

Safeguarding Policy (Children & Vulnerable Adults)

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Record of Policy Review:

| <i>Date Policy was Issued</i> | <i>Date of Review</i> | <i>Reason for Review</i> | <i>Lead Reviewer</i> | <i>Additional Comments</i> |
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| April 2015 | March 2017 | General Review and Update | CEO | Review at AGM March 17 – GDRP Update |
| March 2017 | November 2020 | General Review and Update | CEO | |
| November 2020 | November 2023 | General Review and Update | CEO | Mickey Meehan now designated officer |
| November 2023 | November 2026 | | | |

Safeguarding Children and Young People Policy 2017

This Safeguarding policy is based on guidelines and legislation outlined in the following documents:

- Code of Ethics and Good Practice for Children’s Sport, Sport Northern Ireland 2006.
- Children (NI) Order 1995.
- Our Duty to Care NI, DHSSPS 2012.
- Getting It Right, DHSSPS 2012.
- Co-operating to Safeguard Children DHSSPS 2003.
- Area Child Protection Committee – Regional Child Protection Policy 2005.
- Safeguarding Vulnerable Groups (NI) Order 2007.
- GDPR May 2018

Safeguarding or Child Protection

The term child protection has been changed to safeguarding as it reflects the wider responsibility for health and safety and prevention as well as just protection from abuse. The word safeguarding has been used with increasing frequency over the last few years in a wide range of settings and situations, going well beyond the world of children and child protection. It may be defined as **“Doing everything possible to minimise the risk of harm to children and young people.”**

Safeguarding is about being proactive and putting measures in place in advance of any contact with children to ensure that children are going to be kept safe. This could include:

- Ensuring staff are properly checked when they are recruited.
- Guidelines for people who come into contact with children as part of their role to ensure they know what they need to do to keep children safe; and
- Guidelines for planning an event or activity with children and putting measures in place to minimise the risk of safeguarding issues occurring. TAMHI does not own premises so review risk registers of venues the organisation use to make organisation coaches and participants aware of any dangers.

POLICY STATEMENT

We are committed to good practice which protects children from harm. Staff and volunteers accept and recognise their responsibility to provide an environment which promotes the safety of the child at all times. To achieve this, we will:

- Develop an awareness of the issues which may lead to children being harmed.
- Create an open environment by identifying a 'Designated person' to whom the children/groups can turn to if they need to talk.
- Adopt child centred and democratic coaching styles.
- Adopt Safeguarding guidelines through Codes of Conduct for members and all adults working at the organisation. Adult workers include coaches, parents and volunteers.
- Ensure careful recruitment, selection and management procedures. These procedures will include regular support and supervision is provided to staff/volunteers.
- Ensure complaints, grievance and disciplinary procedures are included in our constitution.
- Share information about concerns with children and parents and others who need to know.
- Provide information as required to the management committee.
- Ensure good and safe working/playing practices.
- Be involved in training made available through the various agencies and strengthen links with these agencies.
- Keep Safeguarding policies under regular review (every three years minimum).
- Have procedures relating specifically to bullying, mental health, away trips, transport and use of photography.

The **Children (Northern Ireland) Order (1995)** is based on a clear and consistent set of principles designed with the common aim of promoting the welfare of children.

Children have the right to be safe. All coaches should ensure that this fundamental principle takes precedence over all other considerations.

This policy applies to all those involved in **TAMHI**, coaches, administrators, officials, volunteer drivers, parents and young people.

EQUALITY STATEMENT

“TAMHI operate an equal opportunities policy in relation to race, gender, sexual orientation, disability, religious belief, political opinion, marital status, age, or having or not having dependants; in addition, the TAMHI shall take all reasonable steps to ensure that the services provided by the organisation are run in an inclusive manner which will both aspire to and promote good relations to all involved”.

- This organisation is committed to ensuring that equity is incorporated across all aspects of its development. In doing so it acknowledges and adopts the following Sport Northern Ireland definition of sports equity:

“Sports equity is about fairness in sport, equality of access, recognising inequalities and taking steps to address them. It is about changing the culture and structure of sport to ensure it becomes equally accessible to everyone in society.”

- The organisation respects the rights, dignity and worth of every person and will treat everyone equally within the context of their sport, regardless of age, ability, gender, race, ethnicity, religious belief, sexuality or social/economic status.
- The organisation is committed to everyone having the right to enjoy their sport in an environment free from threat of intimidation, harassment and abuse.
- All organisation members have a responsibility to oppose discriminatory behaviour and promote equality of opportunity.
- The organisation will deal with any incidence of discriminatory behaviour seriously, according to organisation disciplinary procedures.

