



Safeguarding Vulnerable Adults

**POLICY
&
PROCEDURES**

2015

CONTENTS

Introduction	7
Section 1	9
Safeguarding Vulnerable Adults Statement, Standards, Values and Principles, Consent and Capacity, and Legal Context (NI)	
Section 2.....	17
Recruitment and Selection Procedure	
Section 3.....	21
Effective Management, Support, Supervision and Training	
Section 4.....	23
Recognising, Responding to, Recording and Reporting concerns of Abuse of Vulnerable Adults	
Section 5.....	35
Procedure for Managing Allegations or Concerns of Abuse of Vulnerable Adults against a Sister, Staff Member or Volunteer	
Section 6.....	41
Assessment and Managing Risks with Regard to Safeguarding Vulnerable Adults	
Section 7.....	43
Complaints Procedure	
Section 8	45
Management of Records, Confidentiality and Sharing Information	
Section 9.....	47
Code of Behaviour	

Appendices51

1	<i>Legal Context</i>	53
2	<i>Regulated Activity</i>	58
3	<i>Form for Recording and Reporting Concerns of Abuse in the Northern Province</i>	61
4	<i>Contact Details for Safeguarding in the Northern Province</i>	65
5	<i>Whistle Blowing Policy</i>	66
6	<i>Complaints Handling Policy</i>	74

Foreword

The Sisters of Mercy, Northern Province (NP) are committed to promoting the safety, wellbeing and protection of vulnerable adults in their ministries and communities, and take all concerns, allegations and disclosures of abuse very seriously. Safeguarding vulnerable adults is the responsibility of each one of us and all Sisters, staff and volunteers are called upon to embrace this commitment.

The Sisters of Mercy NP accept responsibility to develop awareness of the issues that can cause harm to vulnerable adults and to deal consistently and effectively with any suspicions, allegations or instances of abuse which may arise.

The Sisters of Mercy NP's "*Safeguarding Vulnerable Adults: Policy and Procedures*" has been developed to assist and support personnel across the Province to promote practices which protect vulnerable adults from harm and create a safe and caring environment for all.

I commend our "*Safeguarding Vulnerable Adults: Policy and Procedures*" document to you as a guide to best practice to be followed and implemented by all Sisters, staff and volunteers within the Province.

A handwritten signature in cursive script that reads "Sr Ann Brady".

Provincial Leader
Sisters of Mercy, Northern Province

January 2015

Introduction

The Sisters of Mercy NP, through their ministries and communities, are involved in providing services to a wide range of people including vulnerable adults.

Vulnerable adults are entitled to live their lives free from neglect, exploitation and abuse, and everyone has a responsibility for their safety. The Sisters of Mercy NP recognise that they have both a legal and moral obligation to ensure that proper procedures are in place for safeguarding vulnerable adults. Legislation exists in Northern Ireland to protect vulnerable adults, therefore the part of the Province which lies in this jurisdiction is subject to that legislation. There is no matching legislation in the Republic of Ireland: however adherence to this Policy is recommended to all personnel as a guide to good practice.

The purpose of this Policy is to help protect vulnerable adults from harm by setting out the principles and procedures which should underpin this important work and by providing a framework for how Sisters, staff and volunteers should relate to vulnerable adults.

The Safeguarding Vulnerable Adults (SVA) Policy is endorsed by the Provincial Leadership Team and must be adhered to by all personnel involved with the Sisters of Mercy NP. This Policy is developed in accordance with the relevant legislation in Northern Ireland and is based on “A Shared Responsibility: Standards and Guidance for Good Practice in Safeguarding Vulnerable Adults” document commissioned by the Department of Health and Social Services and Public Safety (DHSSPS) and produced by ‘Our Duty to Care’ Team, *Volunteer Now*.

Good practice means a commitment to keeping vulnerable adults safe from harm and exploitation by upholding their rights and acting in their best interests and with their consent. In order to do this we need to work together, to listen to and take seriously what vulnerable people tell us. The Sisters of Mercy NP require individuals, groups and organisations using or leasing Mercy premises to have their own Safeguarding Vulnerable Adults Policy in place where applicable. In addition, Sisters of Mercy employed in settings such as hospitals, social services, schools or care facilities are expected to comply with the Safeguarding Policies operational within their place of work.

This Policy can be accessed at www.sistersofmercy.ie

SECTION 1

Safeguarding Vulnerable Adults Statement, Standards, Values and Principles, Consent and Capacity and Legal Context (NI)

Safeguarding Vulnerable Adults Statement

Abuse is a violation of an individual's human and civil rights. The Sisters, staff and volunteers of the Sisters of Mercy NP are committed to practice which promotes the welfare of vulnerable adults and safeguards them from harm.

Sisters, staff and volunteers accept and recognise our responsibilities as twofold: to develop awareness of the issues that cause vulnerable adults harm and to establish and maintain a safe environment for them. We will not tolerate any form of abuse irrespective of where it occurs or who is responsible. We are committed to promoting an atmosphere of inclusion, transparency and openness. We are open to receiving feedback from the people who use our services, (Sisters, carers, advocates, staff, volunteers and visitors), with a view to continuously improving the services/ activities which we provide.

We will endeavour to safeguard vulnerable adults by:

- *Adhering to our safeguarding vulnerable adults 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*
- *Providing effective management for personnel through line management, 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*
- *Ensuring that general safety and risk management procedures are adhered to*
- *Promoting full participation and having clear procedures for dealing with concerns and complaints*
- *Managing personal information, confidentiality and information sharing*
- *Safeguarding vulnerable adults through the implementation of a Code of Behaviour for all involved with the organisation, including visitors.*

The Standards

In April 2009 the Department of Health and Social Services and Public Safety (DHSSPS) commissioned *Our Duty to Care* Team, **Volunteer Now** to develop Standards and Guidelines for organisations working with vulnerable adults in the voluntary, community and independent sectors. The introduction of the Safeguarding Vulnerable Groups (Northern Ireland) Order 2007, combined with an increased awareness of adult abuse, meant that the need for good practice guidelines for groups that work with vulnerable adults became a priority.

The guidance contains 8 Safeguarding Standards and Policy has been developed in accordance with these Standards. Adherence to the Standards will enable compliance with the requirements for the Protection of Vulnerable Adults as set out in the Minimum Standards published by the DHSSPS in the *Quality Assessment Framework for Supporting People*.

Standard One

The organisation has a Safeguarding Vulnerable Adults (SVA) policy supported by robust procedures.

Standard Two

The organisation consistently applies a thorough and clearly defined method of recruiting staff and volunteers in line with legislative requirements and best practice.

Standard Three

There are procedures in place for effective management, support and training of staff and volunteers.

Standard Four

The organisation has clearly defined procedures for raising awareness of, responding to, recording and reporting concerns about actual or suspected incidents of abuse.

Standard Five

The organisation operates an effective procedure for assessing and managing risks with regard to safeguarding vulnerable adults.

Standard Six

There are clear procedures for receiving comments and suggestions, and for dealing with concerns and complaints about the organisation.

Standard Seven

The organisation has a clear policy on the management of records, confidentiality and sharing of information.

Standard Eight

There is a written code that outlines behaviour expected of all involved with the organisation, including visitors.

WHO is a Vulnerable Adult? Definition

“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 home, in the community or be resident in a residential home, nursing home or other institutional setting” Adult Abuse –Guidance for Staff (NIO, DHSSPS 2009).

Vulnerable Adults’ Rights

The rights of vulnerable adults to live a life free from neglect, exploitation and abuse are protected by the Human Rights Act 1998. Specifically, a vulnerable

adult's right to life is protected (under Article 2); their right to be protected from inhuman and degrading treatment (under Article 3); and their right to liberty and security (under Article 5).

Values and Principles

The principles which underpin our work with vulnerable adults are based on gospel values and are rooted in respect for the rights and entitlements of vulnerable people as follows:

Access to Information and Knowledge - All vulnerable adults will have access to information that they can understand to make an informed choice. This includes access to expert knowledge and advocacy, as required.

Choice – All vulnerable adults will have the opportunity to select independently from a range of options based on clear and accurate information.

Confidentiality – All vulnerable adults will know that information about them is managed appropriately and there is a clear understanding of confidentiality and its limits amongst Sisters, staff and volunteers.

Consent – All vulnerable adults have the right to be supported to make their own decisions and to give or withhold their consent to an activity or service. Consent is a clear indication of a willingness to participate in an activity or to accept a service. No one can give or withhold consent on behalf of another adult unless special provision has been made for this, usually by law.

Dignity and Respect – All vulnerable adults will be accorded the same respect and dignity as any other adult by recognising their uniqueness and personal needs.

Equality and Diversity - All vulnerable adults will be treated equally and their background and culture will be valued and respected.

Fulfilment – All vulnerable adults will be invited to engage in activities and offered services that enable them to fulfil their ability and potential.

Independence – All vulnerable adults will have as much control as possible over their lives whilst being safeguarded against unreasonable risks.

Privacy – All vulnerable adults will be free from unnecessary intrusion into their affairs and there will be a balance between the individual's own safety and the safety of others.

Safety – All vulnerable adults will feel safe and live without fear of violence, neglect or abuse in any form.

Support – All vulnerable adults will be supported to report any form of abuse and to receive appropriate support following abuse for as long as may be required.

In order to ensure that these principles are embedded in our work, the Provincial Leadership Team will ensure that arrangements are put in place to induct, train and support those who work with vulnerable adults. The training will include knowledge around abuse and exploitation of vulnerable adults and how to work safely, ensuring that any potential risks to both the vulnerable adult and the worker are recognised and managed.

Consent and Capacity

The Sisters of Mercy NP seek to work in the best interests of the vulnerable adult and with his/her consent. Sisters, staff and volunteers should always be mindful of the need for vulnerable adults to consent to, and to be comfortable with, any proposed activity/service. Consent is a clear indication of a willingness to participate in an activity or to accept a service. The vulnerable adult may signal consent verbally, by gesture, by willing participation or in writing. Decisions with more serious consequences will require more formal consideration of consent and appropriate steps should always be taken to ensure that consent is valid.

Sisters, staff and volunteers should always remember that no one can give or withhold consent on behalf of another adult unless special provision for particular purposes has been made for this, usually in law. In certain situations the need for consent may be overridden. This is generally when it is in the public interest to do so, for example the disclosure of information to prevent a crime or risk to health or life.

If you have concerns about consent, doubts about whether consent has been given, or whether it is valid, you should always contact your line manager or Designated Liaison Person, who should seek professional advice where necessary.

Similarly, if you have concerns about a vulnerable adult's ability to give consent, you should report your concerns in line with the procedure outlined in this Policy.

Those who work with vulnerable adults should be aware of the need for consent to be considered in all circumstances, including those relating to taking part in straightforward activities or accepting services offered. Obtaining consent does not mean that a signature on a form is necessary on every occasion. Consent is a process - it results from understanding through dialogue and the provision of information. Consent may be expressly given or, alternatively, it may be signalled by a person's conduct.

As a general rule, the method of obtaining consent is likely to be dictated by the seriousness of what is being proposed. The more serious the proposal and the consequences of agreeing to it, the more pressing the requirement for the vulnerable adult's signature. This would be appropriate, for example, in circumstances where a vulnerable adult is in a residential home and is being asked to agree to transfer to a nursing home where his or her needs will be better served. Such decisions should involve health and social care professionals and possibly a more formal assessment of consent. The important issue is to ensure the consent given is valid.

