

SAFEGUARDING ADULTS POLICY AND PROCEDURES

Name of organisation: Talking Lab

Section heading	Section content
1. Introduction	<p>This policy applies to anyone working on behalf of Talking Lab including managers, paid staff, volunteers and students.</p> <p>Safeguarding is a term which means protecting people's health, wellbeing and human rights, and enabling them to live free from harm, abuse and neglect. It is fundamental to high quality health and social care.</p> <p>Safeguarding adults includes:</p> <ul style="list-style-type: none">○ Protecting people's 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 them from happening○ Ensuring that people's wellbeing is promoted, taking their views, wishes, feelings and beliefs into account <p>Talking Lab recognises that:</p> <ul style="list-style-type: none">○ The welfare of our clients is paramount in all the work we do and in all the decision we take○ Working in partnership with our clients, families and other agencies is essential in promoting our clients welfare○ All clients, regardless of age, disability, gender reassignment, race, religion or belief, sex, or sexual orientation have an equal right to protection from all types of harm or abuse○ Some clients are additionally vulnerable because of the impact of previous experiences, their level of dependency, communication needs or other individual issues – due to the type of service we provide we are more likely to work with clients who are additionally vulnerable

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	<ul style="list-style-type: none"> ○ Extra safeguarding and awareness may be needed to keep adults who are additionally vulnerable safe from abuse
Organisation's role	<p>Designated Safeguarding Lead (DSL): Lucy Darby</p> <p>Talking Lab believes that:</p> <ul style="list-style-type: none"> ○ Our clients should never experience abuse of any kind ○ We have a responsibility to promote the welfare of all, and to keep them safe and to practise in a way that protects them. <p>Talking Lab will:</p> <ul style="list-style-type: none"> ○ Respond effectively and accordingly to any concerned raised ○ Provide safeguarding adults training and clear guidance for all staff to follow ○ Ensure any concerns are raised promptly ○ Help to prevent the people we support from coming to harm ○ To be aware and understand all current guidance. To stay up to date with any changes to this guidance and implement changes without delay. ○ Teach and support communication skills so that our clients have the skills or tools needed to communicate concerns, report abuse or neglect themselves. ○ Provide an accessible complaints procedure for all clients, family members and carers <p>Talking Lab acknowledges the duty of care to safeguard and promote the welfare of our clients and is committed to ensuring safeguarding practice reflects statutory responsibilities and government guidance. Talking Lab makes a positive contribution to a strong and safe community and recognises the right of every adult to remain safe and free from harm.</p> <p>As a company we come into contact with adults regularly through the following activities:</p> <ul style="list-style-type: none"> ○ Speech and language therapy sessions at private homes ○ college or day service visits ○ Visits to residential homes

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	<ul style="list-style-type: none"> ○ Appointments at Talking Lab headquarters ○ Sessions held online via Zoom ○ Phone conversations ○ Email exchanges <p>The types of contact with adults will be:</p> <ul style="list-style-type: none"> ○ Speech and language therapy assessments ○ Speech and language therapy sessions ○ Frequent contact regulated activity ○ Consultation sessions ○ Meetings ○ Online appointments ○ Communication via call, text and email <p>This policy seeks to ensure that Talking Lab undertakes its responsibilities with regard to protection of adults and will respond to concerns promptly, appropriately and effectively. The policy establishes a framework and guidance for all our employees to follow. We will ensure that all our employees who come into contact with adults understand their individual roles and responsibilities in respect to safeguarding. We will ensure that all staff are provided with appropriate training to recognise, identify and respond to the signs of abuse, neglect and other safeguarding concerns relating to adults. We will avoid gaps in DBS checks within the organisation and have consistency in the way roles requiring DBS checks are monitored and reviewed by:</p> <ul style="list-style-type: none"> ○ Re-checking DBS certificates every 3 years ○ Not allowing new staff to work with clients until their DBS has been cleared
<p>Mental Capacity Act 2005</p>	<ul style="list-style-type: none"> ○ A person must be assumed to have capacity unless it is established that he/she lacks capacity. ○ A person is not to be treated as unable to make a decision unless all practicable steps to help them to do so have been taken without success. ○ A person is not to be treated as unable to make a decision merely because they make an unwise decision.