To address the vulnerability of children with a disability coaches will seek guidance on working with children with a disability from external agencies, parents/guardians and the children themselves.

CONFIDENTIALITY STATEMENT

“We at TAMHI will never promise to keep secrets. However, information of a confidential nature will only be communicated on a "need to know" basis, with the welfare of the child paramount. Considerations of confidentiality will not be allowed to override the rights of children or young members to be protected from harm. A full Safeguarding policy statement is displayed and available within organisation premises for all interested parties to read. “

AWARENESS OF THE ISSUES

Background knowledge in relation to child abuse, the general principles of Safeguarding and the ability to recognise and respond to abuse are important issues. Of primary concern for TAMHI is the issue of Safeguarding of our young members within the operation of the organisation. However, being cognisant of the indicators of abuse in respect of young members caused by others outside the organisation, are of an equal importance for the safety and well-being of that child.

Co-operating to Safeguard Children 2003 formally recognises four types of abuse:

1. Physical Abuse

Physical abuse is the deliberate physical injury to a child, or the wilful or neglectful failure to prevent physical injury or suffering. This may include hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, confinement to a room or cot, or inappropriately giving drugs to control behaviour.

2. Emotional Abuse

Emotional abuse is the persistent emotional ill treatment of a child such as to cause severe and persistent adverse effects on the child’s emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may involve causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of ill treatment of a child, though it may occur alone. Domestic violence, adult mental health problems and parental substance misuse may expose children to emotional abuse.

3. Sexual Abuse

Sexual abuse involves forcing or enticing a child to take part in sexual activities, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative or non-penetrative acts. They may include non-contact activities, such as involving children in looking at or the production of pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

4. Neglect

Neglect is the persistent failure to meet a child's physical, emotional and/or psychological needs, likely to result in significant harm. It may involve a parent or carer failing to provide adequate foods, shelter and clothing, failing to protect a child from physical harm or danger, failing to ensure access to appropriate medical care or treatment, lack of stimulation or lack of supervision. It may also include non-organic failure to thrive (faltering growth).

In addition to these TAMHI recognises that we have a responsibility to:

“protect children from bullying and to have policies and procedures in places to do so”

Co-operating to Safeguard Children DHSSPS, 2003

“TAMHI will not tolerate bullying of any sort whether verbal, physical or recently online of any young person or person involved with the organisation who wishes to partake in organisation activities.

The message of “What’s the point in bullying” is driven into all programmes – we aspire to support the development of young leaders and have a zero tolerance on bullying – a team is one person and we encourage our players to look out for each other.

Mental Wellbeing Awareness Statement

“THE CHARITY s safeguarding officer will work in partnership with local community groups who deal with Mental Health and Employment and Learning as we aspire to build the resilience of our young people up, physically, technically & mentally.”

TAMHI acknowledges that mental health issues that lead to depression and suicide among young people is a serious issue and has made a commitment to put measures in place to do their part in limiting the effects of poor mental health through community partnerships and expert advice from professionals.

INDICATORS OF ABUSE

The following is a list of some indicators of abuse, but it is not exhaustive:

| PHYSICAL INDICATORS | BEHAVIOURAL INDICATORS |
|---|---|
| <ul style="list-style-type: none"> • Unexplained bruising in soft tissue areas • Repeated injuries • Black eyes • Injuries to the mouth • Torn or bloodstained clothing • Burns or scalds • Bites • Fractures • Marks from implements • Inconsistent stories/excuses relating to injuries | <ul style="list-style-type: none"> • Unexplained changes in behaviour - becoming withdrawn or aggressive • Difficulty in making friends • Distrustful of adults or excessive attachment to adults • Sudden drop in performance • Changes in attendance pattern • Inappropriate sexual awareness, behaviour or language • Reluctance to remove clothing |

RESPONDING TO DISCLOSURE OF ABUSE

Always

- Record what has been said ASAP
- Remain sensitive and calm
- Reassure child that they
 - are safe
 - were right to tell
 - are not to blame
 - are being taken seriously
- Let child talk - do not interview
- Listen and hear, give the person time to say what they want

- Ensure a positive experience
- Explain that you must tell, but will maintain confidentiality
- Tell child what will happen next
- Involve appropriate individuals immediately
- Stay calm
- Reassure them that they have done the right thing in telling and that it will be dealt with appropriately