The consent of a vulnerable adult is considered valid only if:

- s/he has the capacity to consent, that is s/he can understand and weigh up the information needed to make the decision; *and*
- sufficient information has been given to him or her in an appropriate way on which to base the decision; *and*
- consent has been given on a voluntary basis, that is, free from coercion or negative influence.

If any of these three factors is absent, consent cannot be considered valid. It may be possible to intervene in the life of a vulnerable adult who cannot give valid consent but only in very particular circumstances, for very specific purposes and in accordance with laws governing this kind of intervention.

If you have any concerns or doubts about whether the consent of a vulnerable adult is valid, you should bring this to the attention of your Line Manager/ Local Leader or the Designated Liaison Person who should seek professional advice where necessary.

The consent of the vulnerable person should be sought by the Designated Liaison Person prior to reporting any matter to the civil authorities and onto family and/or care service providers. **Individuals have the right to make such choices about reporting: however if a criminal act is suspected, it must be reported to the civil authorities.**

If upon receipt of a concern in a case where it is not clear that a criminal act has taken place (yet the Designated Liaison Person believes that others may be at risk of harm) consultation should take place with the civil authorities as to the best course of action, notwithstanding the fact that the vulnerable adult has not given consent.

If the vulnerable adult is unable to give informed consent, discussion should take place with the carer/guardian/close family about reporting allegations and consultation should take place with relevant medical and social work personnel. A decision may need to be made regarding who can give consent on behalf of the vulnerable adult and consultation may be required with legal advisers and professional staff.

The Designated Liaison Person should not make determinations around capacity to give consent without consulting with appropriate personnel.

Legal Context (Northern Ireland)*

Vulnerable adults are protected in the same way as any other person against criminal acts. If a person commits theft, rape or assault against a vulnerable adult s/he should be dealt with through the criminal justice system in the same way as in cases involving any other victim. Where there is a reasonable suspicion that a criminal offence may have occurred, it is the responsibility of the police to investigate and make a decision about any subsequent action.

Section 5 of the *Criminal Law (Northern Ireland) Act 1967* creates an obligation on citizens to provide the police with any information they may have if they suspect a serious crime has been committed. The police should always be consulted about criminal matters.

The *Safeguarding Vulnerable Groups (NI) Order 2007* establishes new safeguarding arrangements across the UK aimed at strengthening protection for children and vulnerable adults in workplace situations. The new arrangements include the establishment of the *Independent Safeguarding Authority (ISA)* which maintains lists of individuals barred from working with children and vulnerable

adults on the basis of harm or risk of harm. There is a requirement for organisations to make a check against a barred list before offering a position of regulated activity to an employee/volunteer. This check is made through an Enhanced Disclosure Check carried out by Access NI. There is a requirement for employers, professional registration bodies and inspection authorities to refer relevant information to the ISA.

There are a number of pieces of legislation relating to safeguarding and protecting vulnerable adults which can be accessed through www.opsi.gov.uk.

The following list includes examples of relevant legislation:

- *The Criminal Law Act (Northern Ireland) 1967, Section 5*
- *The Health and Personal Social Services (Northern Ireland) Order 2009*
- *The Mental Health (Northern Ireland) Order 1986*
- *The Police and Criminal Evidence (Northern Ireland) Order 1989*
- *The Disability Discrimination Act 1995*
- *The Race Relations (Northern Ireland) Order 1997*
- *The Public Interest Disclosure (Northern Ireland) Order 1998*
- *The Family Homes and Domestic Violence (Northern Ireland) Order 1998*
- *The Northern Ireland Act 1998, Section 75*
- *The Criminal Evidence (Northern Ireland) Order 1999*
- *The Human Rights Act, 1998*
- *The Carers and Direct Payments Act 2002*
- *The Protection of Children and Vulnerable Adults (NI) Order 2003*
- *The Safeguarding Vulnerable Groups, (Northern Ireland), Order 2007*
- *The Sexual Offences, (Northern Ireland), Order 2008*
- *The Protection of Freedoms Act 2012.*

****See Appendix 1: Legal Context***

SECTION 2

Recruitment and Selection Procedure

It is important to have safe recruitment and selection procedures in place to minimise the opportunity for unsuitable people to work or volunteer with vulnerable adults. Within the Province, safeguarding vulnerable adults is a primary consideration in the recruitment, selection and management of personnel.

The recruitment procedure requires that:

- *there is a job description and personnel specification outlining the key skills and abilities required for the post/role*
- *there is an open recruitment process*
- *there is an application form that covers past experience/work/volunteering*
- *there is a declaration form requesting information on previous convictions and investigations, if any*
- *there is an interview process appropriate to the post/role and task*
- *there are written references sought from two people (one of whom must be the last employer) – not relatives
(which are followed up when necessary)*
- *there is a qualification check where appropriate.*
- *there is an identification check*
- *there is a Code of Conduct*
- *an Enhanced Disclosure with a Barred List check from AccessNI or a Garda Vetting check is required**
- *a Declaration of Health Form as appropriate*
- *the post is approved by management.*

It is important that every effort to screen out unsuitable individuals is taken by the Province. The Northern Ireland Executive has made arrangements for individuals who are unsuitable for working in a paid or volunteer capacity with Vulnerable Groups to be barred from such work. The Safeguarding Vulnerable Groups (NI) Order 2007, as amended by the Protection of Freedoms Act 2012, provides the legislative framework for these arrangements, known as Disclosure and Barring Arrangements. Since December 2012 the Disclosure and Barring Service (DBS) has been responsible for maintaining the list of individuals barred from engaging in regulated activity with vulnerable adults. Regulated Activity is activity which barred person must not engage in. A Regulated Activity Provider must refer anyone who has harmed a vulnerable adult, or who poses a risk of harm to a vulnerable adult, to the DBS. It is a criminal offence for a barred person to seek or undertake work from which they are barred, and it is an offence for an organisation to knowingly employ a staff member or volunteer in regulated activity if they are barred. Access NI is a Criminal History Disclosure Service available to statutory, voluntary, community and private organisations.

If the role requires an individual to carry out a regulated activity there is a legal requirement established under the *Safeguarding Vulnerable Groups (NI) Order 2007*, as amended by the *Protection of Freedoms Act 2012*, for the Province to ask the individual to consent to an Access NI Enhanced Disclosure and Barred List check. A check can only be requested on the preferred candidate following a conditional offer of the job/role. Adherence to the above procedures will assist the Province to meet this requirement.

The vetting of Sisters, staff and volunteers is managed through the Administration office, Sisters of Mercy NP, Provincial House, Clogher, Co Tyrone.

Regulated Activity* relating to Adults

The Safeguarding Vulnerable Groups (NI) Order 2007, as amended by the *Protection of Freedoms Act, 2012* defines **regulated activity** with vulnerable adults. The new definition of regulated activity for adults no longer labels adults as “vulnerable”. Instead the definition identifies the activities which, if any adult requires them, lead to that adult being considered as vulnerable at that particular time. This means that the focus is on the activities/service required by the adult and not on the setting in which the activity/service is received, or the personal characteristics or circumstances of the adult receiving the activities. There is no longer a requirement for the staff/volunteer to undertake the activities a certain number of times before they are engaging in regulated activity. Regulated

activity continues to exclude any activity carried out in the course of family relationships and personal, non-commercial relationships.

Each of the following is a regulated activity in relation to vulnerable adults:

- (a) the provision of health care by, or under the direction or supervision of, a health care professional
- (b) the provision of relevant personal care
- (c) the provision of social work by a social care worker to a client
- (d) the provision of assistance in relation to general household matters to an adult who is in need of it by reason of age, illness or disability
- (e) any relevant assistance in the conduct of an adult's own affairs
- (f) conveying adults who need to be transported by reason of age, illness or disability.

These new categories establish the legal requirements for organisations, carrying out regulated activity, to ensure appropriate vetting of personnel and to report to the *DBS* any individual against whom serious allegations have been made.

****See Appendix 2: Regulated Activity***

SECTION 3

Effective Management, Support, Line Management and Training

Effective Management

The Sisters of Mercy, Northern Province recognise that a thorough Induction process is integral to good organisational practice. Induction should take place when personnel take up a new post or role and should include:

- Information on the policies, procedures, guidelines, activities and ethos of the Province
- Expectations and boundaries within which they should operate
- Awareness-raising and training on the recognition, recording and reporting of abuse
- Meeting co-workers, managers and relevant others
- Practical information in relation to breaks, location of facilities, etc.

A timeframe should be set within which induction should be completed. New personnel should be asked to acknowledge in writing that they have completed Induction training and have read and understood the policies, procedures and guidelines, including the Safeguarding Vulnerable Adults Policy. It is good practice to provide a handbook of information to give to new personnel for reference purposes.

A Probationary Period

Appointments should be conditional on the completion of a satisfactory period of probation established at the time of taking up the post or role. A record should be kept of any matters arising and/or any training needs identified. During the probationary period, progress in post/role should be reviewed at regular intervals and any concerns addressed appropriately.

Structure for Line Management and Support appropriate to the Post/Role

Good practice indicates that support and supervision are beneficial in enabling personnel to feel supported in the work which they do and to ensure that they are carrying out their duties to the required standard. Regular meetings between personnel and management provide the opportunity to give and receive feedback on performance and other relevant issues and to assist in the identification of areas for attention/development. Written records of line management, support and training should be retained.

Relevant Training appropriate to the Post/Role

Personnel should receive training appropriate to the nature of their work and the profile of the vulnerable adults concerned. The training should be reviewed and updated in line with changing legislation and practice. It is recommended that updated training is delivered at least every three years.

A good understanding of the nature of vulnerable adult abuse is essential to ensure that personnel remain alert to signs that a vulnerable adult may have been abused. Safeguarding vulnerable adult training should include a basic awareness and understanding of the factors which contribute to vulnerability; the possible signs of vulnerable adult abuse; responding when abuse is disclosed or suspected; recording and reporting procedures; and the meaning of confidentiality in the context of adult safeguarding. Personnel must take concerns around vulnerable adult abuse seriously; deal with information about alleged abuse sensitively; know not to make promises to keep secrets; understand that their role is not to investigate; know how to report concerns and the procedure to follow in relation to reporting to their Line Manager/Designated Liaison Person.

Other relevant training should be provided depending on the profile and needs of the individual vulnerable adults. An example might be training on how to deal with challenging behaviour.

SECTION 4

Recognising, Responding to, Recording and Reporting Concerns about Abuse of Vulnerable Adults

Recognising Abuse

Everyone is entitled to have their civil and human rights upheld and to live a life free from abuse and neglect.

An adult may be vulnerable to abuse because s/he has a mental health problem, a disability, a sensory impairment, is old or frail, or has some form of illness. It may also be because of his or her living circumstances, for example, s/he may live alone, in isolation, or in a residential care home, nursing home or other institutional setting. Sisters, staff and volunteers need to be aware of circumstances that may leave an adult vulnerable to abuse, and be able to recognise the possible signs of abuse. They should be aware of the demeanour and behaviour of vulnerable adults and those around them, and alert to changes that may indicate that something is wrong.

What is Abuse?

Abuse is a violation of an individual's human and civil rights by any other person or persons. Many incidents of abuse are criminal acts. Abuse is defined as:

“The physical, psychological, emotional, financial or sexual maltreatment or neglect of a vulnerable adult by another person. The abuse may be a single act or repeated over a period of time. It may take one form or a multiple of forms. The lack of appropriate action can also be a form of abuse. Abuse can occur in a relationship where there is an expectation of trust, and can be perpetrated by a person/persons in breach of that trust whether they be formal or informal carers, staff, family members or others who have influence over the life of a dependant. It can also occur outside such a relationship”.

