Safeguarding Policy & Procedure

Purpose
This policy defines ‘safeguarding’, ‘abuse’ and gives other relevant information about safeguarding. It also tells people what they should do if they see or suspect that a vulnerable adult is being abused.

What is safeguarding?
Safeguarding means protecting people’s health, wellbeing and human rights, and enabling them to live free from harm, abuse and neglect.

Safeguarding is about protecting certain people who may be in a at risk situation. These people may be at risk of abuse or neglect if someone else does something that they should not do or does not do what they should do.

Safeguarding adults includes:
- Protecting their rights to live in safety, free from abuse and neglect.
- People and organisations working together to prevent the risk of abuse or neglect, and to stop abuse or neglect from happening.
- Making sure people’s wellbeing is promoted, taking their views, wishes, feelings and beliefs into account.

N.B. The Doctors’ Support Network does not provide activities to children or young people, however if a member becomes aware of potential risk to a child in the course of a DSN activity, then this should be reported to the relevant local council safeguarding lead.

What is abuse?
Abuse is a misuse of power and control that one person has over another. Where someone is dependent on another, there is the possibility of abuse or neglect unless enough safeguards are put in place.

It can happen when an at risk adult is persuaded into a financial or sexual exchange they have not consented to, or cannot consent to. Abuse can occur in any relationship and may result in significant harm or exploitation.

Some types of abuse are illegal. If the Doctors’ Support Network suspects that a crime against a person has been committed, we will refer the matter to the police. Sometimes an urgent referral to police is made for the safety of the at risk adult or to preserve evidence.
Types of Harm

Abuse can take many forms. It might not comfortably into any of these categories, or it might fit into more than one:

1. **Physical** This includes assault, hitting, slapping, pushing, giving the wrong (or no) medication, restraining someone or only letting them do certain things at certain times.

2. **Domestic** This includes psychological, physical, sexual, financial or emotional abuse. It also covers so-called ‘honour’ based violence.

3. **Sexual** This includes rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, taking sexual photographs, making someone look at pornography or watch sexual acts, sexual assault or sexual acts the adult did not consent to or was pressured into consenting to.

4. **Psychological** This includes emotional abuse, threats of harm or abandonment, depriving someone of contact with someone else, humiliation, blaming, controlling, intimidation, putting pressure on someone to do something, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or support networks.

5. **Financial or material** This includes theft, fraud, internet scamming, putting pressure on someone about their financial arrangements (including wills, property, inheritance or financial transactions) or the misuse or stealing of property, possessions or benefits.

6. **Modern slavery** This covers slavery (including domestic slavery), human trafficking and forced labour. Traffickers and slave masters use whatever they can to pressurise, deceive and force individuals into a life of abuse and inhumane treatment.

7. **Discriminatory** This includes types of harassment or insults because of someone’s race, gender or gender identity, age, disability, sexual orientation or religion.

8. **Organisational** This includes neglect and poor care in an institution or care setting such as a hospital or care home, or if an organisation provides care in someone’s home. The abuse can be a one-off incident or repeated, on-going ill treatment. The abuse can be through neglect or poor professional practice that might be because of structure, policies, processes and practices within an organisation.

9. **Neglect and acts of omission** This includes ignoring medical, emotional or physical care needs, failure to provide access to educational services, or not giving someone what they need to help them live, such as medication, enough nutrition and heating.
10. **Forced marriage** Forced marriage happens across all cultures. It’s when someone is pressured into an arranged marriage or forced to marry someone they haven’t freely chosen. It can also happen if someone lacks the mental capacity to make their own choices.

**Who could be an abuser?**

Adults at risk can be abused by a wide range of people – anyone, in fact, who has contact with them. This includes family members, professional staff, paid care workers, volunteers, neighbours, friends and associates, people who deliberately take advantage of at risk people, strangers and people who see an opportunity to abuse.

Abuse can also be done by one at risk adult towards another. This is still abuse and should be dealt with. The at risk adult who abuses someone else may also be neglecting him/herself that could also be a reason for a safeguarding referral.

**Sharing information**

The [Doctors’ Support Network](#) manages personal and sensitive information about people according to the law and its Privacy Policy. We make sure there’s no unauthorised access, loss, misuse, amendment or disclosure of this information.

When safeguarding adults at risk, we sometimes need to share personal or sensitive information with someone from another organisation. The [Doctors’ Support Network](#) will only do this when allowed by law, and where sharing the information is in the person’s best interests. This is also done when doing so might prevent a crime.

We will always share information that safeguards at risk adults, on a ‘need to know’ basis. We will make sure any information we share is correct.

**Assessing and responding to the level of risk**

1. We will take all suspicions or allegations of abuse seriously.
2. Everyone at the [Doctors’ Support Network](#) must know that the needs of the adult (or child) at risk are of the highest importance.
3. The [Doctors’ Support Network](#) will do whatever it can to guarantee the safety and protection of adults and children at risk. This policy is adopted by the [Doctors’ Support Network](#) board of trustees and disseminated to its members.
4. The board of trustees is responsible for:
   - making sure that DSN members are aware of the safeguarding policy
   - telling people that the policy is important and keeping it up to date
   - making sure that DSN members know about and follow the reporting procedure
5. All of the [Doctors’ Support Network](#)’s trustees and members will be informed where to find a copy of this policy. All trustees and members will check the [DSN privacy policy](#) when managing personal information about vulnerable adults.
How to report a safeguarding issue

1. Non-emergency situation -
   a) Report your concerns to the DSN board of trustees by emailing chair@dsn.org.uk and info@dsn.org.uk
   b) Contact the social care department at the relevant local authority if you are concerned about an at risk adult.

2. In an emergency:

   Seek medical attention / call the emergency services for the vulnerable person
   ↓
   Discuss with at risk person.
   Get permission (if possible) to make a referral to social care (as above) if safe and appropriate.
   ↓
   Refer the individual to the social care department at the relevant local authority
   And then report your concerns to the DSN board of trustees by emailing chair@dsn.org.uk and info@dsn.org.uk

This policy will be reviewed as necessary.

Dated : 26th March 2024
Author : DSN committee

Policy adapted from template on Strengthening Faith Institutions