

# Safeguarding Vulnerable Adults

# Vulnerable Adults Policy

***HealthProm’s Safeguarding Policy is made up of:***

* ***The Child Protection Policy;***
* ***The Vulnerable Adults Policy;***
* ***The Ethics Policy and Code of Conduct; and***
* ***The Whistleblowing Policy.***

Registered Charity 1100459

# HealthProm Safeguarding Vulnerable Adults Policy

HealthProm is committed to Safeguarding Adults in line with national legislation and relevant national and local guidelines. We will safeguard adults by ensuring that our activities are delivered in a way which keeps all adults safe.

You must read and understand this policy together with HealthProm’s Child Protection policy

HealthProm is committed to creating a culture of zero-tolerance of harm to adults which necessitates: the recognition of adults who may be at risk and the circumstances which may increase risk; knowing how adult abuse, exploitation or neglect manifests itself; and being willing to report safeguarding concerns. This extends to recognising and reporting harm experienced anywhere, including within our activities, within other organised community or voluntary activities, in the community, in the person’s own home and in any care setting.

Abuse is a violation of an individual’s human and civil rights. It can take many forms. HealthProm is committed to best safeguarding practice and to uphold the rights of all adults to live a life free from harm from abuse, exploitation and neglect.

**Who is bound by this policy?**

This policy is binding for all people who work for or with HealthProm in whatever capacity: board members, staff, consultants, interns and volunteers. All concerned are required to read and sign this policy as a declaration that they have understood and accept this policy.

HealthProm works with partners who have safeguarding vulnerable adults policies in place, and some who are working towards having these policies in place with the support of HealthProm or other partners. When representatives of HealthProm visit partner organisations in other countries, in whatever capacity they are also subject to the safeguarding policies of the partner organisations. They must therefore ensure that they read and are act in accordance with the partner organisations’ safeguarding policies also.

In the event that a safeguarding concern is raised about a HealthProm employee or consultant whilst abroad, our Designated Safeguarding Officer will therefore investigate and take action under both the HealthProm’s Safeguarding policies and procedures and the partner organisation’s safeguarding policies and procedures.

**Who is covered by this policy?**

This policy covers all vulnerable and potentially vulnerable adults with whom any person working for or with HealthProm (including beneficiaries, staff, consultants and volunteers) interacts with during the course of their work.

However, all people working for or with HealthProm are also expected to observe this policy when interacting with children outside of their work. HealthProm will take into account any violation of adults’ protection rights outside HealthProm.

HealthProm accepts and recognises its responsibilities to develop awareness of the issues that cause vulnerable adults harm, and to work in conjunction with our partners to maintain a safe environment in our projects. Although the main focus of our work is to ensure that vulnerable children get the best start in life, we recognize that we work in a wider context with families and communities.

**Our commitment to safeguarding vulnerable adults**

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.

Our projects connect us with adults who could be classed as particularly vulnerable including **poor displaced families**, **pregnant women, women in single headed households, people with disabilities,** **people who have low levels of literacy** **and people who have grown up in institutional care**.

We recognise that poverty puts vulnerable adults at greater risk of exploitation and abuse including being trafficked, falling into crime or the sex trade, or ending up in prison.

We will not tolerate any form of abuse wherever it occurs or whoever is responsible. We are committed to promoting an atmosphere of inclusion, transparency and openness. We will endeavour to safeguard vulnerable adults linked with our projects by:

* Ensuring that board members, staff, consultants and volunteers understand the rights of vulnerable adults to be safe from abuse and the need to respect and protect these rights
* Ensuring that our partners understand the rights of vulnerable adults to be safe from abuse and the need to respect and protect these rights
* Ensuring that any vulnerable adults we work with are made aware of their right to be safe from abuse and what they should do should they feel unsafe
* Adhering to our safeguarding vulnerable adult policy and ensuring that it is supported by robust procedures;
* Carefully following the procedures laid down for the recruitment and selection of staff and volunteers;
* Conducting DBS checks on all staff and consultants;
* Providing effective management for board members, staff, consultants and volunteers through supervision, support and training;
* Implementing clear procedures for raising awareness of and responding to abuse within the organisation and for reporting concerns to statutory agencies that need to know, while involving carers and vulnerable adults appropriately;
* HealthProm recognises that the abuse of vulnerable adults is an abuse of power, and that power dynamics can impede reporting. HealthProm will work with partners to create a safe environment for reporting to take place. HealthProm will identify an independent and impartial advocate to support a vulnerable adult through safeguarding processes.

