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Safeguarding Policy and Procedure for \_\_\_\_\_\_\_\_\_\_U3A Sample

# Introduction

For U3As in England and Wales.

This is a template document that you can adapt to suit the particular requirements of your U3A.

# Policy statement

This policy and procedure is written to enable the committee to address issues where there are safeguarding concerns. Safeguarding includes incidents between members, concerns regarding abuse or neglect that a U3A member may be experiencing outside of the U3A, health related issues or previous or pending criminal convictions.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_U3A committee has a duty of care to its members but does not hold any statutory authority. Matters of concern will be reported to the relevant safeguarding authorities and charity regulatory authorities, as appropriate.

\_\_\_\_\_\_\_\_\_\_\_\_\_U3A recognises that some people are potentially at risk of abuse and neglect. Where abuse or neglect is suspected \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_U3A will aim to respond in a prompt and efficient manner to any situation where there is a risk of or perceived risk of harm. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_U3A recognises that there are various forms of abuse which can be perpetrated by volunteers, members, relatives, friends and neighbours. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_U3A will neither condone nor tolerate any form of abuse or neglect and believes that all people should be able and, where necessary, enabled to live in an environment which is safe and free from harm.

It is not appropriate for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_U3A to take the lead role in any Safeguarding Enquiry under Section 42 of the Care Act 2014. Where there are serious concerns regarding abuse or neglect \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_U3A committee will seek advice and support from the Trust, where possible, and will contact the relevant statutory authorities, as needed. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_U3A will monitor the implementation of this policy and procedure annually through its committee.

In following the safeguarding procedure \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_U3A will strive to uphold the principles that those involved in incidents are entitled to:

* privacy
* be treated with dignity and respect
* lead an independent life and to be enabled to do so
* choose how they live their lives
* the protection of the law
* have their human and civil rights upheld regardless of ethnic origin, gender, sexuality, impairment or disability, age, religious or cultural background.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_U3A will also follow the principles enshrined within the Care Act 2014:

* **Principle 1 – Empowerment** – whereby the approach is focused on the individual making their own decision and gaining informed consent, where possible.
* **Principle 2 – Prevention** – seeking to take steps to prevent issues from arising or escalating.
* **Principle 3 – Proportionality** – responding in a proportionate way to the issue/s being presented.
* **Principle 4 – Protection** – seeking to keep the membership safe and protection for those deemed to be at risk.
* **Principle 5 – Partnership** – reporting incidents to the relevant statutory bodies and liaising with the Trust.
* **Principle 6 – Accountability** – accurate recording of incidents. Reporting incidents, as required, to the Trust and relevant regulatory authorities.

# Procedure

\_\_\_\_\_\_\_\_\_\_\_\_\_\_U3A has a responsibility to ensure that its committee members and group leaders understand their safeguarding responsibilities.

Depending on the nature of the allegation and the identified risk, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_U3A will support the alleged victims and the alleged perpetrators of any abuse as well as any volunteer who becomes aware of an allegation in so far as this does not compromise any safeguarding enquiry or investigation into the allegation or place other adults at risk.

\_\_\_\_\_\_\_\_\_\_\_\_\_U3A will make every effort to respect the confidentiality of any information that is disclosed under this policy and procedure, however due to the seriousness of allegations confidentiality is not absolute. Information will be recorded and stored securely in accordance with Data Protection Act 2018 but information may have to be shared, on a ‘need-to-know’ basis only, to prevent:

* Danger to a person’s life
* Danger to a person’s health
* Danger to others
* Danger to the community
* or to prevent or to facilitate the investigation of a serious crime