Never

- Question unless for clarification
- Make promises you cannot keep
- Rush into actions that may be inappropriate
- Make/pass a judgment on alleged abuser
- Take sole responsibility, consult the designated officer so you can begin to protect the child and gain support for yourself

DESIGNATED PERSON

The Designated Person within TAMHI is:

NAME: Mickey Meehan CONTACT DETAILS: 0786654229

E-mail: Mickey@tamhi.org

Mickey shall be made known to young members, coaches and parents alike; as the designated person to whom concerns will be addressed. If the concern is about the designated person please report to Organisation Chairperson.

SAFE RECRUITMENT PROCEDURES FOR VOLUNTEERS/COACHES

- Volunteers and coaches are carefully selected, trained and supervised. The office bearers of the organisation committee must vouch for new volunteers/coaches potential involvement and their participation must be ratified by the unanimous approval of executive group/remaining coaches.
- All new coaches/volunteers working with children or young people must complete the sports own application form which includes a self declaration section.

- Individuals must complete and sign the AccessNI Disclosure Certificate Application Form which gives permission to enable the IFA to administer an AccessNI check (proof of identity MUST be provided and confirmed by the organisation designated officer).
- Declaration of past convictions or cases pending and agreement to have an AccessNI check completed, is of course a pre-requisite to approval to coach/volunteer to work with young people.
- **ALL** volunteers/coaches must agree to abide by the organisation 's Safeguarding Policy and all are required to sign the Code of Conduct
- Any concerns or objections with regard to suitability of a coach should be brought to the attention of the NSPCC

TRAINING FOR VOLUNTEERS/COACHES

This organisation will:

- Ensure Education and training in the basics of Safeguarding will apply to all coaches/volunteers/management committee members working with the children or young members. TAMH is committed to continuous updating and review of our current Safeguarding Policy.
- Safeguarding training should include:
 - Basic awareness of Safeguarding issues
 - Our organisation Safeguarding policies and procedures including our Code of Conduct
 - Mental Health/Suicide Awareness In Young People Training
- Safeguarding & Mental Health training will be delivered as part of a coach induction programme and on a yearly basis and be delivered by designated officer with input from external community bodies were applicable.
- Ensure that all new coaches/volunteers have attended Safeguarding awareness workshop within six months of taking up their post. This opportunity should also be made available to parents and other volunteers to enable a culture of a child-focused organisation to prevail.
- Ensure all staff and volunteers should receive induction, and training appropriate to their role. Training should be updated and reviewed regularly for new staff/volunteers and in line with changing legislation.

CODES OF CONDUCT

A Code of Conduct lets all our staff/volunteers in our organisation /organisation know what behaviour is expected and what is unacceptable. It will also let all involved know what sanctions will be applied for non-compliance with the Code. A written Code of Conduct will be prominently displayed or communicated to everyone associated with the organisation.

SUPPORT and SUPERVISION

TAMHI recognises that it is good practice to set up a system of support and supervision of staff/volunteers. This will enable staff/volunteers to become more effective by identifying training needs and dealing quickly with difficulties. (For those with staff see staff handbook for further details on supervision). Volunteers will be offered regular opportunities to review their experiences at TAMHI and to identify any training or further support they require.

GUIDELINES FOR REPORTING ACCIDENTS

In the event of an accident, the following procedure will be carried out:

- Fill in two copies of the Accident Form for **ALL** accidents.
- Make contact with parents/guardians.
- One copy of form to incident book/folder.
- Forward one copy to designated person for record keeping/action required.
- Contact emergency services/GP if required.
- Record in detail all facts surrounding the accident, witnesses, etc.
- Sign off on any action required from senior management officer.

GUIDELINES FOR RESPONDING & REPORTING ALLEGATIONS/INCIDENTS

Anyone witnessing any of this behaviour should report their observations immediately to the Designated Person, in the organisation.

Do not accuse or leap to conclusions.

Responding to an allegation by a child.

- React calmly so not to frighten the child.
- Tell the child that they are not to blame and that it was right to tell.
- Take what the child says seriously, recognising the difficulties inherent in interpreting what a child, who has a speech disability, and/or difficulties in language say. Do not probe. Do not lead.
- Keep questions to an absolute minimum necessary to ensure a clear and accurate understanding of what has been said
- Always re-assure the child but do not make promises of confidentiality, which might not be feasible in light of subsequent developments.
- Make a full record of what has been said, heard and/or seen as soon as possible.

