

# Healthwatch Hillingdon

## Working with Vulnerable Groups Policy

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## **1 POLICY**

The aim of this policy is to ensure that Healthwatch Hillingdon (HWH) will work to safeguard the welfare of vulnerable groups and individuals that are involved in its activities.

HWH will provide the necessary support and training for staff to ensure the risk of abuse is minimised.

## **2 SCOPE**

This policy applies to all HWH employees and volunteers.

## **3 DEFINITIONS**

### **3.1 Vulnerable Adults**

A vulnerable adult is someone over the age of 18 who is, or may be in need of Community Care Services by reason of mental or other disability, age or illness and is, or may be unable to take care of him or herself, or is unable to protect themselves against significant harm or serious exploitation.

People who may be included in a definition of vulnerable person include:

- People with learning or physical disabilities
- People with sensory impairment
- People with mental health needs including dementia
- People who misuse substances including alcohol
- People who are physically or mentally frail
- People in residential accommodation in connection with nursing or care they require or as a pupil attending a special school
- People in sheltered housing
- People in receipt of domiciliary care for reason of age, health or disability, provided continuously or not
- People detained by lawful custody (in a prison, remand centre, young offender institution or secure training centre attendance centre, removal centre or short-term holding facility).
- People under supervision by a person exercising functions for purposes of part 1 of the Criminal Justice and Court Services Act
- People who require assistance in the conduct of their own affairs

### **3.2 Abuse**

Abuse is a violation of an individual's human and civil rights by any other person or persons. Abuse results in significant harm or exploitation of the vulnerable person.

The main forms of abuse are:

- Physical
- Sexual
- Psychological
- Financial or material
- Neglect & acts of omission
- Discrimination

#### **4 MINIMISING OPPORTUNITIES FOR ABUSE**

**4.1** Staff will organise their work to minimise situations where the abuse of vulnerable individuals may occur.

**4.2** When working with partner organisations, HWH staff will not take direct supervisory responsibility for vulnerable individuals unless they are suitably qualified. Partner organisations will be responsible for providing suitably qualified adults at recommended supervisory ratios (see section 4.4), e.g., carers.

**4.3** During HWH organised events and activities, vulnerable groups will be supervised in accordance with recommended supervisory ratios (see section 4.4). However, HWH will ensure where reasonably practical that there will always be a **minimum of two adults** for any activity, one of which will be a suitably qualified adult.

**4.4** The recommended supervisory ratios for vulnerable adults are:-

- **1 adult to 5 individuals for people with disabilities**
- **1 adult to 12 individuals aged over 16 without disabilities**

**4.5** HWH will not organise or support working situations where one vulnerable individual is under the supervision of one adult in isolation from other people.

**4.6** HWH will agree in advance with partner organisations that the conditions set out in this section on minimising abuse are binding on all parties. If responsible adults from other organisations absent themselves during a

project or activity leaving HWH staff alone or reducing supervisory ratios below the accepted minimum, the following action will be taken:-

- The activity will be completed as safely and quickly as possible
- The staff member will complete an Incident Report Form (Appendix 1) and report it to their Line Manager
- The Line Manager will contact the organisation and make them aware that its action is not acceptable.
- If the practice is repeated, involvement with the organisation will be suspended until HWH is satisfied that such action will not be repeated

## **5 RECRUITMENT**

- 5.1** All employees/volunteers and those contracted to work with HWH whose role entails working with vulnerable groups, will be subject to a DBS (Disclosure and Barring Service) check and follow up DBS checks will be carried out on employees/volunteers every 3 years.
- 5.2** No vulnerable adult will be discriminated against on the grounds of race, gender, culture, age, sexual orientation, economic status or ability by HWH. Vulnerable adults and/or their carers are encouraged to make complaints or raise a grievance should they believe they have been subject to discriminatory, abusive or inappropriate treatment outlined in our Complaints Policy and Procedure (HWH008).

## **6 DEALING WITH ABUSE**

- 6.1** Staff working with vulnerable groups may find occasionally that an individual may disclose that abuse has occurred or may discover evidence that abuse has taken place (see Section 3.2 for definitions of abuse). Staff will take action in all cases even if the abuse occurred outside a HWH activity.
- 6.2** If staff suspect that a vulnerable individual has been abused or is at risk from outside the organisation, they will report it in confidence to their Line Manager or the Chief Executive Officer (CEO), who will consult with the relevant Council Safeguarding Team in accordance with current procedure.
- 6.3** If staff suspect that a vulnerable individual is at risk from another member of HWH staff, they will report it in confidence to the CEO or Board HR Lead who will deal with the matter in accordance with HWH's Disciplinary Policy and Procedure (HWH001), Complaints Policy and Procedure (HWH008),

Whistleblowing Policy and Procedure (HWH007) and the Local Authority Guidelines.