Guidance on Abuse of Vulnerable Adults, (DHSS 1996)

Abuse can be either deliberate or the result of ignorance or lack of training, knowledge or understanding. Often if a person is being abused in one way, they are also being abused in other ways. Abuse can take many forms including the following:

Physical Abuse

Including - hitting or slapping, pushing, burning or scalding, suffocating, poisoning, inappropriate use of medication, restraining or disciplining a person in an inappropriate way.

Possible signs - fractures, bruising, burns, pain, marks, not wanting to be touched.

Psychological Abuse

Including - emotional abuse, verbal abuse, humiliation, harassment, intimidation or bullying and threatening or insulting behaviour.

Possible Signs - being withdrawn, too eager to do everything asked, showing compulsive behaviour, not being able to do things they used to, not being able to concentrate or focus.

Financial Abuse

Including - misusing or stealing the person's property, money, possessions or benefits, cheating them, using them for financial gain, controlling or withholding access to money or possessions and putting pressure on an individual in relation to their will, inheritance, property or financial transactions.

Possible signs – having unusual difficulty with finances, not having enough money, being too protective of money and things they own, not paying bills, not having normal home comforts.

Sexual Abuse

Including – direct or indirect sexual activity where the vulnerable adult cannot or does not consent to it, including forcing or enticing an individual to watch something of a pornographic nature.

Possible signs – physical symptoms including genital itching or soreness or having a sexually transmitted disease, using bad language, not wanting to be touched,

behaving in a sexually inappropriate way, changes in appearance.

Neglect or Acts of Omission

Including - withdrawing or not giving the help that a vulnerable adult needs and so causing them to suffer, lack of food/water, lack of ventilation, heat or light, and failure to access appropriate medical care.

Possible signs - having pain or discomfort, being very hungry, thirsty, untidy, failing health, changes in behaviour.

Discriminatory Abuse

Including - the abuse of a person because of their ethnic origin, religion, language, age, sexuality, gender or disability.

Possible signs - the *person* not receiving the care services they require, their carer being overly critical or making insulting remarks about the person, not allowing the person being to dress as they wish.

Institutional Abuse

This can happen when an organisation offering residential care fails to ensure that the necessary processes and systems are in place to safeguard vulnerable adults and maintain good standards of care and service. This might involve lack of training of staff and volunteers, lack of (or poor quality) supervision and management, poor record keeping and liaison with other agencies, low staff morale and high staff turnover, inappropriate use of rules, custom and practice.

Possible signs – vulnerable adult has no personal clothing or possessions; there is no care plan for him/her; s/he has frequent admissions to hospital; there are instances of poor or unsatisfactory treatment or treatment that causes harm, by personnel; there is poor staff morale, high staff turnover and lack of clear lines of accountability and consistency of management.

Sometimes there may be concerns about a vulnerable adult's well-being which are not dealt with under vulnerable adult protection

procedures. Where such concerns arise, they should be reported to the local Health and Social Care Trust (HSCT) as the person concerned may benefit from assessment and intervention. (Relevant contact numbers for each of the HSC Trusts can be accessed through www.hscni.net). A record of a referral of this nature to a HSC Trust should be maintained.

Domestic/Familial Abuse

The abuse of a vulnerable adult by a family member such as a partner, son, daughter, sibling.

Professional Abuse

The misuse of power and abuse of trust by professionals, the failure of professionals to act on suspected abuse/crimes, poor care practice or neglect in services, resource shortfalls or service pressures that lead to service failure and culpability as a result of poor management systems. Possible signs of professional abuse include: entering into inappropriate relationships with a vulnerable adult; failure to refer disclosure of abuse; poor, ill-informed or outmoded care practice; failure to support a vulnerable adult to access health care/treatment; denying a vulnerable adult access to professional support and services such as advocacy; inappropriate responses to challenging behaviours; failure to whistleblow on issues when internal procedures to highlight such issues are exhausted.

Peer Abuse

The abuse of one vulnerable adult by another vulnerable adult within a care setting. It can occur in group or communal settings such as day care centres, clubs, residential care homes, nursing homes or other institutional settings.

Stranger Abuse

A vulnerable adult may be abused by someone whom they do not know, such as a stranger, a member of the public or a person who deliberately targets vulnerable people.

The Sisters of Mercy, Northern Province have procedures in place for dealing with concerns raised by Sisters, staff, volunteers and vulnerable adults, and for reporting those concerns to the local HSC Trust or PSNI where appropriate. It is preferable that established forms are used for reporting purposes.

Where might abuse occur?

Abuse can happen anywhere:

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

Who might Abuse?

An abuser can be anyone who has contact with the vulnerable person - it could be a partner, spouse, child, relative, friend, informal carer, a health/social care worker, another worker, a peer or, less commonly, it may be a stranger.

Responding to Abuse and Recording & Reporting* Concerns, Suspicions or Allegations of Abuse of Vulnerable Adults

When there are concerns, or where a disclosure or allegation is made, people often feel anxious about passing on the information to anyone else. Concerned individuals may ask themselves "What if I'm wrong?" and this may hold them back from taking action. It is important for Sisters, staff and volunteers to know that they are not responsible for deciding whether or not abuse has occurred nor are they responsible for conducting an investigation (which is the role of the appropriate authorities). However they do need to pass on any concerns they have through the reporting procedures of the Province.*

How can you be alerted to signs of Abuse or Neglect?

There are a variety of ways in which you could come to know that a vulnerable adult is suffering harm:

- A vulnerable adult may disclose to you
- Someone else may tell you of their concerns or something that causes you concern
- A vulnerable adult may show some signs of physical injury for which there does not appear to be a satisfactory or credible explanation

- A vulnerable adult's demeanour/behaviour may lead you to suspect abuse or neglect
- The behaviour of a person close to the vulnerable adult makes you feel uncomfortable. (This may include another staff member, volunteer, peer or family member).
- Through general good neighbourliness and social guardianship.

Being alert to potential abuse plays a major role in ensuring that vulnerable adults are safeguarded and it is important that all concerns about possible abuse are reported.

What if a Vulnerable Adult Discloses Abuse?

In situations where a vulnerable adult discloses abuse, it is important that Sisters, staff and volunteers respond appropriately and in accordance with the following guidelines:

DO

- Stay Calm
- Listen and hear
- Express concern and sympathy about what has happened
- Reassure the person – tell him/her that they did the right thing in telling you
- Let the person know that the information will be taken seriously and give information about what will happen next
- If urgent medical/police help is required, call the emergency services
- Ensure the safety of the person
- Be aware that medical and forensic evidence might be needed
- Let the person know that they will be kept involved at every stage
- Record in writing, date and sign and report to the Line Manager/ Designated Liaison Person
- Act without delay.

Do Not

- Stop someone disclosing to you
- Promise to keep secrets
- Press the person for more details or make them repeat the story
- Gossip about the disclosure or pass any information about this to anyone who does not have a legitimate need to know
- Contact the alleged abuser

- Attempt to investigate yourself
- Leave details of your concern on a voice mail or by email
- Delay.

Checking Out

There may need to be some initial checking out with the vulnerable adult who has disclosed information to you in order to ensure his/her safety. For example if a Sister, staff member or volunteer notices a bruise on a vulnerable adult's arm it would be appropriate to ask "I see you have a bruise on your arm. How did that happen?" **Sisters, staff and volunteers should not begin to investigate alleged or suspected abuse** by asking questions that relate to the detail or circumstances of the alleged abuse beyond initial checking for factual accuracy, listening, and expressing concern.

The Role of the Designated Liaison Person

The Sisters of Mercy NP have a Designated Liaison Person (DLP) and a Deputy Designated Liaison Person who are responsible for managing all concerns, allegations and complaints of actual or suspected abuse in relation to children and/or vulnerable adults. In addition the DLPs will provide information and support to personnel in relation to safeguarding issues.

When the DLP receives a concern about harm/abuse of a vulnerable adult, s/he will act promptly and in accordance with agreed procedures. S/he will inform the Provincial Leader and without delay will:

- ensure that the vulnerable adult is not in imminent danger and that any medical or police assistance required has been obtained
- determine whether or not the concern is of a safeguarding nature. This may involve some verifying of the information provided, being careful not to stray into the realm of investigation. Obtain the consent of the vulnerable adult if the harm involved is not a criminal act.

If it is considered not to be a safeguarding issue there is therefore no requirement to refer to a statutory authority. A confidential record will be kept of the concern raised, the action taken and the reasons for not referring to the civil authorities.

The threshold for reporting should be based on an assessment that there are reasonable grounds for concern, for example:

- A specific indication from the vulnerable adult that he/she was harmed or abused
- An account by a person who saw the vulnerable adult being abused
- Evidence, such as an injury or behaviour consistent with abuse, which is unlikely to be caused in any other way
- An injury which is consistent both with abuse and an innocent explanation but where there are corroborative indicators supporting the concern that it may be a case of abuse - for example a pattern of injuries, an implausible explanation or other indications of abuse such as dysfunctional behaviour
- Consistent indication over a period of time that the vulnerable adult is suffering from emotional or physical neglect.

The Sisters of Mercy recognise that the welfare of the vulnerable adult is the paramount concern. It is also recognised that hasty or ill-informed decisions can irreparably damage an individual's reputation, confidence and career. Therefore those dealing with such allegations will do so sensitively and will act in a careful and measured way.

- Where there is doubt or uncertainty the Designated Liaison Person will consult the Designated Officer in the local Health and Social Care Trust
- Where a discussion has taken place and it is decided that a referral should not be made to the local HSC Trust, this will be recorded and the file will be stored securely. This is important in case concerns are raised in the future which, when taken together, indicate that a vulnerable adult is being harmed and protective action is required
- In situations where the Trust considers the concern to be of a safeguarding nature then a formal written referral will be made by the Designated Liaison Person
- The Designated Liaison Person will be available as required to assist the investigation undertaken by the Trust and/or PSNI (with input from RQIA if needed).