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	<ul style="list-style-type: none"> ○ An act done, or decision made, under this act for or on behalf of a person who lacks capacity must be done or made in that person’s best interests. ○ Before the act is done, or the decision is made, regard must be paid as to whether the purpose for which it is needed can be as effectively achieved in a way that is less restrictive of the person’s rights and freedom of action. ○ If a person is assessed as lacking capacity, they must still be encouraged to participate in any safeguarding process. <p>Five main principles of this act:</p> <ol style="list-style-type: none"> 1. Presumption of mental capacity. 2. Helping and encouraging people to make decisions. 3. Respecting that people are entitled to make unwise decisions. 4. Any decision made for a person without capacity must be based on their best interests. 5. The least restrictive option must always be adopted. <p>Under this act, it is a criminal offence to neglect or ill-treat a person who lacks capacity.</p>
<p>Care Act 2014</p>	<p>The Care Act 2014 creates a new legal framework for how local authorities and other parts of the system should work together to protect adults at risk of abuse or neglect.</p> <p>The care and support statutory guidance, issues under the Care Act 2014, states that the safeguarding duties apply to an adult who:</p> <ul style="list-style-type: none"> ○ Has needs for care and support (whether or not the local authority is meeting any of these needs) and ○ is experiencing, or at risk of, abuse and neglect; and ○ As a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse and neglect <p>Six key principles:</p> <ol style="list-style-type: none"> 1. Empowerment: Person led decision making and informed consent.

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	<ol style="list-style-type: none"> 2. Prevention: It is better to take action before harm occurs. 3. Proportionality: The most proportionate and least intrusive response appropriate to the risk presented. 4. Protection: Support and representation for those in greatest need. 5. Partnership: Local solutions through services working with their communities. Communities have a part to play in preventing, detecting, and reporting neglect and abuse. 6. Accountability: Accountability and transparency in delivering safeguarding. <p>Safeguarding should be personal - this means everybody involved doing all they can to ensure safeguarding is person-led and outcomes focused. This should be done in a way that enhances the involvement, choice and control of the person being safeguarded as well as improving their quality of life, well-being, and safety. The key to this is seeing people as experts in their own lives, and working alongside them with the aim of enabling them to resolve their circumstances and support their recovery.</p>
<p>Definitions</p>	<p><u>Safeguarding</u> is about embedding practices throughout the organisation to ensure the protection of children and / or vulnerable adults wherever possible. In contrast, child and adult protection is about responding to circumstances that arise.</p> <p><u>Abuse</u> is a selfish act of oppression and injustice, exploitation and manipulation of power by those in a position of authority. This can be caused by those inflicting harm or those who fail to act to prevent harm. Abuse is not restricted to any socio-economic group, gender or culture.</p> <p>It can take a number of forms, including the following:</p> <ul style="list-style-type: none"> • Physical abuse • Sexual abuse • Emotional abuse • Bullying • Neglect

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	<ul style="list-style-type: none"> • Financial (or material) abuse
1. Responsibilities	<p>All staff (paid or unpaid) have responsibility to follow the guidance provided in this policy and related policies, and to pass on any welfare concerns using the required procedures. We expect all staff (paid or unpaid) to promote good practice by being an excellent role model, contribute to discussions about safeguarding and to positively involve people in developing safe practices.</p> <p>Additional specific responsibilities</p> <p>The Designated Senior Manager /lead officer is Lucy Darby. This person’s responsibilities are to ensure:</p> <ul style="list-style-type: none"> ○ The policy is in place and appropriate ○ The policy is accessible ○ The policy is implemented ○ The policy is monitored and reviewed ○ Sufficient resources (time and money) are allocated to ensure that the policy can be effectively implemented ○ Promoting the welfare of children and vulnerable adults ○ Ensure staff (paid and unpaid) have access to appropriate training/information ○ Receive staff concerns about safeguarding and respond to all seriously, swiftly and appropriately ○ Keep up to date with local arrangements for safeguarding and DBS ○ Develop and maintain effective links with relevant agencies.
Physical abuse	<p><u>Physical abuse</u>: including assault, hitting, slapping, pushing, and misuse of medication, restraint, or inappropriate physical sanctions.</p> <p><u>Possible indicators</u>:</p> <ul style="list-style-type: none"> ○ No explanation for injuries or inconsistency with the account of what happened. ○ Injuries are inconsistent with the person’s lifestyle.