Guidelines for Reporting Allegations/Incidents

- Report your concerns to the designated officer (who will communicate with the local Health & Social Care Trust or Police if appropriate).
- If the designated person is not available the person being told or discovering the abuse should contact the Health & Social Care Trust or Police directly, remember there should be no delay that may leave a child at risk.
- Record all incidents reported or observed on an Incident Form
- 1 written copy to the designated person with 24 hours
- Ensure confidentiality – only “need to know basis”
- The designated person will be responsible for storing any report in a safe and secure environment

If the concern is about the behaviour of a member of the organisation

- The organisation should follow the above reporting procedures in contacting statutory agencies immediately if the concern relates to potential abuse.

- The organisation will make an immediate decision about whether any individual accused of abuse should be temporarily suspended pending further Police & Health and Social Care Trust or internal inquiries/investigations.
- Irrespective of the findings of the Health & Social Trust or Police inquires the organisation Disciplinary Committee will assess all individual cases to decide whether a member of staff or volunteer should be reinstated and if so how this can be sensitively handled. This may be a difficult decision; especially where there is insufficient evidence to uphold any action Police. In such case the organisation Disciplinary Committee must reach a decision based upon the available information which could suggest that on the balance of probability, it is more likely than not that the allegation is true, and the implications of this for the safety of children. The welfare of the child should remain of paramount importance throughout.
- TAMHI are aware of their duty under the Safeguarding Vulnerable Groups (NI) 2007 Order to refer the information to the Independent Safeguarding Authority (ISA) in certain circumstances. In all cases there are two conditions, both must be met to trigger a referral to the ISA by a regulated activity provider. A referral must be made to the ISA by a regulated activity provider, such as an employer or volunteer coordinator.
 - Withdraws permission for an individual to engage in regulated activity, or would have done so had that individual not resigned, retired, been made redundant or been transferred to a position which is not regulated activity; because
 - They think that the individual has:
 - Engaged in relevant conduct
 - Satisfied the Harm Test; or
 - Received a caution for relevant offence
- If both conditions have been met the information must be referred to the ISA. The referral should be made to the ISA when it is the regulated activity provider has gathered sufficient evidence as part of their investigations to support their reasons for withdrawing permission to engage in regulated activity and followed good practice by consulting with their Health & Social Care Trust if appropriate.

If concern is about possible abuse external to the organisation setting.

- Report your concerns to the designated person

- If the designated person is not available, the person being told or discovering the abuse should contact their local Health & Social Care Trust or the Police immediately
- HSCT and the designated person, will decide how to inform the parents/carers
- Maintain confidentiality on a need to know basis.

HEALTH AND SAFETY GUIDELINES

This organisation are committed to ensure the safety of all members by completing a risk assessment for activities and endeavouring to provide first aid treatment for injury, accidents and cases of ill health during coaching sessions or at competitions.

| USEFUL NUMBERS | |
|---|---|
| Belfast Health and Social Care Trust's | Organisations adopting this policy should add the number of their local HSCT. |
| NSPCC Helpline | 0808 800 5000 |
| PSNI Public Protection Unit | 028 9065 0222 Ask for your local Public Protection Unit |
| Childline | Freephone 0800 1111 |
| Sport Northern Ireland | 028 9038 1222 |
| Child Protection in Sport Unit | 028 9035 5756 |
| Lifeline | 0808 808 8000 |

IMPLEMENTATION AND AVAILABILITY OF INFORMATION

It is important that there is a free flow of information between coaches/volunteers, children and parents, in terms of promotion of the organisation and what we aim to achieve in relation to young people taking part in any programmes TAMHI is engaged with.

Delivery organisations will insist that a parent/guardian consent form is completed for each under 18 year old member

New GDPR legislation is enforced 25th May 2018.