If a referral is made to the HSC Trust, the minimum information required will include:

- The name and address of the vulnerable adult and his /her current location
- An indication of whether or not the vulnerable adult is aware of/has agreed to the referral

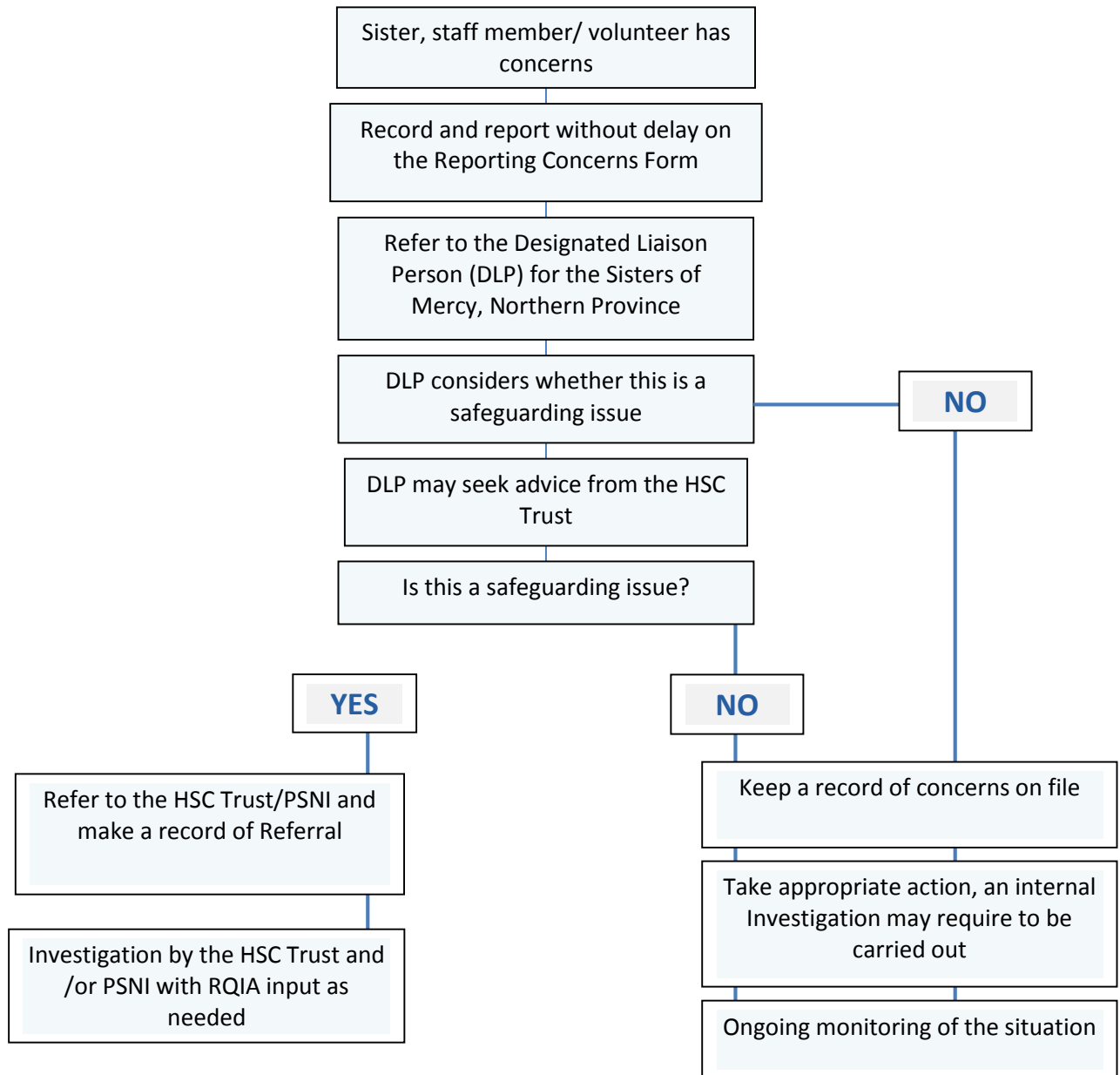
- The nature of the harm
- The need for medical attention (if any)
- The reasons for suspicions of abuse
- Any action already taken
- Any other information that may be useful to an investigation - for example, information related to an alleged perpetrator and his/her location.

The referral should be made to the HSC Trust, Designated Safeguarding Officer**. Contact may be made by telephone initially but the referral will be confirmed in writing as soon as possible. Outside normal office hours the referral should be passed to the Out-of-Hours Social Work Service and followed up in writing to the HSC Trust, Designated Safeguarding Officer.

The first priority should always be to ensure the immediate safety and protection of the vulnerable adult. The HSC Trust, Designated Safeguarding Officer will liaise with the PSNI to determine whether a crime has been committed.

Reporting Procedure if you have a Concern about Abuse or Neglect of a Vulnerable Adult

PROCEDURE



Concerns about general welfare that are not linked to safeguarding may be referred to the HSC Trust in the usual way

****See Appendix 3: Sisters of Mercy NP Form for Recording and Reporting Signs of Abuse of Vulnerable Adults***

*****See Appendix 4: Contact Details for Safeguarding in the Northern Province***

SECTION 5

Procedure for Managing Allegations or Concerns of Abuse of Vulnerable Adults against a Sister, Staff Member or Volunteer

An allegation against a Sister, staff member or volunteer is one of the most difficult situations to deal with. The response from the Sisters of Mercy NP must be consistent at all times, regardless of relationships. When responding to an allegation made against a Sister, staff member or volunteer the Congregation has a dual responsibility: firstly to the vulnerable adult and secondly to the Sister, staff member or volunteer in question.

- Initially details of the incident will be recorded by the Designated Liaison Person (DLP) who will inform the Provincial Leader
- The DLP will establish if the concern relates to a safeguarding issue/whether there are reasonable grounds for concern and whether to report the concerns directly to the relevant civil authorities
- The DLP will take whatever steps are necessary to ensure the safety of the alleged victim, and all parties, and to prevent risk of further potential harm/abuse
- The DLP will consult with the civil authorities to ensure that any subsequent action does not prejudice their investigation. In all cases, the civil investigation precedes any action which will be undertaken by the Province
- Following consultation, and if agreed with the civil authorities, the Sister, staff member/volunteer will be informed that an allegation has been made against him/her. The Designated Liaison Person will refer to the relevant person in the HSC Trust who will decide the most appropriate way forward. It may be necessary to take protective measures which may include suspending the staff member/volunteer or moving him/her to alternative duties. Suspension is a neutral act to allow the investigation to proceed and to remove the employee/volunteer from the possibility of any further allegation. Where

suspension is considered necessary it should be managed as sensitively as possible.

- Where the concerns or allegations relate to possible abuse by a staff member or volunteer, only those internal disciplinary procedures which do not compromise any investigations being conducted by the statutory authorities should commence. Once the statutory investigation has concluded, the case will be reviewed internally and all actions taken in respect of a staff member or volunteer will be in accordance with the Disciplinary Policy of the Province.
- If the concerns or allegations relate to a Sister of Mercy, the Provincial Leader will give consideration to asking the Sister to stand aside from ministry to allow the investigation to proceed. The same process will be followed as set out in the Congregation of the *Sisters of Mercy Safeguarding Children Information: Policy Principles and Guidance Document*. On conclusion of the investigation by the statutory authorities, the Provincial Leader will review the case in accordance with Canon Law.
- A written record of meetings and consultations will be compiled by the DLP and a confidential case file will be opened and stored securely in Provincial House.

Outcomes

As a result of the investigation the allegation may or may not be substantiated. There are four possible outcomes:

Allegation of harm/risk of harm substantiated – individual removed from regulated activity

The investigation finds that the allegation of harm/risk of harm is substantiated and the individual is removed from regulated activity. In these circumstances, the Sisters of Mercy are under a statutory duty to refer to the *Independent Safeguarding Authority, (ISA)*, under the *Safeguarding Vulnerable Groups, (Northern Ireland) Order 2007*. It should be at the point when a determination of harm/risk of harm and a decision to remove the individual from regulated activity is made that the duty to refer to the ISA is triggered. If the individual retires or resigns, the investigation should be concluded and a referral should be made to ISA if the investigation concludes that harm/risk of harm to a vulnerable adult has occurred.

Allegation of harm/risk of harm substantiated – individual reinstated to regulated activity

The investigation finds that the allegation is substantiated but the circumstances of the case are such that the individual can be reinstated to the post/role subject to appropriate disciplinary sanctions, training/retraining being undertaken and support or supervision arrangements being put in place. The relevant professional body may need to be informed. Despite the finding that harm/risk of harm has occurred, the decision to return the individual to the post means that a referral to ISA is not required.

Allegation of harm/risk of harm unsubstantiated – ongoing concerns

The investigation finds that the allegation is unsubstantiated, that is, that the individual has not harmed (or placed at risk of harm) a vulnerable adult. However there are ongoing concerns about the conduct of an individual. The Congregation may conclude that the person can be reinstated with additional support, supervision and training. The relevant Professional Regulatory body may also need to be informed.

Allegation of harm/risk of harm unsubstantiated – no ongoing concerns

The investigation finds that the allegation is unsubstantiated, that is, the individual has not harmed (or placed at risk of harm) a vulnerable adult. The individual may be reinstated and provided with support as appropriate.

Anonymous allegations

Enquiries will be made into anonymous allegations. However they may not progress into a formal investigation unless there is supporting evidence. A record will be retained of the allegation made and the subsequent enquiries carried out.

Mandatory Reporting

It is a legal requirement* throughout the Island of Ireland for any person who knows or believes that a serious offence has been committed, including an offence relating to Rape, Sexual Assault and False Imprisonment to report such information to the police authorities.

Whistleblowing Policy**

Whistleblowing occurs when a Sister, staff member or volunteer raises a concern about misconduct or illegal or underhand practices by individuals and/or an organisation. The concern may be about the way care and support is being provided, such as practices that cause harm or the risk of harm to others or where there is abusive, discriminatory or exploitative behaviour towards vulnerable people.

The Sisters of Mercy, Northern Province have a Whistleblowing Policy which makes clear that:

- the Province takes poor practice or malpractice seriously
- Sisters, staff and volunteers have the option to raise concerns outside of the line management structure
- the Province will, where possible, respect the confidentiality of the individual raising the concern
- it is a serious matter to victimise a genuine whistleblower**: it is also a serious matter for someone to maliciously make a false allegation.

****NI Legislation***

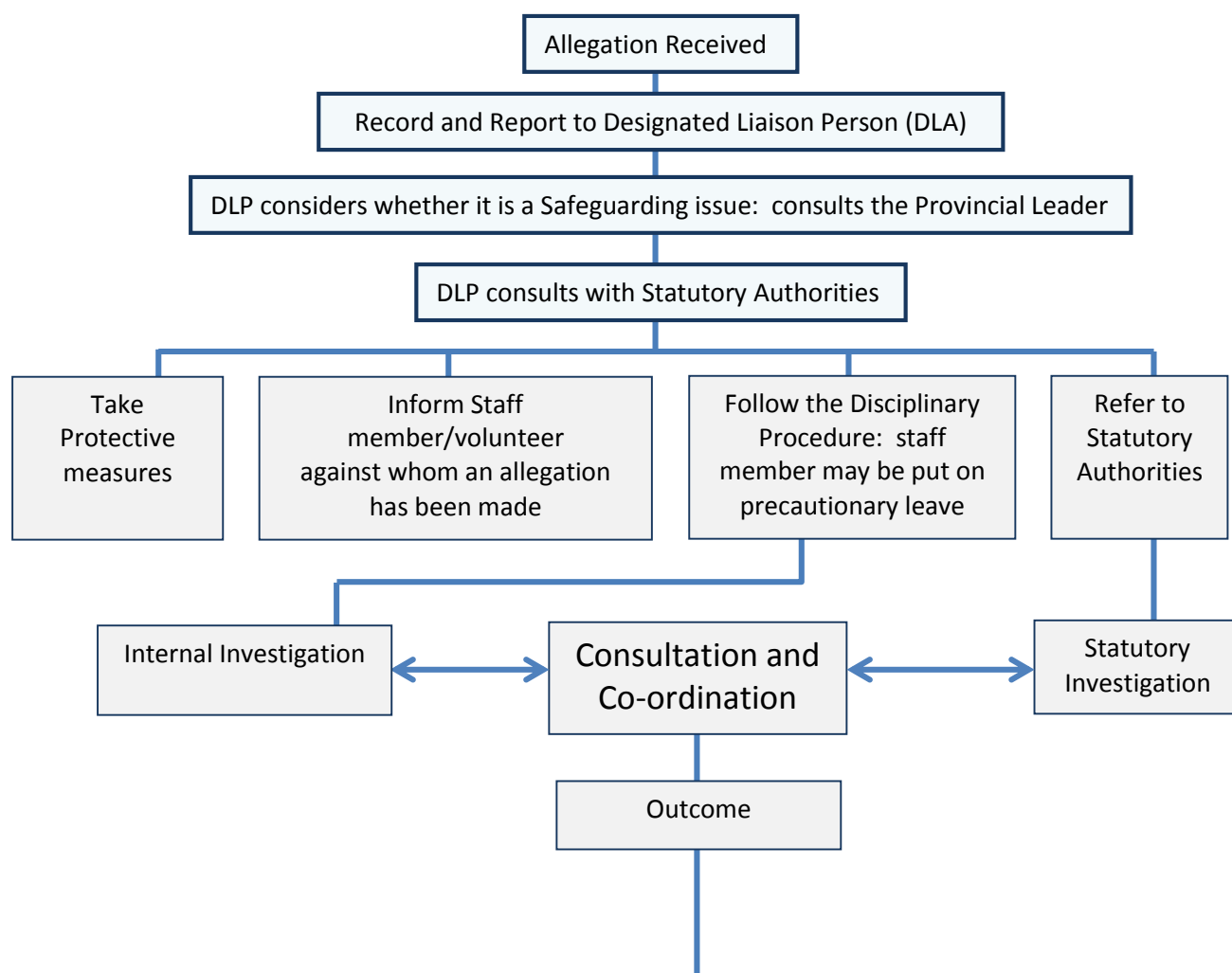
Section 5 of the Criminal Law (Northern Ireland) 1967 Act

