alarm the person and compound negative feelings
2. Listen carefully and attentively; be sure to observe carefully and take the person seriously
3. Reassure the person that he/she has taken the right action in telling
4. Do not express any opinions about the alleged abuser
5. Do not make false promises. Do not commit to keeping it a secret. See section 4.3 on Capacity and Consent
6. Do not ask the service user to repeat the story unnecessarily
7. Ask questions only for the purpose of clarity. Be supportive, but do not ask leading questions or seek intimate details beyond those volunteered by the person. Detailed investigative interviews will be carried out, if necessary by HSE staff or by a member of An Garda Síochána
8. Check with the service user that what has been heard and understood by you is accurate
9. Explain and ensure that the service user understands the procedures which may follow and ensure that you discuss with them what they would like to happen next. MS Ireland has an obligation to follow up with any concerns but we must respect the wishes of all service users. Please refer to Section 4.4 for guidelines on how to handle a concern.
10. Make a record of the conversation using the service user's own words as soon as possible, in as much detail as possible.

Note: Please refer to the MS Ireland Internal Adult Protection Reporting Form in Appendix 2 of this document for guidance and assistance with recording this information.

### **4.3 Capacity and Consent**

Where concerns exist about adult protection due regard must be given to an adult's mental capacity to make decisions or to consent as to what is happening to them. An adult may have the capacity to make these decisions or they may have diminished capacity for example, through dementia or a learning disability. In such situations, they may be less able to protect themselves, or to avoid risk situations or to understand what is happening to them. In circumstances where there is defined/documentated evidence of a person's diminished capacity, MS Ireland believes it has a duty of care to report abuse and therefore requires its employees/volunteers to report such concerns in line with this procedure.

In situations where the service user has the capacity to understand what is happening to them and informs a staff member/volunteer about abuse/neglect, the staff member while respecting the service users' rights, must not agree to confidentiality and must inform the service user that they will be bringing this information to the attention of their line manager and following MS Ireland procedure as outlined in this policy.

MS Ireland acknowledges that service users, who are vulnerable, may experience barriers when it comes to reporting or disclosing abuse or neglect. Service users may be either unwilling to report abuse or co-operate with investigations due to a number of issues such as:

A lack of capacity to report

A fear of the abuser

A lack of awareness of help available or how to access such help

A lack of awareness that what they are experiencing is abuse or neglect

This can raise some ethical issues for staff/volunteers in respecting the service users' right to self determination and staff/volunteers exercising their duty of care to protect a person from abuse or neglect and report incidents of abuse. It may be necessary for staff/volunteers to override the wishes of the service user in order to prevent serious harm for example in cases of serious physical or sexual assault. However, the final decision whether to report the concern outside of the organisation must be made with the service user in all cases. If the service user refuses to report to the outside authorities every effort must be made to support this person and work with them to empower them to make the right decision to rectify any abuse they may be experiencing.

### **4.4 MS Ireland Adult Protection Reporting Procedure**

**The primary responsibility of the person who first suspects or is told of abuse is to ensure the safety of the person. The service user's welfare and safety must be the employee/volunteer's overriding and paramount concern.**

**It is not the responsibility of the employee/volunteer to prove the allegation. All concerns/suspicious should be reported using MS Ireland's Adult Protection Structure and Reporting Procedure as outlined below**

Any employee/volunteer who is concerned about the safety or wellbeing of a service user or receives an allegation of abuse should record their concerns/information and report the matter as soon as possible to their line manager. If for any reason the employee/volunteer does not wish to contact the line manager they must report their concern to the Services Manager.