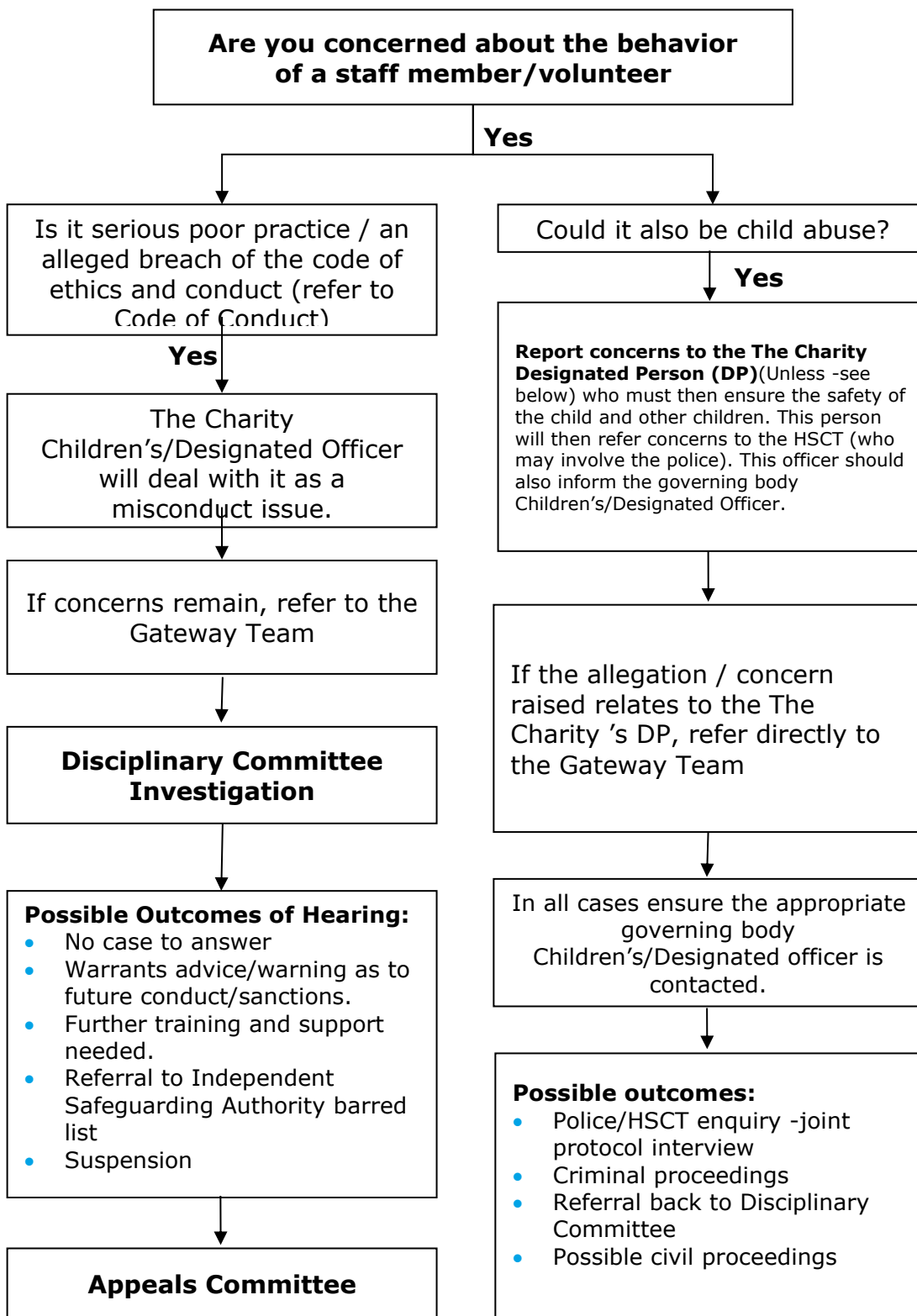
- TAMHI does not share information to third parties and only uses data for the purposes of promoting programmes and impact
- ALL those we hold data on can opt in or opt out at anytime; we will respond to all requests within 10 working days to remove any data requested by an individual/parent/guardian of an individual.
- TAMHI only asks for min levels of data; we do not ask for personal home addresses or telephone numbers; for reporting purposes we ask for age; gender; postcodes – only e-mail addresses are sensitive data we hold; we will not share with 3rd parties and only send information related to TAMHI activities to those “Opted” in to our programmes.
- Photos: TAMHI will communicate clearly what photos will be used for; which is promotion of programmes; individual/parent/guardians have the right to deny the use of photos at any time or request they are removed.
- TAMHI will communicate with anyone whom we hold data /pictures of about what we hold and why we have the information.
- TAMHI will ensure consent is provided and understood by individual/parent/guardians

Parents should know what we do and how we do it, and the coaches/designated person will always be on hand during, or after sessions, for consultation or advice.

When appropriate, letters (or telephone contact) will be issued in relation to further information or specifics in respect of an event etc.