****Republic of Ireland Legislation***

Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012

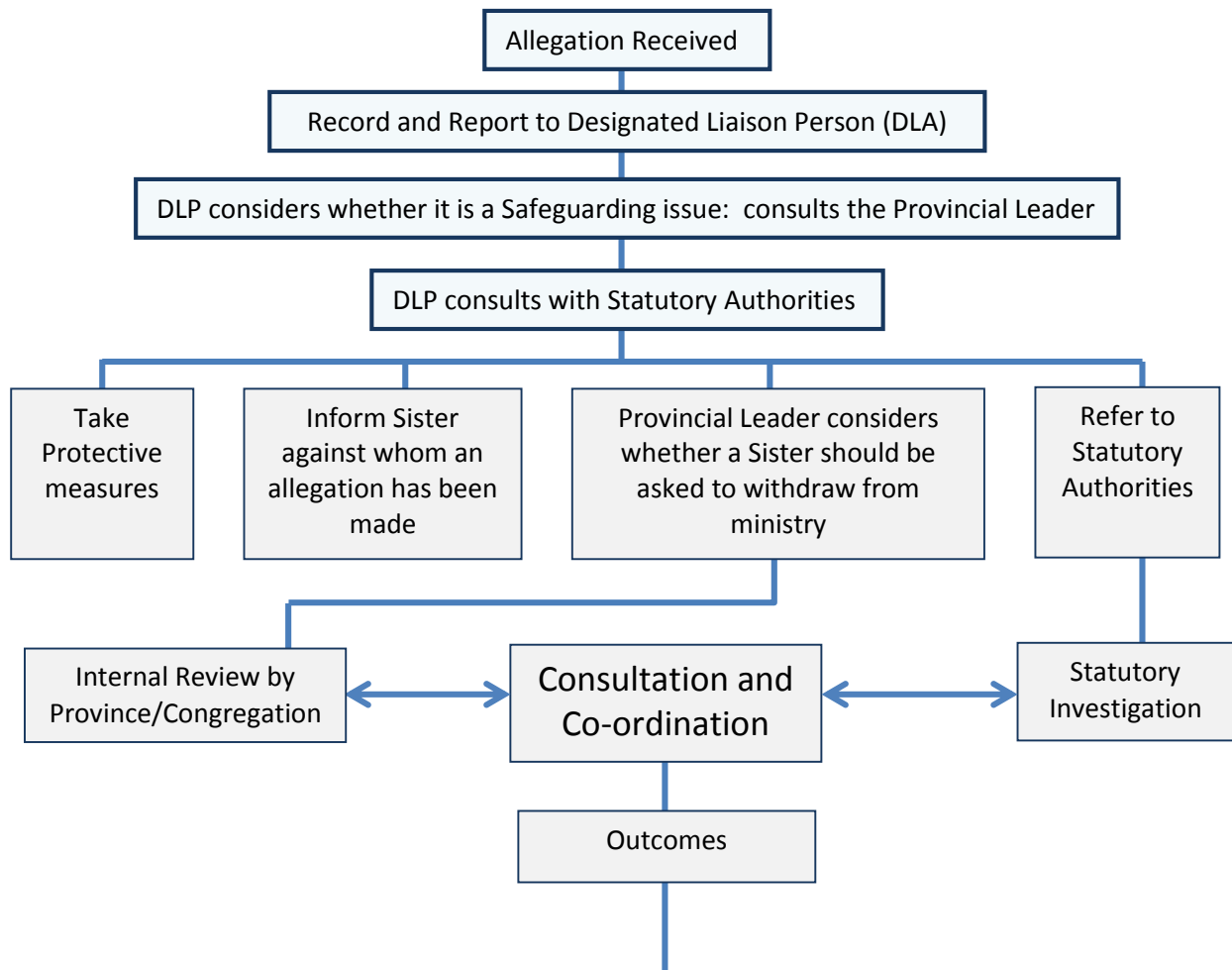
*****See Appendix 5: Whistleblowing Policy***

Handling An Allegation, Suspicion Or Concern Of Abuse Of A Vulnerable Adult Against A Staff Member/Volunteer



1 or	Allegation of harm/risk of harm substantiated – individual removed from regulated activity	Refer the individual to the ISA and if relevant, inform appropriate professional body
2 or	Allegation of harm/risk of harm substantiated – individual removed from regulated activity	Appropriate disciplinary sanction should be applied, training/retraining undertaken, appropriate support and supervision provided. If relevant, inform appropriate professional body
3 or	Allegation of harm/risk of harm unsubstantiated – ongoing concerns, eg practice concerns	Staff member should be offered additional support, training/re-training and supervision if necessary. If relevant, inform appropriate professional body
4	Allegation of harm/risk of harm unsubstantiated – no ongoing concerns	Staff member should be offered additional support, training/re-training and supervision if necessary

Handling An Allegation, Suspicion Or Concern Of Abuse Of A Vulnerable Adult Against A Sister



1 <u>or</u>	Allegation of harm/risk substantiated – individual removed from ministry	Refer the individual to the Independent Safeguarding Authority, (ISA). If relevant, inform the appropriate professional body. Provincial Leader should review the case in accordance with canonical and legal advice.
2 <u>or</u>	Allegation of harm/risk substantiated – individual reinstated to ministry with restrictions.	Appropriate disciplinary sanction should be applied, training/retraining undertaken, support and supervision provided. If appropriate, inform relevant professional body. Provincial Leader should obtain canonical and legal advice.
3 <u>or</u>	Allegation of harm/risk unsubstantiated – individual reinstated to ministry but ongoing concern for example practice issues.	Sister should be offered support, training/retraining and supervision if necessary. If appropriate inform relevant professional body
4	Allegation of harm/risk unsubstantiated – no ongoing concerns.	Sister reinstated to ministry

SECTION 6

Assessing and Managing Risks with regard to Safeguarding Vulnerable Adults

Assessment of risk is the process of examining what could possibly cause harm to vulnerable adults, Sisters, staff, volunteers or others in the context of the ministries and services which are provided within the Province and the interactions with the wider community. In safeguarding terms, the aim of risk assessment and management is to prevent harm occurring.

The primary aim of the Safeguarding Policy of the Sisters of Mercy NP is to manage the risk of abuse to vulnerable adults by establishing a culture in which the rights of vulnerable adults are fully respected, and by putting in place a range of procedures which promote a culture of zero tolerance of abuse regardless of where it occurs or who causes it.

The Sisters of Mercy NP's Safeguarding Vulnerable Adults Policy has the potential to reduce the likelihood and impact of abuse by:

- Implementing safe recruitment and selection procedures to prevent unsuitable people from joining the Province
- Making Sisters, staff and volunteers aware of indicators of vulnerability and risk and the possible signs of abuse, and by equipping them to respond quickly to concerns about actual, alleged or suspected abuse
- Ensuring that Sisters, staff and volunteers are properly inducted, trained, supported and supervised in their work with vulnerable adults
- Ensuring that Sisters, staff and volunteers are trained to recognise acceptable behaviours and good practice and know the procedures for challenging poor practice
- Promoting a culture of inclusion, transparency and openness throughout the Province and within the ministries/services/activities provided

- Making Sisters, staff and volunteers aware of how information about vulnerable adults should be handled
- Having in place effective management processes and practices supported by policies and procedures.

It is important that risks and risk-reducing measures are recorded and kept under review. Some degree of risk-taking is an essential part of fostering independence. In a culture of positive risk taking, risk assessment should involve everyone affected, including vulnerable adults, Sisters, staff, carers and volunteers. Accidents, incidents and near misses, particularly where these recur, may be indicators of organisational risks including a risk to safeguarding which needs to be managed. It is important that accidents, incidents or near misses which involve vulnerable adults are reported to the Local Leader or her Deputy who will determine how the matter should be taken forward.

SECTION 7

Complaints Procedure

The Sisters of Mercy NP are open to receiving feedback from vulnerable adults, carers, advocates, Sisters, staff and volunteers with a view to improving the way in which activities and ministries are provided. Where carers, vulnerable adults or others have a complaint about how a concern of a safeguarding nature has been dealt with by the Province, they have access to the *Safeguarding -Complaints Handling Policy**, Sisters of Mercy, Northern Province.

The Policy sets out the procedure which will be followed to ensure that their complaint is dealt with in an effective, timely and fair manner.

Records of meetings and the information shared at each stage of the procedure will be kept confidential and stored securely in the Provincial House, Clogher, Co Tyrone.

****See Appendix 6: Sisters of Mercy, Northern Province: Safeguarding Complaints Handling Policy***

SECTION 8

Management of Records, Confidentiality and Sharing of Information

Confidentiality

Sisters, staff and volunteers should treat Information or concerns/allegations or suspicions relating to vulnerable adult as confidential and share on a “need to know” basis only.

Information of a confidential nature should only be communicated on a need-to-know basis and, in most circumstances, with the consent of the vulnerable adult. All parties should be informed that they are entitled to seek legal advice and professional support.

The DHSSPS Code of Practice on *Protecting the Confidentiality of the Service User Information (2009)*, states “the obligation to protect confidentiality can be expressed in terms of three core ethical principles which underpin the law”:

- Individuals have a fundamental right to the confidentiality and privacy of information related to their health and social care
- Individuals have a right to control access to, and the disclosure of, their own health and social care information by giving, withholding, and withdrawing consent
- For any disclosure of confidential information, health and social care staff should have regard to its necessity, proportionality and any risks attached to it.

However Sisters, staff and volunteers should be clear that in circumstances where they have concerns about an individual’s safety and welfare, or the safety of others, they should pass on information which they may have been told in confidence.

All records relating to issues, concerns or allegations of a safeguarding nature will be maintained and stored securely by the Designated Liaison Person in the Safeguarding Office, Provincial House, Clogher, Co Tyrone.

SECTION 9

Code of Behaviour

The Sisters of Mercy, staff and volunteers encounter vulnerable adults in a range of situations and locations. The Mercy Code of Behaviour sets out the expectation that Sisters, staff, volunteers and everyone who uses its services, participates in its activities or visits its premises should relate to each other in a mutually respectful way.

The effective implementation of this Policy requires the commitment of all to the Mercy Code of Behaviour.

The Code of Behaviour requires all to:

- treat vulnerable adults with dignity and respect
- be patient and listen
- value vulnerable adults as individuals and adopt a person-centred approach
- treat all vulnerable adults fairly and equally
- strive to establish and maintain the trust and confidence of vulnerable adults
- encourage vulnerable adults to participate and fulfil their ability and potential
- promote the independence and choice of vulnerable adults while protecting them as far as possible from danger and harm
- respect the rights of vulnerable adults while seeking to ensure that their behaviour does not harm themselves or other people
- be accountable for the quality of their work, taking responsibility for maintaining knowledge and skills.

