



SAFEGUARDING VULNERABLE PERSONS

Policy Number: 1

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Policy Title: SAFEGUARDING VULNERABLE PERSONS

INTRODUCTION

The Sisters of Mercy have a special care for the Vulnerable Persons among us imitating the gentleness of Christ our Redeemer who ‘did not break the bruised reed.’ (Is. 42:3) We recognise the right of Vulnerable Persons to live their lives free from any form of abuse. As a Congregation we recognize our moral and legal obligation¹ to protect Vulnerable people within our Congregation and in our ministries from any form of abuse. Procedures in this Policy provide clear guidance on how we relate to Vulnerable Persons to prevent abuse happening.

The Sisters of Mercy are an international Congregation and this policy is to be interpreted and applied in accordance with the relevant legislation of each jurisdiction in which we reside. However while upholding the importance of the guidelines that support this policy, they must be applied in the context of a caring and humane response to the needs of Vulnerable Persons. To ensure that our Vulnerable Persons Policy is robust and comprehensive we have formulated it around an eight standard framework².

SECTION 1

STANDARD 1

The Congregation has a Safeguarding Vulnerable Persons Policy supported by robust procedures.

STATEMENT OF POLICY

As Sisters of Mercy we have a special care for the Vulnerable among us. We recognise and support the right of Vulnerable Persons under our care to live their lives free from any form of abuse irrespective of where it occurs or who is responsible. We will respond appropriately to all concerns, suspicions and allegations of abuse raised with us. We accept all civil and ecclesiastical requirements governing how we should treat Vulnerable Persons, and we commit ourselves to complete compliance with the policy set out here.

SCOPE AND PURPOSE OF POLICY

The **scope** of this Policy is broad-ranging and in practice it will be implemented via a range of Procedures. This Policy applies to all Sisters of the Congregation, Employees and Volunteers in our places of Residence and Ministry who care for Vulnerable Persons.

The **Purpose** of this Policy is to help protect Vulnerable Persons from harm by:

- ◇ Setting out the Principles and Procedures which must underpin all our contact with them;
- ◇ Providing a framework for how our members, staff and volunteers should relate to members of the Congregation who are Vulnerable in one or more recognised ways;
- ◇ Creating a climate in which all our members may live in mutual respect and where differences in strengths and vulnerabilities are accepted.

¹See Appendix 2

²See Appendix 1

PRINCIPLES AND VALUES UNDERPINNING THIS POLICY

We respect the rights and entitlement of Vulnerable people in every aspect of their lives, especially in the following key areas:

1. The right to live in safety: this entails being free from abuse or fear of abuse by others.
2. Access to information and knowledge: Vulnerable Persons are entitled to information allowing them to make informed choices.
3. **Choice:** Vulnerable Persons should have opportunities to choose independently from a range of options.
4. **Confidentiality:** there must be appropriate management of sensitive information about Vulnerable Persons.
5. **Consent:** Vulnerable Persons must be supported in making their own decisions, while acknowledging that gaining consent depends on the capacity of the person to understand and accept the issue on which consent is being sought.
6. **Dignity and Respect:** Vulnerable Persons must be given the same respect and dignity as other people.
7. **Fulfilment:** Vulnerable Persons should have the opportunity to engage in activities enabling them to fulfil their ability and potential.
8. **Independence:** Vulnerable Persons should have as much control as possible over their lives while being safeguarded against unreasonable risks.
9. **Privacy:** A Vulnerable Person must be free from all unnecessary intrusion into their affairs. A balance is maintained between the individual's safety and the safety of others.

WHO IS A VULNERABLE PERSON?

The National Vetting Bureau (Children and Vulnerable Persons) Act, 2012 - 2016 in the Republic of Ireland provides the following definition of a Vulnerable Person;

“A Vulnerable Person”, means a person, other than a child, who—

(a) is suffering from a disorder of the mind, whether as a result of mental illness or dementia,

(b) has an intellectual disability,

(c) is suffering from a physical impairment, whether as a result of injury, illness or age, or

(d) has a physical disability, which is of such a nature or degree—

- (i) as to restrict the capacity of the person to guard himself or herself against harm by another person, or
- (ii) that results in the person requiring assistance with the activities of daily living including dressing, eating, walking, washing.