A regular review of organisation policies will take place through meetings with coaches/volunteers and feedback from children and parents.

INTERNAL CONCERNS FLOW CHART



If you do not know who to turn to for advice or are worried about sharing your concerns with a senior colleague, you should contact the Health and Social Care Trust (HSCT) Gateway Team direct (or the NSPCC on 0808 800 5000). At any stage during the process outlined on the previous page in the left hand column the issue can be referred externally either formally or informally for advice. Following the external (right column) outcome the matter may be referred back to the organisation's Disciplinary Committee.

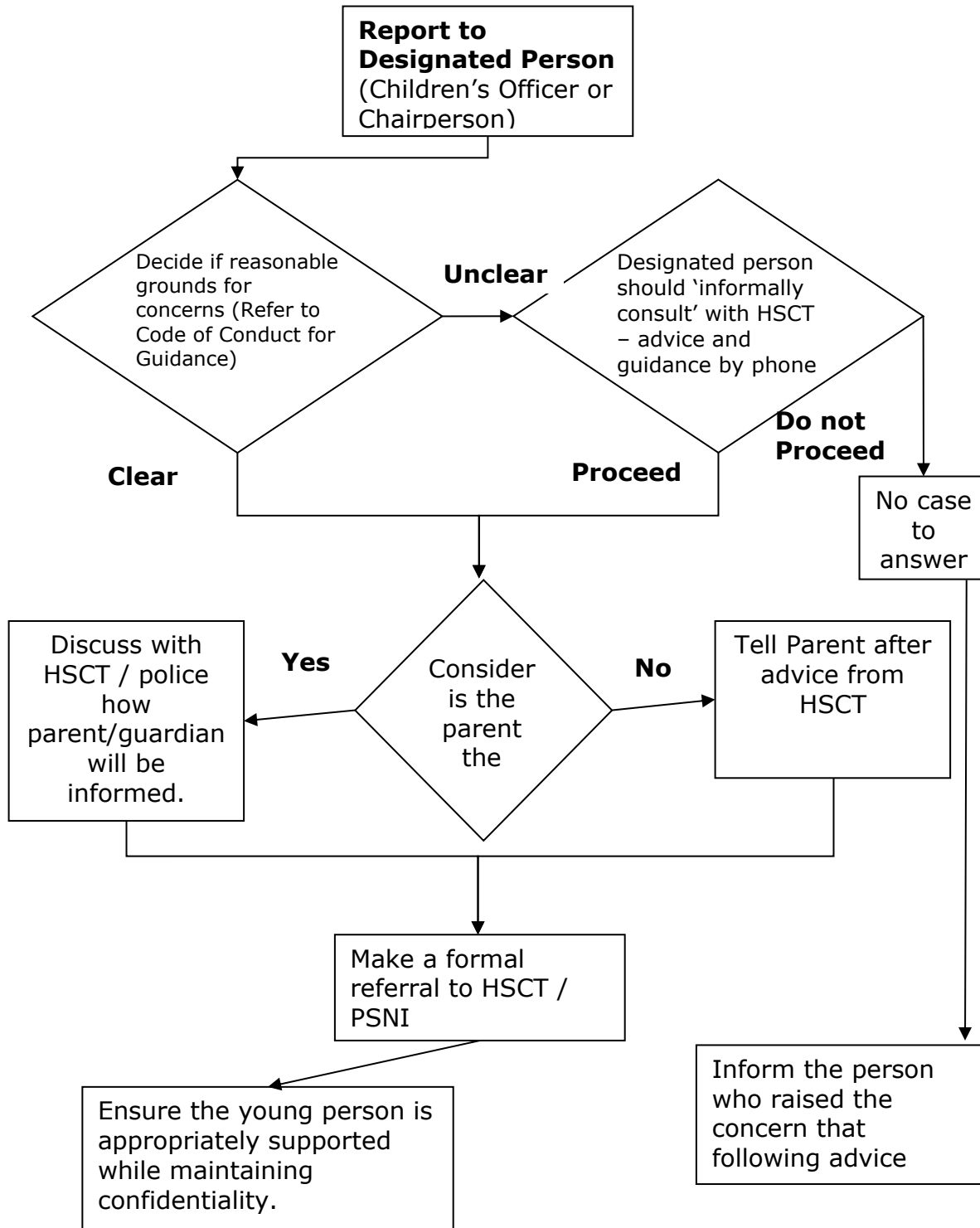
DEALING WITH CONCERNS ABOUT A COLLEAGUE

The vast majority of people who work with children are well motivated and would never harm a child. Unfortunately, a few do and it is essential that the organisation creates a culture that makes staff/volunteers willing and comfortable to voice their concerns, particularly those about someone with whom they work or whom they know. Again, the organisation's Safeguarding procedures should be followed.