Sisters, staff and volunteers should:

- ensure that physical contact is person-centred and appropriate to the task required
- understand and implement a vulnerable adult's care plan where required to do so
- provide personal care sensitively and with respect for the individual's dignity and privacy

- seek to defuse a situation, thereby avoiding the need to use any form of restriction
- only use restriction where it is absolutely necessary to protect the vulnerable adult or others from harm
- be open to and aware of diversity in the beliefs and practices of vulnerable adults and their families
- ask how a vulnerable adult's care should be delivered having regard to the cultural needs of others
- be aware of the difficulties posed by language barriers and other communication difficulties
- not discriminate against vulnerable adults who have different cultural backgrounds and beliefs
- use the procedures in this Policy to report any discrimination against vulnerable adults and their families by others
- report any concerns to their Line Manager/Designated Liaison Person
- maintain records of vulnerable adult's personal allowances, receipts and expenditure as appropriate
- never gain when using the vulnerable adult's money on his/her behalf
- never borrow money from, or lend money to, a vulnerable adult
- report suspicions of financial abuse
- report any inappropriate use of images of a vulnerable adult
- report any inappropriate or dangerous behaviour on the internet that involves a vulnerable adult
- encourage vulnerable adults to tell someone if they encounter anything that makes them feel unsafe or threatened.

Unacceptable behaviours are those that should be avoided in the interests of the safety of vulnerable adults.

Sisters, staff or volunteers should avoid:

- spending excessive amounts of time alone and away from others with vulnerable adults
- taking a vulnerable adult to his/her home
- taking a vulnerable adult alone on a car journey unless this forms part of their core activities.

Sisters, staff member or volunteers should never:

- abuse, neglect, harm or place at risk of harm, vulnerable adults whether by omission or commission

- make inappropriate comments/jokes about, or to, a vulnerable adult
- engage in rough physical games (including horseplay) with vulnerable adults
- engage in sexually provocative games or make sexually suggestive comments to vulnerable adults
- form inappropriate relationships with vulnerable adults
- gossip about personal details of vulnerable adults and their families
- photograph/video a vulnerable, adult even by mobile phone, without the vulnerable adult's valid consent.

Breaching the Code of Behaviour is a serious issue which will be investigated and may result in disciplinary action, and ultimately dismissal, if it constitutes harm/risk of harm, referral to the HSC Trust, PSNI, ISA and the regulatory bodies, as appropriate.

APPENDICES

Appendix 1:	Legal Context.....	53
Appendix 2:	Regulated Activity.....	59
Appendix 3:	Vulnerable Adult Form for Recording and Reporting Concerns or Allegations of Abuse.....	63
Appendix 4:	Contact Details for Safeguarding in the Northern Province.....	67
Appendix 5:	Whistleblowing Policy.....	69
Appendix 6:	Safeguarding Complaints Handling Policy.....	75

Appendix 1: Legal Context

There are a number of pieces of legislation relating to safeguarding and protecting vulnerable adults in Northern Ireland.

The Criminal Law Act (Northern Ireland) 1967

Section 5 of the Criminal Law Act, (Northern Ireland) 1967 creates an obligation on citizens to provide the police with any information they may have if they suspect a serious crime has been committed. In particular, anyone who knows or believes that a relevant offence* has been committed, and has information which is likely to help to secure the arrest, prosecution or conviction of a suspect, is under a duty to give that information to the police within a reasonable period.

Anyone who fails, without reasonable excuse, to provide information in those circumstances commits an offence under section 5 of the 1967 Act. The maximum custodial punishment for this offence depends on the seriousness of the offence that should have been reported, but the maxima lie between 3 and 10 years.

The Health and Personal Social Services (Northern Ireland) Orders and the Health and Social Care Reform Act (Northern Ireland) 2009

These are the key pieces of legislation governing the provision of health and social care in Northern Ireland. The legislation imposes a number of duties, including a general duty to promote an integrated system of health and social care designed to secure improvement in the physical and mental health and social well-being of people in Northern Ireland.

The Mental Health (Northern Ireland) Order 1986

The Mental Health (NI) Order covers the assessment, treatment and rights of people with a 'mental disorder' defined in the Order as 'mental illness, mental handicap and any other disorder or disability of mind'. Learning disability has replaced the term mental handicap. The Order sets out the criteria and process whereby a person may be compulsorily admitted to hospital and treated without his or her consent.

The 1986 Order sets out offences in relation to the ill treatment of wilful neglect by staff of a patient who is receiving in-patient or out-patient care in a hospital, private hospital or nursing home.

Article 107 of the Mental Health Order places a duty on a Health and Social Care Trust to notify the Office of Care and Protection if it is satisfied that any person within its area is incapable, by reason of mental disorder, of managing and administering his or her property and affairs.

The Police and Criminal Evidence (Northern Ireland) Order 1989

Codes of Practice issued under the Police and Criminal Evidence (Northern Ireland) Order 1989 state that a person of any age, suspected of being mentally disordered or otherwise mentally vulnerable and detained by police, must have the support of an appropriate adult. The appropriate adult can be a parent, relative or guardian or someone experienced in dealing with mentally disordered or mentally vulnerable people. The role of the Appropriate Adult is to make sure an individual is supported and that they understand the process during their period in police detention.

The Disability Discrimination Act 1995

The Disability Discrimination Act 1995 introduces new laws and measures aimed at ending the discrimination faced by many disabled people in the fields of employment; access to goods, facilities and services; and the management, buying and renting of property. The discrimination occurs when, for a reason related to an individual's disability, they are treated less favourably than other people to whom the reason does not apply, and this treatment cannot be justified.

The Race Relations (Northern Ireland) Order 1997

The Race Relations (NI) Order 1997 outlaws discrimination on the grounds of colour, race, ethnic or national origin. The Irish Traveller is specifically identified in the Order as a racial group against which racial discrimination is unlawful. The Race Relations Order makes direct racial discrimination, indirect racial discrimination, and victimisation unlawful in the fields of employment; access to goods, facilities and services; education; and housing management and disposal of premises.

The Public Interest Disclosure (Northern Ireland) Order 1998

The Public Interest Disclosure (Northern Ireland) Order 1998 protects most workers who 'whistleblow' about wrongdoing in their place of work from suffering detriment from their employer for doing so. Detriment may take the form of denial of promotion or training or dismissal as a consequence of whistleblowing. The Order sets out a list of situations, which if an employee discloses, should not result in detriment to them. Such situations would include criminal offences, or where there is a danger to the health and safety of individuals.

The Family Homes and Domestic Violence (Northern Ireland) Order 1998

Domestic violence includes threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional), occurring between adults who are or have been intimate partners or family members. Under this legislation a Non-Molestation Order can be issued to prevent the perpetrator from threatening or using violence against the victim. A perpetrator can be forced to leave and stay away from a property by an Occupation Order so as to protect a victim.

The Northern Ireland Act 1998, Section 75

Section 75 of the Northern Ireland Act requires public authorities to comply with two statutory duties. The first duty is the Equality of Opportunity duty, which requires public authorities to have due regard to the need to promote equality of opportunity between the nine equality categories of persons of different religious belief, political opinion, racial group, age, marital status, or sexual orientation; men and women generally; persons with a disability and persons without and persons with dependants and persons without.

The second duty, the Good Relations duty, requires that public authorities in carrying out their functions have regard to the desirability of promoting good relations between persons of different religious belief, political opinion and racial group.

The Criminal Evidence (Northern Ireland) Order 1999

The Criminal Evidence (NI) Order 1999 introduced a range of special measures to assist vulnerable and intimidated witnesses to give their best evidence in criminal proceedings. This includes giving evidence by live link.

The Human Rights Act 1998 – enacted 2000

The Human Rights Act 1998 came into effect in 2000 and makes the European Convention on Human Rights part of the law of Northern Ireland. It allows individuals and organisations to go to court or tribunal to seek redress if they believe that the rights conferred on them by the European Convention have been violated by a public authority. Section 145 of the Health and Social Care Act 2008 extended the coverage of the Human Rights Act to residents in residential care and nursing homes where their care has been contracted for by the HSC Trusts. There are 16 basic rights in the Human Rights Act. The following have particular relevance to safeguarding and protecting vulnerable adults.

Article 2 - Right to Life. Everyone's right to life will be protected by law.

Article 3 - Prohibition of Torture. No one will be subjected to torture or to inhuman or degrading treatment or punishment.

Article 4 - Prohibition of Slavery and Forced Labour. Everyone has an absolute right not to be held in slavery or servitude or to be required to perform forced or compulsory labour.

Article 5 - Right to Liberty and Security. No one should have their freedom of movement restricted without good reason. In terms of safeguarding vulnerable adults, this has implications for actions such as seclusion, restraint, 'locked door' policies and use of medication.

Article 6 - Right to a Fair Trial. Everyone has the right to liberty and security of person. This is relevant in terms of equality of access to justice for vulnerable adults.

Article 8 - Respect for Private and Family Life. Everyone has a right to a private and family life without interference, except in accordance with the law.

First Protocol - Article 1 Protection of Property: A person has the right to the peaceful enjoyment of their possessions. In the vulnerable adult context this has implications for the prevention of financial abuse.

First Protocol - Article 2 Right to Education: No person will be denied the right to an education. Vulnerable adults therefore have the same right to education as everyone else.

The Health and Personal Social Services Act (Northern Ireland) 2001

The Health and Personal Social Services Act (N.I.) 2001 established the Northern Ireland Social care Council to regulate the social work profession and other social care workers.

The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003

The Health and Personal Social Services (Quality, Improvement and Regulation (NI) Order 2003 established the Regulation and Quality Improvement Authority (RQIA) an independent body, with overall responsibility for monitoring, regulating and reporting on the quality of health and social care services delivered in Northern Ireland.

The Safeguarding Vulnerable Groups (Northern Ireland) Order 2007 & The Protection of Freedoms Act 2012

The Safeguarding Vulnerable Groups (NI) Order 2007, as amended by the Protection of Freedoms Act 2012, defines regulated activity with children and adults. Regulated activity is work which a Barred person must not undertake. It is a criminal offence for a Barred person to seek or undertake work from which they are Barred and it is an offence for organisations to knowingly employ a staff member or involve a volunteer in regulated activity if they are Barred. There is a requirement for organisations to make a check against the barred list(s) before offering a position of regulated activity to an employee/volunteer. This check is made through an Enhanced Disclosure Check carried out by Access NI. There is an obligation placed upon employers to refer relevant information to the Disclosure and Barring Service.

The Forced Marriage (Civil Protection) Act 2007

The Forced Marriage (Civil Protection) Act 2007 seeks to assist victims of forced marriage or those threatened with forced marriage. A person threatened with forced marriage can apply to the court for a Forced Marriage Protection Order. Protection measures may include confiscation of passports or restrictions on contact with the victim.

The Sexual Offences (Northern Ireland) Order 2008

The Sexual Offences (NI) Order 2008 provides a new legislative framework for sexual offences, including offences against people with a mental disorder.

Articles 43–46 relate to offences against people who are unable to legally consent to sexual activity because of a mental disorder. Articles 47–50 provide added protection for those who have capacity to consent but might be vulnerable to exploitation through inducement, threats or deception. Articles 51–57 contain new offences for people who are engaged in providing care, assistance or services to vulnerable adults. Under the Order any sexual activity between a health care worker and a person with a mental disorder is prohibited whilst that relationship of care continues, whether or not the victim appears to consent and whether or not they have the legal capacity to consent.