CONSENT AND CAPACITY

The issue of consent and capacity is very complex and consideration may vary depending on the issue concerned, e.g. consent to medical treatment or consent to the making of a complaint. Sisters, Employees and Volunteers should always be mindful of the need for Vulnerable Persons to consent to, and to be comfortable with, any proposed activity/service including any proposed complaint of abuse. Consent is a process – it results from understanding through dialogue and the provision of information. It may be expressly given or alternatively it may be signalled by a person's behaviour.

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 e.g. where public interest is at stake, the need for consent may be over-ridden.

The consent of a Vulnerable Person is considered valid if:

- ◇ She/he has the capacity to consent, that is, she/he can understand and weigh up the information needed to make the decision; *and*
- ◇ Sufficient information has been given to her/him 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 factors are absent consent cannot be considered valid.

As a general rule the method for obtaining consent is likely to be dictated by the seriousness of what is being proposed and the consequences of agreeing to it. In circumstances where, for example, the Vulnerable Person is being asked to transfer from a residential home to a nursing home where her needs could be better served, it is important that the Vulnerable Person's signature is obtained if this is possible. Decisions of this nature should involve health and social care professionals to ensure that the consent is valid. Intervention where the Vulnerable Person cannot give valid consent may be permissible in very particular circumstances and in accordance with the law governing such interventions.

In relation to a Vulnerable Person making a decision about how she/he wishes to deal with concerns of complaints relating to potential abuse, it is important that she/he is supported in making such decisions. The Vulnerable Person should be assured that her/his wishes concerning a complaint will only be overridden if it is considered essential for her/his own safety, or the safety of others, or arising from legal responsibilities³.

³For example in Ireland there is legal obligation on a person who knows or believes that certain offences (e.g. sexual assault) has been committed against a Vulnerable Person, and she/he has information she/he knows or believes might be of material assistance in securing the apprehension, prosecution or conviction of that other person for that offence, to make a disclosure to the police.

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 (see roles and responsibilities) believes that a Vulnerable Person may be at risk of harm, engagement will take place with the statutory authorities as to the best course of action, notwithstanding the fact that the Vulnerable Person has not given consent.

If the Vulnerable Person is unable to give informed consent, in relation to any decision regarding a complaint of abuse, discussion should take place with the close family/carer/guardian 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 Person 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.

RECOGNITION OF ABUSE

All Sisters, Employees and Volunteers must be clearly informed about what constitutes harm/abuse of a Vulnerable Person and must be able to recognise the signs of harm/abuse. The list below is not exhaustive and members must be also guided by their own instincts as to whether or not they were witnessing possible harm being done to a Vulnerable Person. The same principle applies to any of the following situations where a member suspects possible abuse:

- ◇ Physical abuse
- ◇ Psychological abuse
- ◇ Sexual abuse
- ◇ Financial exploitation
- ◇ Neglect and acts of omission
- ◇ Discriminatory abuse
- ◇ Institutional abuse

VULNERABLE PERSONS SAFEGUARDING STRUCTURE



ROLES & RESPONSIBILITIES OF DESIGNATED SAFEGUARDING PERSONNEL

The Sisters of Mercy, their employees and volunteers have a duty to protect Vulnerable Persons from any form of abuse. Such responsibility requires that members of our Congregation, staff and volunteers follow the guidance outlined in this Safeguarding Policy. Each of our Provinces has appointed designated persons with special responsibility for different aspects of this ministry as follows:

THE PROVINCIAL LEADER HAS THE FOLLOWING RESPONSIBILITIES

1. To ensure that our Provincial Structure to Safeguard Vulnerable Persons with whom we interact, is working effectively.
2. To ensure that implementation of this policy is regularly monitored and reviewed.
3. To liaise with and monitor the Safeguarding Manager/Designated Liaison Person.
4. Review on a quarterly basis all concerns or allegations of abuse and their current status.
5. Ensure that service providers have in place arrangements to support the implementation of this Policy as specified in the service agreement/contract.