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	<ul style="list-style-type: none"> ○ Bruising, cuts, welts, burns and/or marks on the body or loss of hair in clumps. ○ Frequent injuries. ○ Unexplained falls. ○ Subdued or changed behaviour in the presence of a particular person. ○ Signs of malnutrition. ○ Failure to seek medical treatment or frequent changes of general practitioner.
Domestic violence	<p><u>Domestic violence:</u> Including psychological, physical, sexual, financial, emotional abuse; so, called ‘honour’ based violence, female genital mutilation and forced marriage (age range in England extended to 16 and includes relationships between all family members, not just intimate partners).</p> <p><u>Possible indicators:</u></p> <ul style="list-style-type: none"> ○ Low self-esteem. ○ Feeling that the abuse is their fault when it is not. ○ Physical evidence of violence such as bruising, cuts or broken bones. ○ Verbal abuse and humiliation in front of others. ○ Fear of outside intervention. ○ Damage to home or property. ○ Isolation – not seeing friends or family. ○ Limited access to money.
Sexual abuse	<p><u>Sexual abuse:</u> Including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts. Indecent exposure, sexual assault, or sexual acts that the adult has not consented to or was pressured into consenting.</p> <p><u>Possible indicators:</u></p> <ul style="list-style-type: none"> ○ Bruising, particularly to the thighs, buttocks and upper arms and marks to the neck. ○ Torn, stained or bloody underclothing.

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	<ul style="list-style-type: none"> ○ Bleeding, pain or itching in the genital area. ○ Unusual difficulty in walking or sitting. ○ Foreign bodies in genital or rectal openings. ○ Infections, unexplained genital discharge, or sexually transmitted diseases. ○ Pregnancy in a woman who is unable to consent to sexual intercourse. ○ The uncharacteristic use of explicit sexual language or significant changes in sexual behaviour or attitude. ○ Incontinence not related to any medical diagnosis. ○ Self-harming. ○ Poor concentration, withdrawal, sleeps disturbances. ○ Excessive fear/apprehension of or withdrawal from relationships. ○ Fear of receiving help with personal care. ○ Reluctance to be alone with a particular person.
<p>Psychological abuse</p>	<p><u>Psychological abuse</u>: Including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.</p> <p><u>Possible indicators</u>:</p> <ul style="list-style-type: none"> ○ An air of silence when a particular person is present. ○ Withdrawal or change in the psychological state of the person. ○ Insomnia. ○ Low self-esteem. ○ Uncooperative and aggressive behaviour. ○ Changes in appetite, weight lose/gain. ○ Signs of distress: tearfulness, anger. ○ Apparent false claims, by someone involved with the person, to attract unnecessary treatment.

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<p>Financial or material abuse</p>	<p><u>Financial or material abuse:</u> Including theft, fraud, internet scamming, coercion in relation to an adult’s financial affairs or arrangements, including in connection with wills, property, inheritance, or financial transactions, or the misuse or misappropriation of property, possessions, or benefits.</p> <p><u>Possible indicators:</u></p> <ul style="list-style-type: none"> ○ Missing personal possessions. ○ Unexplained lack of money or inability to maintain lifestyle. ○ Unexplained withdrawals of funds from accounts. ○ Power of attorney or Lasting Power of Attorney (LPA) being obtained after the person has ceased to have mental capacity. ○ Failure to register an LPA after the person has ceased to have mental capacity to manage their finances, so that it appears that they are continuing to do so. ○ The person allocated to manage financial affairs is evasive or uncooperative. ○ The family or others show unusual interest in the assets of the person. ○ Signs of financial hardship in cases where the person’s financial affairs are being managed by a court appointed deputy, attorney, or LPA. ○ Recent changes in deeds or title to property. ○ Rent arrears or eviction notices. ○ A lack of clear financial accounts held by a service. ○ Failure to provide receipts for shopping or other financial transactions carried out on behalf of the person. ○ Disparity between the persons living conditions and their financial resources – for example insufficient funds food in the house. ○ Unnecessary house repairs.
<p>Modern slavery</p>	<p><u>Modern slavery:</u> Encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive, and force individuals into a life of abuse, servitude, and inhumane treatment.</p>