The Carers and Direct Payments Act (NI) 2002

The Act places a requirement on Health and Social Care Trusts to make sure that carers know about their right to a carer's assessment of their needs and the provision of services to support them in their caring role. The Act allows Trusts to make direct payments in lieu of the provision of personal social services directly to carers and or to individuals with disabilities.

Data Protection Act 1998

The Data Protection Act regulates the collection, processing and storage of personal information, either electronically or manually. The Act confers rights on the person about whom personal information is kept and places duties on those who process or control such data. One of the key provisions of the Data Protection Act is that personal information must be used fairly and lawfully. Personal information should be accurate, relevant and stored securely and can only be shared in limited circumstances eg for the detection of a crime.

**A relevant offence is either an offence for which the penalty is fixed by law (eg life imprisonment) or one for which someone of 21 years or upwards can be sentenced to 5 years imprisonment.*

Appendix 2: Regulated Activity (Adults)

The definition of 'regulated activity' as defined by the Safeguarding Vulnerable Adults Groups Act 2006 (SVGA) and as amended by the Protection of Freedoms Act 2012 identifies the activities which, if an adult requires them, will mean that the adult will be considered vulnerable at that particular time. The SVGA no longer labels adults as 'vulnerable' because of the setting in which the activity is received or because of the personal characteristics or circumstances of the adult receiving the activities. This means that anyone providing personal care to an adult is in regulated activity, irrespective of whether that occurs in a hospital, care home, a day centre a prison or in sheltered housing. There is no longer a requirement for a person to carry out activities a certain number of times before they are engaging in regulated activity. Any time a person engages in the activities set out below they are engaging in regulated activity.

General Points

- 1 Regulated activity continues to exclude any activity carried out in the course of family relationships, and personal, non-commercial relationships.
 - (a) Family relationships involve close family (eg parents, siblings, grandparents) and relationships between two people who live in the same household and treat each other as family
 - (b) Personal, non-commercial relationships are arrangements where either no money changes hands, or any money that does change hands is not part of a commercial relationship (eg gifting a friend money for petrol after they have driven you to the hospital) and the arrangement is made between friends or family friends.
- 2 An adult is a person aged 18 years or over.
- 3 A person whose role includes the day-to-day management or supervision of any person who is engaging in regulated activity is also in regulated activity.

Definition of Regulated Activity

There are six categories within the definition of regulated activity. Each of the following is a regulated activity relating to vulnerable adults:

- 1 **the provision to an adult of health care by, or under the direction or supervision of, a health care professional**
- 2 **the provision to an adult of relevant personal care**
- 3 **the provision by a social care worker of relevant social work to an adult who is a client or potential client**
- 4 **the provision of assistance in relation to general household matters to an adult who is in need of it by reason of age, illness or disability**
- 5 **any relevant assistance in the conduct of an adults own affairs**

6 the conveying of adults who need to be conveyed by reason of age, illness or disability.

Providing Health Care

The provision of health care by any health care professional to an adult, or the provision of health care to an adult under the direction or supervision of a health care professional, is regulated activity. A health care professional is a person who is a member of a profession regulated by a body mentioned in section 25 (3) of the National Health Service Reform and Health Care Professions Act, for example, the Nursing and Midwifery Council. Health care includes all forms of health care provided for adults, whether relating to physical or mental health, and includes palliative care. The provision of psychotherapy and counselling to an adult which is related to health care the adult is receiving from, or under the supervision of a health care professional, is regulated activity. Members of peer support groups are not in regulated activity.

Providing Personal Care

Anyone who provides an adult with physical assistance with eating or drinking, going to the toilet, washing or bathing, dressing, oral care, or care of the skin, hair or nails because of the adult's age, illness or disability, is in regulated activity. Anyone who prompts and then supervises an adult who, because of their age, illness or disability, cannot make the decision in relation to personal care without that prompting and supervision, is in regulated activity. Anyone who trains, instructs or provides advice or guidance which relates to relevant personal care to adults who need it because of their age, illness or disability is in regulated activity. A health care assistant who feeds an adult because they are too frail to feed themselves is engaging in regulated activity. A worker who reminds a person with dementia to eat and ensures that they do so, is in regulated activity.

Excluded from regulated activity is any physical assistance provided to an adult in relation to the care of their hair when that assistance relates only to the cutting of the adult's hair. This is to ensure that hairdressers who cut the hair of patients in hospitals and care homes are not engaging in regulated activity.

Providing Social Work

The activities of regulated social workers in relation to adults who are clients or potential clients constitutes regulated activity. These activities include assessing or reviewing the need for health or social care services, and providing ongoing support to clients.

Assistance with General Household Matters

Anyone who provides day to day assistance to an adult because of their age, illness or disability, where that assistance includes the following; managing the person's cash, paying the person's bills or shopping on their behalf, is in regulated activity.

Assistance in the Conduct of a Person's own Affairs

Anyone who provides assistance in the conduct of an adult's own affairs, for example, under the Mental Capacity Act, or who acts as a representative to receive payments on behalf of the individual, is in regulated activity.

Conveying

Any drivers and any assistants who transport adults because of their age, illness or disability to or from places where they have received, or will be receiving health care, relevant personal care or relevant social work are in regulated activity. Conveying does not include licensed taxi drivers and does not include trips for purposes other than to receive health care, relevant personal care or relevant social work (for example, trips for pleasure are excluded).

A friend who takes a neighbour to a hospital appointment would not be in regulated activity as this is a personal friendship.

Appendix 3: Sisters of Mercy Form for Recording and Reporting Concerns of Vulnerable Adult Abuse

Please answer all relevant questions as fully as you can.

Work location:	
Name of Vulnerable Adult:	
Age/Date of Birth:	
Gender:	
Name of Carer(s) (if known):	
Home Address (if known):	

PLEASE COMPLETE THOSE SECTIONS BELOW THAT ARE RELEVANT

1 DISCLOSURE BY A VULNERABLE ADULT
When was the disclosure made (dates and times)?
Who did the vulnerable adult make the disclosure to?
What did the vulnerable adult actually say?

2 INDICATORS
Describe any signs or indicators of abuse (with times and dates)

Has the vulnerable adult alleged that any particular person is the abuser? if so, please record details, and the relationship, if any, to the vulnerable adult below):

--

3 CONCERNS EXPRESSED BY ANOTHER PERSON ABOUT A VULNERABLE ADULT

Record the concerns that were passed to you (with dates and times) and if possible ask the person who expressed the concerns to confirm that the details as written are correct.

--

4 DETAILS OF ANY IMMEDIATE ACTION TAKEN e.g. FIRST AID

--

5 HAS THE VULNERABLE ADULT EXPRESSED ANY RESERVATIONS ABOUT YOU TALKING TO THE LINE MANAGER OR NOMINATED MANAGER ABOUT THE MATTER?

--

6 DOES THE VULNERABLE ADULT HAVE ANY PARTICULAR NEEDS, E.G. COMMUNICATION, ETC?

SIGNATURES

To be signed by the person reporting the concern.

Name _____

Job
title _____

Signed _____
Date _____

Date received and actioned by Line Manager:

Name _____

Signed _____
Date _____

Date received and actioned by Nominated Manager

Name _____

Signed _____
Date _____

Action taken by Line Manager/Nominated Manager

Signed _____

Date _____

Appendix 4: Contact Details for Safeguarding in the Northern Province

Designated Liaison Person:

Name: Teresa Burns
Telephone number: 028 8554 8127
Email address: burns.teresa@mercynth.org

Deputy Designated Liaison Person:

Name: Sr Kathleen Savage
Telephone Number: 028 9071 5478
Email Address: ksavage@utvinternet.co.uk

HSC TRUSTS

	Normal Working Hours (9am – 5pm)	Out of Hours*
Belfast	028 9056 5707	028 9056 5444
Northern	028 2563 5558	028 9446 8833
South Eastern	028 9266 5181 (ext 4544)	028 9056 5444
Southern	028 3083 2650	028 3083 5000
Western	028 7131 4090	028 7134 5171

*Out of Hours means 5pm to 9am; weekends; and bank or other public holidays

PSNI

Emergency	999	
Non-emergency	101	
General Enquiries	0845 600 8000	

RQIA

	Normal Working Hours
Belfast	028 9051 7500
Omagh	028 8224 5828

Appendix 5 : Whistleblowing Policy

Introduction

The Sisters of Mercy NP are committed to the highest standards of openness, integrity and accountability. In line with that commitment we expect Sisters, staff or volunteers who have concerns about the welfare or safety of children or vulnerable adults to come forward and to voice those concerns, without fear of discrimination or disadvantage. The Sisters of Mercy NP undertake to investigate and deal with concerns raised promptly and consistently.

Whistleblowing

Whistleblowing occurs when an individual who works with an organisation (in a paid or unpaid capacity) raises a concern about misconduct, illegal or underhand practices by individuals and/or an organisation; or about the way care and support is being provided, such as practices that cause harm or the risk of harm to others or are abusive, discriminatory or exploitative. Safeguarding Vulnerable Adults - A Shared Responsibility, January 2012.

Aims of this Policy

This policy aims to:

- encourage individuals to feel confident in raising concerns and to question and act upon concerns about practice
- provide avenues for individuals to raise concerns
- receive feedback on action taken and how the matter can be raised externally if the complainant remain dissatisfied
- reassure the complainant that he/she will be protected from reprisals or victimisation if he/she has acted reasonably and in good faith.

There are protections under civil law for individuals who report serious concerns. The Public Interest Disclosure (NI) Order 1998 protects most workers who whistle blow about wrongdoing in their place of work from suffering detriment from their employer for doing so.

Under the Protections for Persons Reporting Child Abuse Act 1998 in the Republic of Ireland, people are protected from civil liability when they report child protection concerns to the Child and Family Agency, provided that they do so

reasonably and in good faith. It is an offence to report child abuse, knowing that the information provided is untrue.

Safeguards

The Sisters of Mercy recognise that individuals may be reluctant to raise concerns about the practice or behaviour of colleagues because of:

- fear of getting it wrong and damaging the career or reputation of a colleague
- fear of disrupting working relationships
- fear of not being believed
- fear that the information will be used inappropriately.

These concerns have to be weighed up against the following:

- each person working for or on behalf of the Sisters of Mercy NP has a responsibility for the welfare and safety of children and vulnerable adults
- raising a concern in a timely manner can prevent a bad situation deteriorating further
- raising a concern about one situation can reduce the risk of similar situations arising elsewhere
- raising a concern about poor practice will prevent the person raising the concern from becoming implicated in such practice.

The Sisters of Mercy NP takes malpractice or poor practice seriously and will not tolerate the harassment or victimisation of anyone raising a genuine concern under this Policy. This assurance is not extended to someone who maliciously raises a matter when they are aware that it is untrue.

Confidentiality

The Sisters of Mercy NP will treat concerns raised in a confidential and sensitive manner. The identity of the individual raising the concern may be kept confidential so long as it does not hinder or interfere with the investigation. However a situation may arise where the concern cannot be resolved without revealing the informant's identity (for instance because evidence is needed to bring the matter to a conclusion).

Anonymous Allegations

This Policy encourages individuals to put their name to any disclosures made. It is difficult to act on anonymous information as information may need to be clarified and this is not possible without the contact details of the informant. However, if a person raises a concern anonymously, efforts will be made to establish whether there are grounds for concern for the safety and well-being of

children or vulnerable adults. Concerns expressed anonymously will be considered by the Sisters of Mercy NP taking into account the seriousness of the issues raised, the credibility of the concern and the likelihood of confirming the allegation from attributable sources.