THE SAFEGUARDING MANAGER/DESIGNATED LIAISON PERSON HAS THE FOLLOWING RESPONSIBILITIES⁴

1. To receive, respond to, manage and record all concerns or allegations of abuse regarding Vulnerable Persons from start to finish in an appropriate and swift manner, and ensure that all the relevant information is collated i.e. preliminary internal enquiry.
2. To ensure all reporting obligations are met, both internally, and to any relevant statutory authorities.
3. To provide regular information on the progress of any enquiry to the Provincial Leader and others as appropriate.
4. To liaise with recognised support agencies for the Safeguarding of Vulnerable Persons e.g. HSE.

THE LOCAL SAFEGUARDING REPRESENTATIVES HAVE THE FOLLOWING RESPONSIBILITIES

1. To raise awareness around the particular needs of Vulnerable Persons.
2. To seek to ensure that Vulnerable Persons are safeguarded from all forms of abuse.
3. To promote best practice in this regard.
4. To highlight the names and contact details of all Designated Liaison persons.

THE SAFEGUARDING COMMITTEE HAS THE FOLLOWING RESPONSIBILITIES

1. To ensure that appropriate and on-going training is provided for all involved with the care of Vulnerable Persons.
2. To ensure the recruitment of staff to care for Vulnerable Persons is done in line with good recruitment practices. This will include:
 - ◇ Clear role specification with an emphasis on the Safeguarding of Vulnerable Persons.
 - ◇ Short-listing that is based on application forms and not on provision of curriculum vitae's alone.
 - ◇ Job or role descriptions will contain reference to safeguarding responsibilities.
3. The creation, maintaining and monitoring of a safe environment for our Vulnerable Persons.
4. Ensuring that sufficient resources are allocated to ensure that the policy can be effectively implemented.
5. Providing an update report to the Provincial Leader annually.

⁴See Appendix 4 for detailed Role of DLP

THE ROLE OF FRONTLINE PERSONNEL

1. Promote the welfare of Vulnerable Persons in all interactions.
2. Be aware of, and comply with, the Congregation's policy on Safeguarding Vulnerable Persons
3. Support an environment in which Vulnerable Persons are safeguarded from abuse or abusive practices through the implementation of preventative measures and strategies
4. Avail of any relevant training and educational programmes
5. Be aware of the signs and indicators of abuse
6. Support Vulnerable Persons to report any type of abuse or abusive practice
7. Ensure that any concerns or allegations of abuse are reported in accordance with policy.

SECTION 2

STANDARD 2

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

RECRUITMENT AND SELECTION PROCEDURES

The Congregation recognises the importance of putting in place safe recruitment and selection procedures to minimise the opportunity for unsuitable people to work or volunteer with Vulnerable Persons. In each province the Congregational policy on Safeguarding Vulnerable Persons, the Provincial Employment Policy, Public Policy Guidelines and Legislation are all used to ensure the most satisfactory outcomes for Vulnerable members. In Ireland there is a legal obligation on a person who knows or believes that a certain offence (e.g. sexual assault) has been committed against a Vulnerable Person and has information she knows or believes might be of material assistance in securing the apprehension, prosecution or conviction of that other person for that offence, to make a disclosure to the police.

THE FOLLOWING ARE USEFUL POINTERS FOR RECRUITMENT

1. Recruitment should involve a Statement of Safeguarding Policy.
2. Role descriptions for all roles involving contact with Vulnerable Persons should contain reference to the safeguarding responsibility.
3. Short-listing stage in the appointments procedure must be based on a formal application form and not on the provision of a curriculum vitae alone.
4. No formal job offers are made until police checks and checks for suitability are completed.