During an investigation, support should be given both to the individual who voices concerns and to the suspected abuser. Once the investigation is completed, the organisation must decide what action, if any, is necessary to prevent a similar situation arising again.

EXTERNAL CONCERNS FLOW CHART

When the concern is about possible abuse outside the organisation



TAMHI Safeguarding Vulnerable Adults Policy

Safeguarding Vulnerable Adults

'Any adult at risk of abuse, exploitation or neglect should be able to access support to enable them to live a life free from violence and abuse.'

(Safeguarding Vulnerable Adults: Regional Policy and Procedural Guidance, 2006)

1. Introduction

The aim of this guidance is to outline the practice and procedures, for paid and voluntary staff, to contribute to the prevention of abuse of vulnerable adults through raising awareness and providing a clear framework for action when abuse is suspected.

In the course of our duties staff may become aware of situations where a vulnerable adult is at risk of abuse or is being abused. It is important that staff are alert to signs of abuse and take appropriate action to safeguard vulnerable adults.

2. Who is a vulnerable adult?

A vulnerable adult is any person aged 18 years or over who is, or may be, unable to take care of him or herself or who is unable to protect him or herself against significant harm or exploitation. This may be because he or she has a mental health problem, a disability, a sensory impairment, is old and frail, or has some form of illness. Because of his or her vulnerability the individual may be in receipt of a care service in his or her own home, in the community or be resident in a residential care home, nursing home or other institutional setting.

3. Why do we need to protect Vulnerable Adults?

Vulnerable adults are entitled to have their civil and human rights upheld and to live a life free from abuse. They need to be treated with respect and dignity, be able to choose how to live their lives independently. They should be afforded the opportunity to participate in their local community as active citizens.

They should also be able to fulfil personal aspirations and realize potential in all aspects of their daily lives. This includes being able to get support services and someone to speak for them, and having their voice heard in decisions that affect their lives. If abuse does occur, vulnerable adults also need to be assured that they will be protected by the law and have their civil and human rights upheld in the course of any investigation that takes place.

4. What makes an adult vulnerable?

The definition of vulnerable adult is linked to the range of services targeted at people who by virtue of the need to access those services is more likely to render them vulnerable. This includes the services of a residential care home, a nursing home, domiciliary and health care services, prison and probation services, welfare services under the supporting people program, direct payment services and services offered to adults who have particular needs generated by age, a disability or health impairment.

5. What is meant by work with a vulnerable adult?

Under the new Vetting and Barring Scheme legislation, work with vulnerable adults is expressed in terms of 'regulated activity' or 'controlled activity'. Regulated activity includes activities like teaching, training, instructing, caring, supervising, offering advice and guidance and transport. It also includes any work which provides the opportunity for contact with a child or vulnerable adult in places like schools, children's hospitals, childcare facilities, young offenders' centers, children's homes, nursing homes or residential care homes. Certain positions of responsibility are also considered to be regulated activity, like the Commissioner for Children and Young People or a school governor.

Controlled activity includes ancillary support work in the health, further education and adult social care sectors. Controlled activity also includes those who have access to health, personal social services, educational and family proceedings records who work in places like a Health and Social Care Trust or an Education and Library Board.

From 12 November 2010 when someone new is recruited to work with vulnerable adults the individual must be registered with the Independent Safeguarding Authority (ISA). The organization must check that the person is registered before allowing them to commence employment. This will determine whether or not the organization can allow them to take up regulated activity. For further information on safe recruitment process and vetting checks see paragraph 4.2 Recruitment and Selection in The Child Protection Policy.

6. What is adult abuse?

Abuse is a violation of an individual's human and civil rights by any other person or persons. Abuse can take many forms:

Physical abuse - Includes hitting, slapping, pushing, kicking, burning, misuse of medication, inappropriate restraint or disciplining a person in an inappropriate way.

Psychological abuse - Includes emotional abuse, verbal abuse, humiliation, bullying, or the use of threats.

Financial or material abuse - Includes theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

Sexual abuse – Includes direct or indirect sexual activities, where the vulnerable adult cannot, or does not, give his or her consent.