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	<p><u>Possible indicators:</u></p> <ul style="list-style-type: none"> ○ Signs of physical or emotional abuse. ○ Appearing to be malnourished, unkempt or withdrawn. ○ Isolation from the community, seeming under the control or influence of others. ○ Living in dirty, cramped, or overcrowded accommodation and or living and working at the same address. ○ Lack of personal effects or identification documents. ○ Always wearing the same clothes. ○ Avoidance of eye contact, appearing frightened or hesitant to talk to strangers. ○ Fear of law enforcers.
<p>Discriminatory abuse</p>	<p><u>Discriminatory abuse:</u> Including forms of harassment, slurs, or similar treatment; because of race, gender, and gender identity, age, disability, sexual orientation, or religion.</p> <p><u>Possible indicators:</u></p> <ul style="list-style-type: none"> ○ The person appears withdrawn and isolated. ○ Expressions of anger, frustration, fear, or anxiety. ○ The support on offer does not take account of the person’s individual needs in terms of a protected characteristic.
<p>Organisational abuse</p>	<p><u>Organisational abuse:</u> Including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one’s own home. This may range from one-off incidents to on-going ill- treatment. It can be through neglect or poor professional practice as a result of the structure, polices processes and practices within an organisation.</p> <p><u>Possible indicators:</u></p> <ul style="list-style-type: none"> ○ Lack of flexibility and choice for people using the service. ○ Inadequate staffing levels. ○ People being hungry or dehydrated.

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	<ul style="list-style-type: none"> ○ Poor standards of care. ○ Lack of personal clothing and possessions and communal use of personal items. ○ Lack of adequate procedures. Poor record-keeping and missing documents. ○ Absence of visitors. ○ Few social, recreational, and educational activities. ○ Public discussion of personal matters. ○ Unnecessary exposure during bathing or using the toilet. ○ Absence of individual care plans. ○ Lack of management overview and support.
<p>Neglect and acts of omission</p>	<p><u>Neglect and acts of omission:</u> Including ignoring medical, emotional, or physical care needs, failure to provide access to appropriate health, care and support or education services, the withholding of the necessities of life, such as medication, adequate nutrition, and heating.</p> <p><u>Possible indicators:</u></p> <ul style="list-style-type: none"> ○ Poor environment – dirty or unhygienic. ○ Poor physical condition and/or personal hygiene. ○ Pressure sores or ulcers. ○ Malnutrition or unexpected weight loss. ○ Untreated injuries and medical problems. ○ Inconsistent or reluctant contact with medical and social care organisations. ○ Accumulation of untaken medication. ○ Uncharacteristic failure to engage in social interaction. ○ Inappropriate or inadequate clothing. <p><u>Self-neglect:</u> This covers a wide range of behaviours neglecting to care for one’s personal hygiene, health or surroundings and includes behaviour such as hoarding.</p> <p><u>Possible indicators:</u></p>

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	<ul style="list-style-type: none"> ○ Very poor personal hygiene. ○ Unkempt appearance. ○ Lack of essential food, clothing, or shelter. ○ Malnutrition and/or dehydration. ○ Living in squalid or unsanitary conditions. ○ Neglecting household maintenance. ○ Hoarding. ○ Collecting a large number of animals in inappropriate conditions. ○ Non-compliance with health or care services. ○ Inability or unwillingness to take medication or treat illness/injury.
<p>Abuse – Who and where</p>	<p><u>Who:</u> We need to be aware that anybody can carry out abuse. This includes (but is not exhaustive to):</p> <ul style="list-style-type: none"> ○ Spouses/partners. ○ Other family members. ○ Neighbours. ○ Co-tenants. ○ Friends. ○ Acquaintances. ○ Local residents. ○ People who deliberately exploit adults they perceive as vulnerable to abuse. ○ Paid staff and other professionals. ○ Volunteers and strangers. ○ Online contacts. <p><u>Where:</u> And abuse can also happen anywhere.</p> <ul style="list-style-type: none"> ○ Someone’s own home. ○ The workplace.