- 6.4 It will be the responsibility of the appropriate department within Social Services to deal with the information provided. Staff must not investigate the disclosed or suspected abuse.
- 6.5 Staff involved in reporting any disclosed or suspected abuse will maintain the strictest confidence at all times.

## **7 WELFARE OF VULNERABLE ADULTS**

- 7.1 Staff will be aware of and take steps to ensure the welfare of vulnerable individuals is maintained whilst they are engaged in activities with HWH.
- 7.2 Staff should take note of issues regarding clothing, heat, light, food, toilet facilities, changes in weather conditions, and their effects on individuals.
- 7.3 If staff are concerned over the welfare and safety of an individual or group then the activity should be completed as safely and quickly as possible.

## **8 WORKING WITH OTHER AGENCIES/INDIVIDUALS**

- 8.1 Where agencies/individuals are being paid for a specific programme of work HWH will prepare a contract outlining rules and responsibilities which will be signed and dated by both parties (CEO to sign on behalf of HWH) prior to any work commencing.
- 8.2 Staff will ensure that in any work carried out in which a partner organisation has direct supervisory responsibility for vulnerable groups; HWH's guidelines are adhered to as a minimum requirement. If work is underway and staff feel that this is not the case, action should be taken as outlined in Section 4.3
- 8.3 Members of outside agencies/artists/consultants working with HWH and vulnerable groups must hold a satisfactory DBS check, which is not more than 3 years old. A copy of this will be obtained and placed on the appropriate file. Individuals must also provide proof of ID and address.

## **9 MANAGEMENT OF WORKING WITH VULNERABLE GROUPS POLICY**

- 9.1 All employees will receive a copy of the Working with Vulnerable Groups Policy.

- 9.2 All employees should receive appropriate training and support if they are to be engaged in work with vulnerable groups. Records should be kept of who has received such training.
- 9.3 All employees should record significant events or concerns using the Incident Report Form (Appendix 1), which should be signed by the appropriate Line Manager and held on central file.
- 9.4 The CEO or Board HR Lead is responsible for ensuring that all employees are familiar with the policies and procedures in relation to working with vulnerable groups. The CEO or Board HR Lead is responsible for the implementation and monitoring of these policies and procedures and good practice guidelines.
- 9.5 All Line Managers are responsible for monitoring practice and ensuring that staff follow these procedures when working with vulnerable groups.

## Appendix 1 Incident Report Form

To be completed by Manager:

Report Number

Type of incident:

- Personal Injury
- Ill Health
- Violence
- Other
- Near Miss

Date of Incident	Time of Incident
Location of Incident	
Name of injured person	Equipment involved
Type (eg. Visitor, staff, trainee, contractor)	
Address	
Description of the incident (including events leading up to it)	
Witnesses	
What measures should be under taken to prevent recurrence?	
Managers Name	
Managers Signature	Date

## Appendix 2 - Risk Assessment Matrix

### Step 1: Assess how serious the issue is

Seriousness	Description
Low	Unsatisfactory service or experience not directly related to care. No impact or risk to provision of care. OR Unsatisfactory service or experience related to care, usually a single resolvable issue. Minimal impact and relative minimal risk to the provision of care or the service. No real risk of litigation.
Medium	Service or experience below reasonable expectations in several ways, but not causing lasting problems. Has potential to impact on service provision. Some potential for litigation.
High	Significant issues regarding standards, quality of care and safeguarding of or denial of rights. Complaints with clear quality assurance or risk management issues that may cause lasting problems for the organisation, and so require investigation. Possibility of litigation and adverse local publicity. OR Serious issues that may cause long-term damage, such as grossly substandard care, professional misconduct or death. Will require immediate and in-depth investigation. May involve serious safety issues. A high probability of litigation and strong possibility of adverse national publicity.

### Step 2: Decide how likely the issue is to recur

Likelihood	Description
Rare	Isolated or 'one off' - slight or vague connection to service provision
Unlikely	Rare - unusual but may have happened before
Possible	Happens from time to time - not frequently or regularly
Likely	Will probably occur several times a year
Almost certain	Recurring and frequent, predictable

### Step 3: Categorise the risk

Seriousness	Likelihood of recurrence				
	Rare	Unlikely	Possible	Likely	Almost certain
Low	Low				
		Medium			
Medium			High		
High				Extreme	