Neglect or acts of omission- Withdrawing or not giving the help that a vulnerable adult needs, so causing them to suffer.

Discriminatory abuse – Includes abusing a person because of their ethnic origin, religion, language, age, sexuality, gender or disability.

Institutional abuse – Includes abuse, or mistreatment, by a regime, or by any individual, within any building, where care is provided.

What are the signs?

Physical – fractures, bruising, burns, pain, marks, not wanting to be touched.

Psychological – withdrawn, too eager to do everything they are asked, compulsive behavior, not being able to do things they used, not being able to concentrate or focus.

Financial – having unusual difficulty with finances, over protection of money and things they own, not paying bills, and lack of normal home comforts.

Sexual – genital irritation, sexually transmitted diseases, offensive language, recoiling contact, persistent sexually inappropriate behavior.

Neglect – having pain or discomfort, overly hungry, thirsty or untidy, deterioration in health, changes in behaviour.

Discriminatory – the person is not receiving the care services they require career overly critical or makes insulting remarks about the person, person made to dress differently from how they wish.

Institutional – lack of personal clothing / possessions, no care plan, frequent hospital admissions, instances of unsatisfactory professional practice, ill treatment or gross misconduct.

The above list is meant as a guide and is not intended to be exhaustive.

Who might the abuser be?

It can be anyone:

- A partner, child, relative or friend.
- A paid or volunteer carer.

- A health, social care or other worker.
- A person claiming to be an employer of one of the above
- A stranger.

Where might the abuse occur?

Abuse can happen anywhere:

- In someone's own home.
- At a carer's home.
- Within nursing care, residential care or day care.
- At work or in educational settings.
- In rented accommodation or commercial settings.
- In public places.

How can you be alert to signs of abuse?

- You may see or hear something happen.
- A vulnerable adult may disclose an allegation to you.
- A colleague, family member or somebody else may tell you something that causes you concern.
- You may notice injuries or physical signs that cause you concern.
- You may notice either the victim or perpetrator behaving in a certain way that alerts you something may be wrong.

What should you do if you suspect abuse?

Remember your role is primarily supportive rather than investigative.

DO

- Be open and honest about your concerns.
- Stay calm.
- Listen very carefully.
- Ensure that no one is in immediate danger.
- Call for emergency services if urgent medical / police help required.
- Be aware that medical and forensic evidence might be needed.
- Encourage the person not to wash or bathe as this could disturb medical/forensic evidence.
- Tell the person that they did the right thing in telling you.
- Express concern and sympathy about what has happened.
- Reassure that the information will be taken seriously and give information about what will happen next.
- Let the person know that they will be kept involved at every stage; that they will be told the outcome and who will do this.
- Give the person contact details so that they can report any further issues or ask any questions that may arise.

- Explain that you must tell your line manager or designated officer.
- Inform your line manager or designated officer immediately.
- Explain what you have heard or seen that has given rise to your concerns.
- Give as much information as possible.

DO NOT

- Stop someone disclosing to you.
- Be afraid to act on your concerns.
- Press the person for more details.
- Promise to keep secrets or make promises you cannot keep.
- Gossip about the disclosure or pass on the information to anyone who does not have a legitimate need to know.
- Contact the alleged abuser.
- Attempt to investigate yourself.
- Tidy up, as this may disturb forensic evidence.
- Be judgmental.
- Leave details of your concerns on a voicemail or by e-mail.

Who do I contact if I suspect abuse?

It is important to remember that if a vulnerable adult is in **immediate danger** you should contact the emergency services immediately by dialling **999**. If you have any concerns discuss them with your line manager whose responsibility it will be to refer these concerns to the appropriate Health and Social Care Trust Adult Protection Co-ordinator. All the telephone numbers you will need are held centrally within the Office Managers office.

If you have raised your concerns in the above way but either the vulnerable person or your line manager is reluctant to proceed with the referral, you should make a record and contact your HSC Trust's Adult Protection Co-ordinator or a Designated Officer with responsibility for Adult Protection.

If all mechanisms for reporting allegations of abuse have been exhausted without your concern being taken seriously, it should be noted that the Public Interest Disclosure (Northern Ireland) Order 1998 provides for the active safeguarding and protection of what are commonly known as 'whistle-blowers'.

Remember:

**We are all responsible for the protection of vulnerable adults.
Adopted and TAMHI Board of Directors 15.6.17**