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	<ul style="list-style-type: none"> ○ A public place. ○ A hospital. ○ A care home. ○ A college. ○ Online.
<p>Guidance on making an alert</p>	<ul style="list-style-type: none"> ○ Ensure the safety of the individual and if they are in immediate danger, contact the relevant emergency services e.g., police, ambulance, GP. ○ Preserve evidence, e.g., avoid washing bed linen or person if there is suspicion that sexual abuse has occurred. ○ Support and reassure the person who is making the disclosure, recording what is said and/or observed but do not ask any leading questions. ○ Log the nature of alleged abuse, any information given or witnessed, actions taken, who was present at the time, dates, and times of incident(s). ○ Report concern(s) to appropriate manager to evaluate the seriousness of the situation and assess if the report needs to be escalated. ○ Complete incident form, body map record; where possible include descriptions and measurements of evidence, bruising, pressure sores, scratches etc. ○ Ensure all discussions and decisions are recorded. ○ Consider the appropriate use of photographic evidence (in line with organisation protocols). <p>The most senior person on duty needs to report any concerns to Hampshire County Council directly - adult services – 0300 555 1386.</p> <p>OR</p> <p>Other relevant local authority providing the service for the individual involved.</p> <p>For additional guidance refer to Appendix 2 – Adult services safeguarding guidance for provider services.</p>
<p>Abuse in adults with a learning disability</p>	<p>The emotional impact of abuse is the same for those with or without learning disabilities, but those with learning disabilities are more vulnerable to abuse due to:</p>

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	<ul style="list-style-type: none"> ○ Limited or no verbal communication skills. ○ Lack of sex education. ○ Need for intimate personal care. ○ Multiple carers. ○ A culture of compliance. ○ Not knowing how or who to complain to or even the knowledge that they have the right to complain.
<p>Implementation Stages</p>	<p>The scope of this Safeguarding Policy is broad ranging and in practice, it will be implemented via a range of policies and procedures within the organisation. These include:</p> <ul style="list-style-type: none"> ○ Whistleblowing ○ Grievance and disciplinary procedures ○ Health and Safety policy, including lone working procedures, mitigating risk to staff and clients ○ Equal Opportunities policy ○ Data protection ○ Confidentiality ○ Staff induction ○ Staff training <p>Safe recruitment</p> <p>Talking Lab ensures safe recruitment through the following processes:</p> <ul style="list-style-type: none"> ○ Providing the following safeguarding statement in recruitment adverts or application details – ‘recruitment is done in line with safe recruitment practices.’ ○ Job or role descriptions for all roles involving contact with children and / or vulnerable adults will contain reference to safeguarding responsibilities. ○ There are person specifications for roles which contain a statement on core competency with regard to child/ vulnerable adult protection/ safeguarding. ○ Shortlisting is based on formal application processes/forms and not on provision of CVs. ○ Interviews are conducted according to equal opportunity principles and interview questions are based on the relevant job description and person specification.

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- DBS checks will be conducted for specific roles for all staff (paid or unpaid) working with children and vulnerable adults. Portable/ carry over DBS checks from another employer will not be deemed to be sufficient. It is a criminal offence for individuals barred by the ISA to work or apply to work with children or vulnerable adults in a wide range of posts.
- No formal job offers are made until after checks for suitability are completed (including DBS and 2 references). In exceptional and justifiable circumstances where a job role commences prior to DBS clearance the staff member will be supervised by a DBS cleared member of Talking Lab when with clients at all times.

Disclosure and Barring Service Gap Management

The organisation commits resources to providing Disclosure and barring service checks on staff (paid or unpaid) whose roles involve contact with children and /or vulnerable adults.

In order to avoid DBS gaps, the organisation will maintain and review a list of roles across the organisation which involves contact with children/ vulnerable adults which will be reviewed by the Designated Senior Manager on an annual basis.

In addition to checks on recruitment for roles involving contact with children/ vulnerable adults, for established staff the following processes are in place:

- A 3 year rolling programme of re-checking DBS status is in place for holders of all identified posts.
- Existing staff (paid or unpaid) who transfer from a role which does not require a DBS check to one which involves contact with children / vulnerable adults will be subject to a DBS check.