The following procedure should be followed when dealing with any suspicion/allegation of abuse of an adult service user:

1. All information relating to a concern or allegation of adult abuse must be treated in the strictest confidence
2. Where an employee/volunteer has reason to be concerned about the safety or welfare of any adult service user that they come in contact with in the course of their work, they must report it to their line manager. If the line manager cannot be contacted the Services Manager must be contacted.
3. The adult service user that is at the centre of the concern must be kept informed and be involved at all stages of the decision making process. This is very important as they are an adult and need to be consulted at every stage
4. If the adult service user is likely to be at risk of serious or immediate harm or has just experienced significant harm, the Line Manager should be informed immediately that this has been discovered.
5. The incident(s) which raised the concern must be documented accurately by the employee/volunteer as soon as possible after it occurs. Only factual details should be recorded, an employee/volunteer's feelings should not be part of this record. The employee should store the record in a private secure place until it is handed over to the Line Manager/ Services Manager.
6. The Line Manager/Services Manager will discuss the report and make a decision with the consent of the adult on whether the identified concern is reported on to the HSE/Gardai.
7. The Employee/Volunteer will be informed of the decisions of the Line Manager/Services Manager.
8. If the employee/volunteer is dissatisfied with a decision not to refer to the HSE, they may contact the HSE directly themselves, but must notify the Services Manager of their actions
9. At any time if the Line/Services Managers are unsure as to whether they should refer or not, they should seek advice/consultation with the HSE disability manager in the adults area, or the Senior Case Worker
10. Consideration will also be given to the adult service users next of kin being notified. The Line Manager/Services Manager will provide direction on how this will be done as particular care should be taken especially if this will cause increased risk for the adult service user. Consideration will also be given to the wishes of the adult service user and their capacity to consent
11. The Line Manager/Services Manager will liaise with the Statutory Authorities (HSE and Gardai) on behalf of MS Ireland on any ongoing matters related to the referral
12. Employees and volunteers may be required to attend a case discussion or case conference if requested by the HSE

The Line Manager/Services Manager may at any time seek advice and guidance from the Area Manager for Disability Services in the relevant HSE area of the Senior Case Worker (for Elder Abuse)

An employee/volunteer who witnesses another employee/volunteer engaging in inappropriate behaviour towards a service user should intervene or seek help to stop the behaviour. The employee./volunteer should ensure that the service user is not in any immediate danger and receives the necessary treatment and support.

Any allegation of abuse made against an employee/volunteer will be managed by the Line Manager/Services Manager which will include the Manager of Human Resources.

## **5. Protection to Persons Reporting Abuse**

An employee/volunteer is protected from a claim of defamation in reporting their concerns provided they comply with the procedure outlined within this policy. MS Ireland is also committed to ensuring that employees and volunteers will be protected and supported in raising adult protection concerns. (see Appendix 3)

## **6. Confidentiality and Record Keeping**

It is essential that all information within MS Ireland and the information exchanged between HSE and An Garda Siochana is treated with the utmost confidentiality in order to safeguard the privacy of the service users and families concerned and to avoid prejudicing any subsequent legal proceedings

Information should only be shared with individuals who need to know and are involved in the reporting procedure for dealing with suspicions or allegations of abuse.

### **Appendix 1.**

#### **Services Manager**

The Services Manager is responsible for receiving adult protection concerns. She is responsible for :

- Receiving adult protection concerns
- Liaising with Line managers regarding adult protection concerns
- Ensuring that the procedure outlined in this policy are complied with
- Establishing contact with local HSE adult protection services or commissioning manager
- Participating in team discussions as required

#### **Line Managers**

All Line Managers have a duty to ensure the safe operation of all services to adults and that the guidance and procedures outlined in this document are complied with. Line Managers are also responsible for:

- Ensuring that adult protection concerns are reported in line with the Adult Protection Policy
- Ensuring that employees/volunteers are aware of their responsibilities in reporting adult protection concerns
- Ensuring that employees/volunteers are supervised and supported appropriately
- Supporting staff who raise adult protection concerns
- Liaising with the Services Manager.

### **Appendix 2**

#### **Private and Confidential Internal Adult Protection Reporting Form**

**In case of emergency or outside HSE office hours, contact should be made with An Garda Siochana**

**Please read these instructions carefully.**

The Reporting Form is to be used by employees/volunteers who need to record a particular concern or incident that they have come across. This record is to be filed securely until it is passed on to the Line Manager who will manage the process for dealing with the concern. In the case of allegations of abuse, this information will assist in assessing the level of risk to the person or support service required.

Instructions for filling out this form:

- Please fill in as much information and detail as is known to you.