Untrue Allegations

If an individual makes an allegation which is not confirmed by a subsequent investigation, in good faith then no action will be taken against that individual. If however an individual makes an allegation maliciously, frivolously or for personal gain action may be taken against the individual.

How to Raise a Concern

Any person who is worried about poor or inappropriate practice towards children or vulnerable adults should try to establish the grounds for their concern. They should make a point of observing the practice or behaviour that is worrying them and making a note of their observations.

The individual should normally raise her/his concerns with the Sisters of Mercy NP Designated Liaison Person or Deputy Designated Liaison Person. If you feel you need to take the matter to someone outside the Safeguarding Office then you should approach your line manager, local leader or the Assistant Provincial Leader.

If you are not sure who to contact, due to the seriousness or sensitivity of the issue or the identity of the individual who is suspected of malpractice, then you can seek advice from National Board for Safeguarding Children in the Catholic Church in Ireland, NBSCCCI, www.safeguarding.ie.

Concerns may be raised verbally or in writing. The report should include the background and history of the concern, names, dates, places, the reason for your concern and any other supporting evidence. Where the concern is made verbally, a written record will be made of the concern raised by the individual receiving the complaint

The earlier the concern is raised the easier it is to take action. The informant is not expected to prove beyond doubt the truth of the allegation but will be expected to demonstrate that there are reasonable grounds for concern. The individual has the right to expect that any concern will be taken seriously and acted upon promptly.

How We Will Handle your Concern

The person to whom you report your concern under this Policy must report it to the Designated Liaison Person within five working days. If it is an urgent concern it should be reported to the Designated Liaison Person immediately, or within 24 hours. If the person has information that indicates that a child or vulnerable adult has been abused or is at risk of abuse that information must be referred without delay to the Designated Liaison Person. Concerns or allegations which fall within the scope of the Safeguarding Children or Vulnerable Adults Policies will be dealt with under those procedures.

Individuals have the right to share such information directly with the civil authorities.

The action taken by the Sisters of Mercy NP will depend on the seriousness of the concern raised. It might involve encouraging the person to try to resolve the matter at local level or it could involve reporting the matter to the civil authorities.

The matter may be subject to:

- Internal investigation
- Referral to the statutory authorities (Police or Social Services)
- Consideration under the Disciplinary Procedure
- Referral to the NBSCCCI.

Initial enquiries will be made to establish if an investigation is required and if so what form it should take.

The Designated Liaison Person will:

- send a written acknowledgement of receipt of the concern within ten working days
- keep the complainant informed of the action which will be taken and of the progress of the Investigation
- identify the support which can be provided by the Sisters of Mercy NP
- inform the complainant of the outcome of the investigation subject to legal constraints.

Due to the varied nature of these sorts of complaints it is not possible to lay down precise timescales.

If you are required to give evidence in criminal or disciplinary proceedings, the Sisters of Mercy NP will arrange for you to receive advice about the procedure and any necessary support.

If all internal procedures have been exhausted and the informant remains dissatisfied with the outcome of the investigation, the individual may refer the matter to the NBSCCCI.

Self-Reporting

The Sisters of Mercy accept that there may be occasions when personnel are experiencing personal difficulties which may have an adverse impact on their ability to perform their duties/role competently. Individuals are encouraged to discuss any such issues with their manager with a view to receiving support.

Advice and Support

The Sisters of Mercy NP recognise that whistle blowing can be difficult and stressful. The Designated Liaison Person and the Deputy Designated Liaison Person are available to provide advice and support to those who are worried about the safety and welfare of children and vulnerable adults.

Contact Details:

Sisters of Mercy, Northern Province
Provincial House
74 Main Street
Clogher
Co Tyrone BT76 0AA

Designated Liaison Person
Teresa Burns - 028 85548127
burns.teresa@mercynth.org

Deputy Designated Liaison Person
Sr Kathleen Savage – 028 90715478
ksavage@utvinternet.co.uk

Assistant Provincial Leader
Sr Paula Carron - 028 85548127
carronpaula@mercynth.org

WHAT TO DO WHEN ANY WORKER REPORTS A CONCERN

1 Listen carefully to any worker raising a concern

- Commit to taking the matter seriously
- Thank the person for raising it (even if you think they may be mistaken)
- Acknowledge how they may be feeling, that it may be a difficult or stressful situation, and offer reassurance
- Respect the worker's belief that they are raising a genuine concern in the public interest
- Treat this as being reasonable
- Avoid prejudging whether this is correct or valid until an appropriate investigation has taken place

2 Respond positively and clearly

- Reassure the person that the concern will be looked into promptly, and (where appropriate), investigated thoroughly and fairly as soon as possible
- Manage expectations of the individual - discuss next steps, reasonable timeframes and arrangements for feedback on the outcome
- Respect a worker's request for confidentiality and any concerns about their job or career, but explain any circumstances where there may be limits on confidentiality
- Offer advice about the type of support available to them, eg counselling
- Be clear on what the worker should do and where they should go if they experience any reprisals or unacceptable behaviour
- Give the individual a copy of, or refer them to, the Mercy Whistleblowing Policy

3 Ensure a fair process of investigation

- Ensure any investigation is carried out fairly and thoroughly
- Keep an open mind - you may not want to believe all that you hear but it is important to remain objective
- Focus on the information that is being disclosed not on the worker who is raising the concern
- Do not let personal views influence your assessment of the issues
- Recognise any strong emotions you may have and ask for help if you need it
-

4 Assess how serious and urgent the risk is

- Decide whether the concern is best dealt with under the Whistleblowing Policy or some other procedure
- Do not dismiss the disclosure as an exaggeration or being trivial unless there is clear evidence to support this assessment
- Decide whether the assistance of or referral to senior manager or a specialist function is desirable or necessary
- Where there are grounds for concern, take prompt action to investigate or if the concern is potentially very serious, make sure this is brought to the attention of the Provincial Leader

- 5 Maintain good communication with the worker who raised the concern**
 - Keep the worker advised and informed on progress
 - Update on any changes or delays in the process
 - Give feedback on the outcome to the worker
 - Explain any action to be taken (or not), but maintain confidentiality where this involves other parties
 - Explain any mistaken perceptions or misunderstandings which may have occurred
 - Ideally feedback should be given face to face and followed up in writing

- 6 Act fairly**
 - Understand that you are accountable for your actions
 - Be clear on any action taken, or not taken, and the reasons for this.
 - Never attempt to ignore or cover up evidence of wrongdoing
 - Always remember that you may have to explain how you handled the concern
 - Do not penalise an individual for making a disclosure that proves unfounded if, despite making a mistake, s/he genuinely believed that the information was true

- 7 Seek appropriate advice and /or support where required.**
 - If you are uncertain about how to proceed with a concern seek advice from HR or other relevant person. They will also be able to support and advise throughout any investigations you need to undertake into the issues raised and in undertaking any actions required as a result of evidence being presented

- 8 Keep clear concise records of all discussions**
 - Date(s) what was said, response given, by whom
 - Keep a record of all concerns raised
 - Note the nature of the concern
 - Record how the investigation was conducted
 - Record outcome, decisions or action taken
 - Retain the record

- 9 Follow up action**
 - Consider the potential actions:
 - Decide if this is a serious disciplinary matter
 - Ask if there are alternative ways to achieve constructive positive solutions for future improvement
 - Address any issues of competence or ability highlighted via training and development
 - Report any wider issues identified to the Provincial Leadership team
 - Make recommendations across the Province where appropriate, take remedial, proactive and preventative action where it is needed
 - Take steps to share learning and prevent recurrence of the issue elsewhere across the Province
 - Raise any issues identified in other relevant forums, for example, Training Reviews, Health and Safety, Risk Assessment

- 10 Ensure the process has a positive outcome**
 - Provide appropriate feedback on the outcome to the person raising the concern
 - Build or rebuild working relationships after a concern has been raised
 - Check on the worker's wellbeing to ensure they have not suffered any disadvantage as a consequence of raising a concern.

Flowchart of Whistleblowing Process

FIRST STEPS

You Wish to raise a Concern

- (i) Refer to Whistleblowing Policy
- (ii) Seek Advice

Discussed informally with appropriate line manager

Resolved

Not Resolved

(Proceed to Stage 2)

STAGE 2

Formally Raise Concern with Senior Manager

- (i) Investigating Manager appointed
- (ii) Investigating Manager conducts witness interviews, examines documents
- (iii) Writes an Investigation Report with recommendations
- (iv) Investigating Manager reports back to Senior Manager
- (v) Investigating Manager feeds back to Concern Raiser

Resolved

Not Resolved

(Proceed to Stage 3)

STAGE 3

Raise with Provincial Leader

Resolved

Not Resolved

(Proceed to Stage 4)

STAGE 4

Consider Referral to External Agency

Appendix 6: Complaints Handling Policy

This procedure will be followed where a complaint is received regarding how an issue or concern of a safeguarding nature has been dealt with by the Sisters of Mercy NP.

The Sisters of Mercy NP are committed to providing a high quality safeguarding service. When something goes wrong in relation to how we respond, we need you to tell us about it. This will help us to become more effective and to improve our standards.

If you have a complaint, please contact the Designated Liaison Person, (Mrs Teresa Burns), with the details. If the complaint is in relation to that individual then please contact the Deputy Designated Liaison Person or the Assistant Provincial Leader, (see contact details below).

We will do our best to deal with your complaint within eight weeks.

What will happen next?

1. We will send you a letter acknowledging receipt of your complaint within seven days of receiving it, enclosing a copy of this procedure.
2. We will then investigate your complaint. This will normally involve passing your complaint to the Provincial Leader or her Delegate who will review the matter and speak to you.
3. The Provincial Leader or her Delegate may invite you to a meeting to discuss and hopefully resolve your complaint. This communication may take place by telephone if a meeting is not possible. The Provincial Leader or her Delegate will do this within 14 days of sending you the acknowledgement letter.
4. Within seven days of the meeting or discussion, the Provincial Leader or her Delegate will write to you to confirm what took place and any solutions she has agreed with you. The Provincial Leader or her Delegate will ask you to acknowledge receipt of the record of the discussion and invite you to submit your comments/amendments.

5. If you do not want a meeting or it is not possible, the Provincial Leader or her Delegate will send you a detailed written reply to your complaint, including her suggestions for resolving the matter, within 21 days of sending you the acknowledgement letter.
6. At this stage, if you are still not satisfied, you should contact us again and we will inform NBSCCCI.
7. If you remain dissatisfied with how the Sisters of Mercy, Northern Province dealt with a safeguarding concern, you can write to the National Board requesting a review of how your situation was handled. For guidance on how to request a review by NBSCCCI please refer to “Safeguarding Children” Standards and Guidance document for the Catholic Church in Ireland: Resource 13; page 79. www.safeguarding.ie

Contact details:

*Sisters of Mercy, Northern Province
Provincial House
74 Main Street
Clogher
Co Tyrone
Northern Ireland*

Assistant Provincial Leader

*Sr Paula Carron
carronpaula@mercynth.org
028 85548127 - Northern Ireland
048 85548127 – Republic of Ireland*

Designated Liaison Person

*Teresa Burns, Designated Liaison Person
burns.teresa@mercynth.org
028 85548127 - Northern Ireland
048 85548127 - Republic of Ireland*

Deputy Designated Liaison Person

*Sr Kathleen Savage, Deputy Designated Liaison Person
ksavage@utvinternet.com
028 90715478 - Northern Ireland
048 90715478 - Republic of Ireland*