## Courses of action

* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_U3A’s approach to safeguarding will include members who exhibit health concerns that could put themselves or others at risk, convictions (previous or pending) that include offences of a sexual or violent nature, inappropriate behaviour exhibited by a member including sexual advances, bullying, aggression or violent behaviour, harassment and/or discrimination. This can include behaviour exhibited face to face as well as electronic communications or via social media platforms.
* Where the committee becomes aware of a safeguarding concern steps will be taken, as needed, to ensure the safety of adult/s at risk is secured as a first priority. The steps to take to address this will be discussed and agreed between the Executive Officers of the committee in the first instance. No committee member will act in isolation when dealing with a safeguarding concern.
* Where \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_U3A committee becomes aware of a safeguarding concern, the first step will be to gather as much information as possible to assist with the decision as to the next steps. A risk assessment will be developed and recorded as soon as possible after the concern comes to the attention of the committee. Where it is deemed that the risk is high and immediate action needs to be taken, the committee will contact the relevant local authorities and – where possible – the Trust for advice and support.
* As far as possible, the adult at risk’s wishes will be respected as to whether or not to refer any concerns to the local authority as a Safeguarding Enquiry under Section 42 of the Care Act 2014. However, it may be necessary to override their wishes in the best interests of other adults at risk.
* In developing the risk assessment, the committee will consider the level of risk and the action that needs to be taken accordingly. Assessment of risk will include:
  + Risk to the individual member
  + Risk to other members within the U3A
  + Reputational risk for the individual U3A and the U3A movement as a whole
* Where the risk is not deemed to be high but support is needed, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_U3A will contact the Trust to discuss the concerns and seek additional assistance in developing the risk assessment. Assistance will always be sought before moving to exclude any member from the U3A on the basis of a safeguarding risk assessment.
* Once the risk assessment is completed, the committee will decide as to the most appropriate course of action. This could include excluding members from certain groups i.e. groups held in people’s homes, requesting that a member attends the U3A with a carer or excluding a member from a group run by a particular group leader.
* Depending on the nature of the allegation it may be necessary to pursue the incident following \_\_\_\_\_\_\_\_\_\_\_\_\_U3A’s complaints, disciplinary or grievance procedure. Where it is decided that this is the best course of action the matter will not be investigated by any party that was privy to the initial reporting of the incident.
* All actions taken will be recorded. Any records will remain confidential to the committee unless a prior decision has been taken to share the record with the relevant statutory bodies.

This policy was adopted on:

Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Committee role\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print name:

Policy review date:

# Dealing with Disclosure

If someone discloses a safeguarding concern to you:

## Do

* Stay calm and try not to show shock or disbelief.
* Listen carefully to what they are saying.
* Be sympathetic (I’m sorry that this has happened to you’).
* Be aware of the possibility that medical evidence might be needed.
* Tell the person that:
  + They did the right thing to tell you
  + You are treating the information seriously. It was not their fault.
  + You are going to inform the appropriate person.
  + You/ will take steps to protect and support them.
* Record and report the disclosure in line with the procedure.

## Do not

* Press the person for more details; this will be done at a later date.
* Stop someone who is freely recalling significant events (Don’t say ‘hold on, we’ll come back to that later’; they may not tell you or anybody else again).
* Promise to keep secrets; you cannot keep this kind of information to yourself.
* Make promises you cannot keep (Such as ‘This will never happen to you again’).
* Make contact with the alleged abuser unless they are also a U3A member and it is necessary to do so to safeguard other members and/or the alleged abuser.
* Be judgemental.
* Pass on the information other than to those with a legitimate ‘need-to-know’ under this policy and procedure.

## Record of disclosure

In your **record of the disclosure** you should aim to:

* Note what people actually said, using their own words and phrases.
* Describe the circumstances in which the disclosure came about.
* Note the setting and anyone else who was there at the time of the disclosure.
* Separate factual information from your own and others’ opinions.
* Use pen or biro with black ink so that the report can be photocopied if needed.
* And be aware that your report may be required later as part of a legal action or disciplinary procedure.

# Key Definitions

## Adult at risk

is any person, who is over 18 years of age and who has need for care and support, is experiencing, or is at risk of abuse or neglect, and as a result of those needs is unable to protect himself or herself against the abuse or neglect or risk of it.

## Abuse

is the “violation of a person’s human and civil rights by any other person(s). It may be a single or repeated act(s), physical verbal, psychological, sexual, institutional, discriminatory or financial, an act of neglect or failure to act”

## Types of abuse

* **Physical abuse** – including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.
* **Domestic violence** – including psychological, physical, sexual, financial, emotional abuse; so called ‘honour’ based violence.
* **Sexual abuse** – 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 and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.
* **Psychological abuse** – 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.
* **Financial or material abuse** – 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.
* **Modern slavery** – 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.
* **Discriminatory abuse** – including forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion.
* **Organisational abuse** – 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, policies, processes and practices within an organisation.
* **Neglect and acts of omission** – including ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating
* **Self-neglect** – this covers a wide range of behaviour neglecting to care for one’s personal hygiene, health or surroundings and includes behaviour such as hoarding.

# Recommended agencies:

* The Local Authority, Social Services, GP Surgery, Police, etc.
* **Action on Elder Abuse (AEA)** <https://www.elderabuse.org.uk/> is a confidential support and advice for older people who have been abused or people who know an older person who may be suffering abuse. Available weekdays 9am - 5pm on freephone 0808 808 8141.