Service delivery contracting and sub-contracting

- There will be systematic checking of safeguarding arrangements of partner organisations
- Safeguarding will be a fixed agenda item on any partnership reporting meetings.
- Contracts and memorandums of agreement for partnership delivery work will include clear minimum requirements, arrangements for safeguarding and non compliance procedures

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<p>2. Communications training and support for staff</p>	<p>Talking Lab commits resources for induction, training of staff (paid and unpaid), effective communications and support mechanisms in relation to Safeguarding</p> <p>Induction will include:</p> <ul style="list-style-type: none"> ○ Discussion of the Safeguarding Policy (and confirmation of understanding) ○ Discussion of other relevant policies ○ Ensure familiarity with reporting processes, the roles of Designated Senior Manager ○ Initial training on safeguarding including: safe working practices, safe recruitment and the alerter guide for adult safeguarding ○ New staff members' competence in applying safe practices will be formally assessed during the probation period <p>Training</p> <p>All staff who, through their role, are in contact with children and /or vulnerable adults will have access to safeguarding training at an appropriate level. Sources and types of training will include annual Safeguarding training online course provided by Educare through ASLTIP membership</p> <p>Communications and discussion of safeguarding issues</p> <p>Commitment to the following communication methods will ensure effective communication of safeguarding issues and practice:</p> <ul style="list-style-type: none"> ● Team meetings ● One to one meetings (formal or informal) ● Clinical supervision ● Participation in multi agency safeguarding procedures and meetings in order to be involved in child/ adult protection procedures ● Participation in joint client visits ● Involvement in the Common Assessment Framework (CAF) process ● Provision of a clear and effective reporting procedure which encourages reporting of concerns.
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- Encouraging open discussion (e.g. during supervision and team meetings) to identify and barriers to reporting so that they can be addressed.
- Inclusion of safeguarding as a discussion prompt during supervision meetings/ appraisals to encourage reflection.
- Reminding staff about policies and procedures through refresh sessions.

Support

We recognise that involvement in situations where there is risk or actual harm can be stressful for staff concerned. The mechanisms in place to support staff include:

- Debriefing support for paid and unpaid staff so that they can reflect on the issues they have dealt with.
- Seeking further support as appropriate e.g. access to counselling.
- Staff members who have initiated protection concerns will be contacted by DSM within 1 week

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Professional boundaries

Professional boundaries are what define the limits of a relationship between a support worker and a client. They are a set of standards we agree to uphold that allows this necessary and often close relationship to exist while ensuring the correct detachment is kept in place.

Talking Lab expects staff to protect the professional integrity of themselves and the organisation.

The following professional boundaries must be adhered to:

- Any gifts given to or received from parents must be declared to the DSL and recorded on the client file. Any staff member concerned that gifts are not being declared or recorded should follow whistleblowing procedures.
- Personal relationships between a member of staff (paid or unpaid) and a client who is a current service user is prohibited. This includes relationships through social networking site such as Facebook.
- It is also prohibited to enter into a personal relationship with a person who has been a service user over the past 12 months.
- Use of abusive language is not tolerated.
- Service users' personal contact details must not be passed on without their explicit written consent
- Personal contact details must not be provided to service users
- Family members must not be taken to a client's home
- Items must not be sold to or bought from a service user
- Talking Lab does not accept responsibility for any valuables on behalf of a client
- Talking Lab staff members must not accept money as a gift or borrow money from or lend money to service users
- Talking Lab staff members must not have personal relationships with a third party related to or known to service users
- Staff members must not accept gifts/ rewards or hospitality from organisation as an inducement for either doing/ not doing something in their official capacity
- Staff members must exercise caution or avoid personal contact with clients

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	<p>If the professional boundaries and/or policies are breached this could result in disciplinary procedures or enactment of the allegation management procedures.</p>
<p>Allegations Management</p>	<p>Talking Lab recognises its duty to report concerns or allegations against its staff (paid or unpaid) within the organisation or by a professional from another organisation.</p> <p>You should follow the allegations procedure if an adult who is in a position of trust has:</p> <ul style="list-style-type: none"> ○ Behaved in a way that has harmed a child, or may have harmed a child ○ Possibly committed a criminal offence against or related to a child or ○ Behaved towards a child or children in a way that indicates they may pose a risk of harm to children <p>Then allegations procedures must be followed and reported to the Local Authority Designated Officer (LADO).</p> <p>The process for raising and dealing with allegations is as follows:</p> <p><u>First step:</u> Any member of staff (paid or unpaid) from Talking Lab is required to report any concerns in the first instance to their safeguarding manager. A written record of the concern will be completed by Lucy Darby.</p> <p><u>Second step-</u> contact the appropriate local authority Multi-Agency Safeguarding Hub for advice (see details above)</p> <p><u>Third step</u> – follow the advice provided</p> <p>Talking Lab recognises its legal duty to report any concerns about unsafe practice by any of its paid or unpaid staff to the Independent Safeguarding Authority (ISA), according to the ISA referral guidance document.</p> <p>All practitioners have a duty of care to follow up on any safeguarding concerns to ensure that the appropriate action has taken place.</p>
<p>Monitoring</p>	<p>The organisation will monitor the following Safeguarding aspects:</p>