- Do not record your opinions, only use facts that have been witnessed by you or disclosed to you.
- If the information requested is not known to you, please do not investigate but state **'not known'**.
- Write clearly insuring that the record can be read as this may be presented to the appropriate agencies as part of the report.
- Be sure to sign and date the form.
- **Do not leave this form lying around** or on a desk. File it securely until it is handed over to the Line Manager in your region. If it is posted please mark it 'strictly confidential'. Do not fax this form.

**\* Note a separate form must be filled out for each concern being reported.**

**1. Record details of concern(s), allegation(s) or incident(s), dates, times, who was present, description of any observed injuries, parent's view(s), person's view(s) (if known): (Please use extra paper if needed)**

**2. Details of Complainant:**

Name: \_\_\_\_\_ Date of Birth if known: \_\_\_\_\_

Address: \_\_\_\_\_

Next of Kin: \_\_\_\_\_

Details of Witnesses \_\_\_\_\_

**3. Details of Person Recording Concerns:**

Name: \_\_\_\_\_ Position in MS Ireland \_\_\_\_\_:

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Nature and extent of contact with Adult/Family \_\_\_\_\_

**4. In the case of a scribe filling out this form for the person named in point 4 please give details of this person:**

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**5. Details of the Line Manager that this form has been passed to:**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Date Form Passed On: \_\_\_\_\_ Received by Hand or Post: \_\_\_\_\_

MS Ireland and the HSE aim to work in partnership. If you are making this report in confidence you should note that MS Ireland and the HSE cannot guarantee absolute confidentiality as:

- A Court could order that information be disclosed;
- Under the Freedom of Information Acts, 1997 and 2003, the Information Commissioner may order that information be disclosed.

## **Appendix 3**

### *Defence of Qualified Privilege*

The Common Law provides a defence, in particular circumstance, to individuals who make verbal or written statements of a kind, which could expose their author to a claim of defamation if such statements were made in different circumstances. The defence exists in recognition of the fact that there are circumstances in which individuals have to be able to speak freely without fear of adverse legal consequences.

Qualified privilege is a possible defence against a defamation claim where the person who makes a report of suspected abuse makes the report to an appropriate person only and does so from good motives and where it is reasonable to make the complaint in the circumstances.

In general, qualified privilege attaches to communications where the informant (employee/volunteer) has a legal, moral or social duty to communicate the information (report of abuse, neglect etc) and the recipient (MS Ireland) has a similar duty to receive it

## Appendix 4

### Some Potential Indicators of Adult Abuse

Psychological Abuse	Neglect	Financial Abuse	Physical Abuse	Sexual Abuse
Demoralisation	Dehydration	Unexplained sudden inability to pay bills	Bruises (on different surface areas; may reflect shape of weapon; whether clustered or not)	Trauma about the genitals, breasts, rectum, mouth
Depression	Malnutrition	Unexplained or sudden withdrawal of money from accounts	Laceration (particularly to mouth, lips, gums, eyes, ears)	Injury to face, neck, chest, abdomen, thighs, buttocks
Feelings of Hopelessness/ Helplessness	Inappropriate clothing	Funds diverted for someone else's use	Abrasions	Presence of sexually transmitted disease
Disrupted Appetite/ Sleeping Patterns	Poor Hygiene	Damage to property	Scratches	Human bite marks
Tearfulness	Unkempt appearance	Unexplained disappearance of possession	Burns (inflicted by cigarettes, matches, rope, iron, immersion in hot water)	
Excessive Fears	Under/Over medication	No funds for food, clothes, services	Sprains	
Agitation	Unattended medical needs	Absence of required aids, medication	Dislocation, fractures	
Resignation	Exposure to danger/lack of supervision	Refusal to spend money	Marks left by a gag	
Confusion	Absence of required aids, including glasses, dentures etc.	Disparity between living conditions and assets	Hair loss (possible hair pulling)	
Unexplained Paranoia	Pressure sores	Extraordinary interest by family member in older people's assets	Eye injuries (black eye, detached retina)	
Strong ambivalent feelings towards the abuser		Making dramatic financial decisions		

**Note:** This list of possible examples should not be considered a complete list of possible indicators but used as a way of alerting staff/volunteers that abuse may be occurring