**Vulnerable adult rights**

The rights of vulnerable adults to be protected by the Human Rights Act 1998 through incorporation of the European Convention on Human Rights 1950. Specifically, a vulnerable adult’s right to life is protected (under Article 2 of the ECHR); their right to be protected from inhuman and degrading treatment (under Article 3); and their right to liberty and security (under Article 5). Types of abuse are listed in Appendix 1.

**Policy Review**

The nominated Lead Safeguarding Trustee is responsible for ensuring that this Safeguarding Vulnerable Adults Policy is reviewed by the Board every year. The Designated Safeguarding Officer (DSO) is responsible for ensuring effective implementation of this policy and reporting to the Lead Safeguarding Trustee and the Board.

The DSO will be advised and assisted by the Safeguarding Advisor(s) to HealthProm in the monitoring and updating of these policies and procedures and for providing training to staff and local partners on how vulnerable will be kept safe.

Our beneficiaries will be consulted as part of these reviews of safeguarding policies and practices.

**Recruitment**

Risk management prompts HealthProm to think more broadly about the work that it does. It involves identifying the potential for an incident to occur, evaluating the likelihood and seriousness of the incident happening, and taking steps to reduce the possibility of it occurring. It strengthens and adds value to the activities that we offer.

In order to minimise the possibility that people will become part of HP who have a history of abusing vulnerable adults we will:

* Require two professional references (referees will be informed in the reference request that employees might have access to vulnerable adults. They will be asked to draw to HealthProm’s attention any matter of safeguarding concern they may have. They are invited to telephone a reference should they wish.
* Conduct DBS (Disclosure and Barring Service) checks (formerly CRB checks) on people who work for or with HealthProm who will have contact with vulnerable adults.
* Require external consultants to show recent DBS checks before they may work for HP’s projects involving vulnerable adults
* Require consultants whose DBS checks are 3 years old to renew
* Consultants living overseas in countries where DBS checks (or similar) are not feasible must provide HealthProm with details of two organisations that will provide professional and character references. Satisfactory references must be obtained before the consultancy can commence.
* Only allow interns and volunteers working with HP to have contact with vulnerable adults under supervision of an employee or external consultant who has been through the DBS checking process All new board members, staff, consultants, interns and volunteers will be given a copy of the Safeguarding Policies and professional code of conduct policy and asked to sign it, them confirming they have read and understood both documents and agree with their terms*.*

**Management and training**

HealthProm believes that every employee and local partner should be aware of the principles and procedures of safeguarding vulnerable adults, and how to recognise and respond to abuse.

Newcomers to HealthProm shall, before they undertake any work for HealthProm, read this policy in the company of the HealthProm DSO. They will discuss with the DSO any matters about which they are unclear and then both the new worker and the DSO shall sign that they have read the policy and had the opportunity to talk with the DSO. The newcomer shall attend the first possible training workshop.

HealthProm will run an annual workshop about safeguarding vulnerable adults to inform all people working for or with HealthProm about recognising abuse and responding to it through use of the HealthProm policy.

**Working with partner organisations**

Project Managers with the support of the DSO will ensure that HealthProm’s partners have appropriate safeguarding policies and procedures in place. In the absence of these, HealthProm will assist its partners in developing them, as part of its capacity-building function. It will also work with them to ensure that our beneficiaries are made aware of their right to be safe from abuse. Where necessary, induction and training will be provided by HealthProm’s Safeguarding Advisor.

In each local authority area in the UK and each country in which HealthProm conducts activities involving work with vulnerable adults, contacts will be established with the relevant safeguarding/welfare agencies as appropriate.

**Visitors to partner projects**

In addition to its direct work with local communities in the UK, HealthProm also may work through its partners overseas. Partners determine who may visit and when. HealthProm cannot and will not seek to influence our partners in this matter. With their agreement, we can put visitors such as volunteers and researchers in touch with our partners overseas. However, even this brief association with HealthProm will require visitors to sign up to HealthProm’s Safeguarding Policies. Failure to do so will be made known to our partner overseas.

**Roles and responsibilities**

All staff, trustees and volunteers are expected to take responsibility for safeguarding,

including recognising signs of abuse, maintaining a safe environment for all adults, including beneficiaries, staff and volunteers, and reporting concerns appropriately.

HealthProm’s safeguarding team, comprising the Designated Safeguarding Officer (DSO), nominated Lead Safeguarding Trustee, a Safeguarding Adviser and individual Project Leads, meets on a regular basis to discuss any safeguarding concerns, arising cases, assess trends and organisational risk, and monitor compliance with and effectiveness of our safeguarding practices.