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	<ul style="list-style-type: none"> ○ Safe recruitment practices ○ DBS checks undertaken ○ References applied for new staff ○ Records made and kept of supervision sessions ○ Training – register/ record of staff training on child protection ○ Monitoring whether concerns are being reported and actioned ○ Checking that policies are up to date and relevant ○ Reviewing the current reporting procedure in place ○ Presence and action of Designated senior manager responsible for Safeguarding is in post.
<p>Managing information</p>	<p>Information will be gathered, recorded and stored in accordance with the following policies:</p> <ul style="list-style-type: none"> ○ Data Protection Policy ○ Confidentiality Policy <p>All staff must be aware that they have a professional duty to share information with other agencies in order to safeguard adults. The public interest in safeguarding adults may override confidentiality interests. However, information will be shared on a need to know basis only, as judged by the Designated Senior Manager.</p> <p>All staff must be aware that they cannot promise service users or their families/ carers that they will keep secrets.</p>
<p>Conflict resolution and complaints</p>	<p>Talking Lab is aware of the policy on resolution of professional disagreements in work relating to the safety of the client/ Escalation Policy and if necessary this will be taken forward by the Designated Senior Manager.</p> <p>If the complaint is against the Designated Senior Manager, staff (paid or unpaid) can contact the local authority Multi-Agency Safeguarding Hub.</p>

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<p>Whistleblowing</p>	<p>Whistleblowing is when someone reports wrongdoing on the basis that it is in the public interest for the wrongdoing to be brought to light. This is usually something they've seen at work but not always. The wrongdoing might have happened in the past, be happening now, or be something the whistleblower is concerned may happen in the near future (Gov.uk, 2019).</p> <p>Whistleblowing Advice Line offers free advice and support to professionals with concerns about how adult safeguarding issues are being handled in their own or another organisation.</p> <p>Contact the Whistleblowing Advice Line on: 0800 028 0285 help@nspcc.org.uk</p> <p>Contact the Whistleblowing Advice Line if:</p> <ul style="list-style-type: none"> ○ your or another organisation doesn't have clear safeguarding procedures to follow ○ concerns aren't dealt with properly or may be covered up ○ a concern that was raised hasn't been acted upon ○ you are worried that repercussions are likely to arise if you raise a concern.
<p>Communicating and reviewing the policy</p>	<p>Talking Lab will make clients aware of the Safeguarding Policy through the following means:</p> <ul style="list-style-type: none"> ● The Safeguarding policy and complaints procedure (which is stated within the terms and conditions) will be displayed on the Talking Lab website ● New clients will be given a terms and conditions document that refers to the Safeguarding Policy and complaints procedure <p>This policy will be reviewed by the Designated Senior Manager every year and when there are changes in legislation.</p>
<p>Confirmation of reading</p>	<p>I confirm that I have been made fully aware of, and understand the contents of, the Safeguarding Policy and Procedures for Talking Lab.</p>

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	<p>Please complete the details below and return this completed form to Lucy Darby.</p> <p>Employee Name : _____</p> <p>Employee Signature: _____</p> <p>Date: _____</p>
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Safeguarding Adult Policy and Procedure		
Reviewed by: Lucy Darby	Date: 31/01/2024	Signature: <i>LDarby</i>

Review Annually	
Review Date: 20/12/2024	Comments:

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Safeguarding Adults Policy – Appendix 1

This form must be completed after reporting a concern.

Date:		Time:	
Name of person raising concern:			
Name of person reported to:			
Brief description of report made:			

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Person/ people involved:

Any additional information:

Documents requested:	
Date/time sent:	
Sent to:	

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Name:		Signature:		Date:	
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Body map

Name:	
Date:	
Completed by:	
Brief description of how injury occurred/discovered	

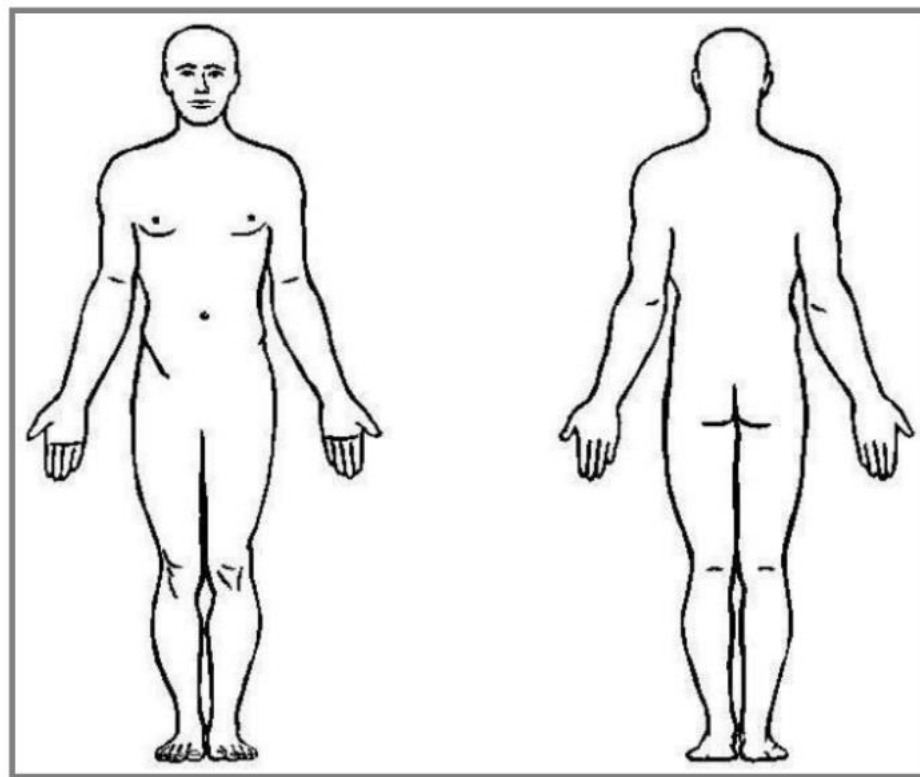
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Appendix 2– Report process (Hampshire County Council, accessed 10.01.2024)

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APPENDIX 2 – Provider Services Safeguarding Flowchart – Staff

Provider Services Safeguarding Flowchart - Staff

SAFEGUARDING CONCERN IN YOUR SERVICE

Any concern arising from poor care/quality, a suspicion, allegation or signs and indicators you aren't sure of. Types of abuse: Physical, Psychological, Financial or Material, Neglect including act of omission, Discriminatory, Sexual, Organisational, Domestic abuse, Modern Slavery, Self Neglect

IMMEDIATELY - ENSURE THE PERSON(S) IS SAFE - SEEK MEDICAL ADVICE IF NEEDED

Ensure all appropriate care and support is given and that any evidence is preserved and undisturbed

INFORM PROVIDER UNIT MANAGEMENT

(Unless allegation is about them in which case contact your senior manager) Person in charge will decide who to contact next (in line with your policy)

Contact the local Adults' Health and Care Team on 0300 555 1386, who will put it through to the M.A.S.H. (Multi-agency safeguarding hub) If Out of Hours - 0300 555 1373

If it's a criminal offence contact the Police
999 if an emergency -
101 otherwise

RECORD THE INCIDENT

Record the incident in line with your policy. Be mindful not to make judgements or assumptions. Record accurately on an incident form what was said and done in the specific chronological order ensuring you use simple text using the persons own words and where appropriate body maps. Do not ask leading questions.

NEXT STEPS

Person raising the concern should receive feedback the concern is being dealt with, if not follow up with appropriate manager. If unhappy with the result consider the whistleblowing policy.

MONITORING RISKS AND SAFEGUARDING REVIEWS

Update all relevant documentation, review and monitor the risk involved and will introduce further person centred steps to reduce the risk to the person(s) in future.

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