The DSO will escalate concerns to the Board as needed. There is a Lead Safeguarding Trustee who acts as a conduit between the Safeguarding subgroup and the wider Trustee

Board. They can also be contacted with any concerns involving the DSO.

**Reporting Safeguarding Concerns**

Please note that if someone is at immediate risk of harm, the relevant emergency

services should be contacted on 999.

**How to report concerns**

Safeguarding concerns from volunteers:

These should be reported in the first instance to the volunteer’s primary contact

at HealthProm. The concerns will be discussed with the relevant Project Manager/Lead, while will escalate the concern further to DSO if needed, and appropriate action will be taken. If the volunteer cannot reach their primary contact, they should contact the DSO (please see contact details in Appendix 1)

Safeguarding concerns from staff

These should be reported to and discussed with their line manager. Together, the

staff member and their line manager will decide appropriate next steps and take

action. Staff should refer to our Safeguarding Policies for additional guidance about assessing safeguarding situations.

- Once an incident has been addressed, the staff member and their line manager

will report the concern to DSO, who will record it and report to the Lead Safeguarding Trustee or the relevant safeguarding contacts in the local council.

Safeguarding concerns from anyone else - such as members of the public, representatives of partner organisations, parents or carers.

These safeguarding concerns should be directly reported to the DSO or to the Safeguarding Lead Trustee if the concern involves DSO. This can be done by phone or email (depending on the urgency and/or confidentiality) of the situation. All relevant contact details can be found in Appendix 1.

**Reporting processes for international projects**

All incidents, allegations of abuse and complaints will be recorded and monitored by the DSO.

* Should a person travelling as a representative of HealthProm refuse to accept, or to agree to be bound by HealthProm’s safeguarding policies, the visit will be called off, and the partner informed.
* Should a partner identify a case of abuse, or suspect the behaviour or intent of a HealthProm employee, or someone acting on behalf of HealthProm, this should be reported as a matter of urgency to HealthProm’s DSO (using the Reporting form attached), who will advise Lead Safeguarding Trustee and the Board.
* In the event of an allegation of abuse, HealthProm will request that, when still in country, the matter is reported immediately to the Project Manager and the local authorities. Visitors from HealthProm in foreign countries are, of course, subject to the laws of those countries.
* When the allegation is made after the HealthProm staff member’s departure from the country in which the alleged offence takes place, a formal enquiry will be initiated that could lead to disciplinary measures and police action being taken.

**HealthProm’s Communications Guidelines**

HealthProm will sometimes use text and imagery from its projects and activities. We recognise everyone’s right to be accurately represented and accept our responsibility not to portray a manipulated or sensationalised depiction of our beneficiaries’s life and circumstances. All information will be handled in accordance with HealthProm’s Data Protection Policy.

**Appendix 1. Key Contacts**

**HEALTHPROM**

**HealthProm Lead Safeguarding Trustee:**

Name: Simon Ray, Chair of the Board

Contact details: 020 7832 5832, sr.simon.ray@gmail.com

**Designated Safeguarding Lead:**

Name: Tanya Buynovskaya

Contact details: 07732286527, tanya@healthprom.org

**LONDON BOROUGH OF CAMDEN**

**Camden Local Authority Designated Officer (LADO):**

Name: Jacqueline Fearon

Contact details: 020 7974 4556 Email: LADO@camden.gov.uk

**LONDON BOROUGH OF ISLINGTON**

**Islington Local Authority Designated Officer (LADO**)

Telephone: 0207 527 8101/02 Email: lado@islington.gov.uk

**LONDON BOROUGH OF BARNET**

MASH (Multi-Agency Safeguarding Hub) Telephone 020 8359 4066

LADO Local authority designated officer) 020 8359 6056

or

**Call POLICE on 999 (if there is an immediate risk of harm)**

**Appendix 2. Legal Framework**

In order to safeguard and promote the welfare of vulnerable adults, HealthProm will act in accordance with the following legislation and guidance:

* The Human Rights Act 1998
* The Data Protection Act 2018
* General Data Protection Regulations 2018
* England - The Care Act 2014 Care and Support Statutory Guidance (especially chapter 14) 2014
* Safeguarding Vulnerable Groups Act 2006
* The Human Rights Act 1998
* Sexual Offences Act (2003)
* England and Wales - Mental Capacity Act 2005
* Section 26, The Counter Terrorism and Security Act 2015 (PREVENT duty)

**Appendix 3: Types of Abuse**

**Physical Neglect** This involves actual or attempted injury to a vulnerable adult. Examples include:

Physical assault e.g. pushing, punching, slapping, tying down, giving food or medication forcibly and denial of medication

Use of medication other than as prescribed, deliberate poisoning or smothering

Inappropriate restraint

**Emotional/Psychological Abuse** This results in mental distress for the victim. Examples include:

Swearing, shouting, bullying, humiliation

Manipulation or the prevention of the use of services which would aid or enhance life experience

Isolation or sensory deprivation

**Financial or Material Abuse** This involves the exploitation of the resources and belongings of a vulnerable adult by formal or informal carers.

Examples include:

Theft or fraud

Misuse of money, property or resources

**Sexual Abuse** This involves sexual activity where a vulnerable adult cannot or does not give their consent.

Examples include:

Incest

Rape, acts of gross indecency

Involvement in or exposure to pornography.

**Neglect** This involves severe exposure of a person to danger, or failure to fulfil their basic needs either on a single occasion or on a persistent basis.

Examples include:

Denial of food, sleep, clothing

Failure to provide warmth, shelter, medical treatment

Failure to provide for physiological well-being.

**Racial Abuse** This involves treating someone less favourably because of his or her ethnic origins.

Examples include:

Verbal racist abuse

Offering services in an inferior manner

Denial of access to available translating or interpreting functions

Denigration of culture or religion

HealthProm team members should be aware that family, neighbours, friends, paid staff, volunteer helpers or peers might carry out abuse. We need to be sensitive to the power which exists in relationships where one person is dependent upon another for their care, where one person has more status or credibility than the other, or where one person controls access to resources or to contact with other people.

**Abuse or the suspicion of abuse must always be taken seriously and understood from the perspective of the victim.**

**APPENDIX 4: Sample Report Form for Suspected Abuse****[[1]](#footnote-1)**

If you have knowledge that a vulnerable adult has been abused or is at risk of abuse, please complete this form to the best of your knowledge. Please note that safeguarding concerns must be reported directly to HealthProm’s Designated Safeguarding Officer immediately (preferably within the same working day). You may wish to complete this form *before* contacting the designated person in your organisation’s reporting process *or* you may wish to complete the report *after* contacting the designated person. This report is to be used as a tool to develop the most un-biased information-based report possible. For confidentiality reasons, the report should be written and signed solely by you. It should be sent *only* to the designated contact person. It will be held in a safe and secure place and treated in the strictest confidence.

1. About You

Your name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your job title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Workplace: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your relationship to the Vulnerable Adult: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact details (please include your mobile phone number):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. About the Vulnerable Adult

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gender: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Guardians: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. About your Concern

Was the abuse observed or suspected? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is this concern based on first-hand information or information divulged to you by someone else? (If so who?) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Did the vulnerable adult disclose abuse to you? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of the alleged incident: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Time of the alleged incident: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location of the alleged incident: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of alleged perpetrator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nature of the allegation:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your personal observations (*visible injuries, emotional state, etc.)* [N.B. Make a clear distinction between what is fact and what is opinion or hearsay]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Exactly* what the vulnerable adult or other source said to you [if relevant] and how you responded to him or her: [Do not lead the adult. Record actual details]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any other information not previously covered:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Were there any other people involved in the alleged incident?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Action Taken, for example, to protect the adult from further harm or to report the matter to the police:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:

Date:

**Appendix 5. Declaration by board member, employee, consultant, intern or volunteer**

I have read and understand this policy and by signing here, indicate my commitment to the policy. I sign in the presence of the HealthProm Designated Safeguarding Officer and confirm that I have reviewed the policy and had the opportunity to ask questions.

I understand that by working with HP I am making a commitment that my work will do no harm to vulnerable adults and that I will be held to account for my actions that deliberately harm vulnerable adults.

I understand that the following groups are vulnerable adults, including **poor displaced families**, **pregnant women, women in single headed households, people with disabilities,** **people who have low levels of literacy** **and people who have grown up in institutional care**.

I am aware that I have a duty to report to HP, partners and the appropriate local authorities including the police, if I become aware of a vulnerable adult who has been abused or is at risk of harm.

I understand that if I am found to have acted in a way that deliberately harms a vulnerable adult (as described in your list above), I will be subject to an investigation by the lead adult protection officer in HP and a report will be made to the appropriate local authorities, including the police.

Signature:

Name:

Date:

Signature:

Name of DSO:

Date:

1. [↑](#footnote-ref-1)