SUB-CONTRACTED SERVICE DELIVERY

In communities where service providers have been engaged by the Province, the Provincial Leadership has the following responsibilities:

1. To ensure that contracts and memoranda of agreement for partnership delivery of services to Vulnerable Persons will include a clause requiring compliance with this policy or an equivalent safeguarding policy. And also a clause which enables the Congregation to monitor compliance.
2. To ensure there will be systematic checking of safeguarding arrangements of partner organisations.
3. To ensure that Safeguarding will be a fixed agenda item on any partnership reporting meetings.

SECTION 3

STANDARD 3

Effective and relevant training must be provided for all involved in the care of Vulnerable Persons in our Communities and Ministries.

The Congregation requires that effective and relevant training must be provided for all involved in the care of Vulnerable Persons in our communities. This training must include:

GUIDE TO RECRUITMENT AND TRAINING

Typical ways to include safeguarding issues during induction include:

1. Discussion of Safeguarding Policy (and confirmation of understanding)
2. Discussion of other relevant policies
3. Ensuring of familiarity with reporting processes, the roles of Line Manager and Designated Liaison Person and those who act in their absence
4. Initial training on safeguarding to include safe working practices and safe recruitment
5. Highlighting and constantly revising the clarity and effectiveness of reporting procedures, with a view to encouraging the reporting of concerns
6. Inclusion of safeguarding as a topic in supervision
7. Appraisal meetings in order to promote reflective practice
8. Arrangement of debriefing sessions, to enable staff and all involved with Vulnerable Persons to reflect on issues with which they have dealt
9. Ensuring that frequently-used terminology is clearly understood by all staff and all involved with Vulnerable Persons.

INDUCTION

A thorough induction process which is integral to good organisational practice, should take place when personnel take up a new post or role. In addition to the above this process will include:

- ◇ Information on the ethos, policies, procedures and guidelines of the Province in question;
- ◇ Awareness-raising and training on the recognition, recording and reporting of abuse
- ◇ Meeting co-workers, managers and relevant others.

A timeframe should be set within which induction training 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 Persons Policy. It is good practice to provide a handbook of information for new personnel for reference purposes.

RELEVANT TRAINING APPROPRIATE TO THE POST/ROLE

Personnel should receive training appropriate to the nature of their work and the profile of the Vulnerable Persons 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 and in line with relevant legislation and best practice.

Safeguarding training should include:

- ◇ A basic awareness and understanding of the factors which contribute to vulnerability
- ◇ The possible signs of abuse
- ◇ How to respond when abuse is disclosed
- ◇ Recording and reporting procedures
- ◇ Understanding of confidentiality and its importance
- ◇ Understanding of consent and capacity
- ◇ Personnel must take concerns around Vulnerable Person 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.

Provincial and local leadership should ensure that agency staff contracted by them have relevant training provided by their organisation, in line with best practice. Proof of such training should be supplied to the Congregation prior to the agency contract being finalised. Proof of on-going training will also be necessary at least annually.

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.

SECTION 4

STANDARD 4

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

Everyone is entitled to have their civil and human rights upheld and to live a life free from abuse and neglect. A member of the congregation, or any adult, may be Vulnerable to abuse because she has a mental health issue, a disability, a sensory impairment, is old or frail, or has some form of illness. It may also be because of her living circumstances, for example, she may live alone, in isolation, or in a residential care home, nursing home or other institutional setting.

Sisters, employees and volunteers need to be aware of circumstances that may leave a person Vulnerable to abuse, and be able to recognise the possible signs of abuse. They should be aware of the demeanour and behaviour of Vulnerable Persons 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. In the Republic of Ireland abuse of a Vulnerable Person is defined as:

“Any act, or failure to act, which results in a breach of a Vulnerable Person's human rights, civil liberties, physical and mental integrity, dignity or general well-being, whether intended or through negligence, including sexual relationships or financial transactions to which the person does not or cannot validly consent, or which are deliberately exploitative. Abuse may take a variety of forms.”⁵

RECOGNISING ABUSE

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:

⁵See Appendix 2 for other definitions

TYPES OF ABUSE

PHYSICAL ABUSE

Hitting or slapping, pushing, kicking, burning or scalding, suffocating, poisoning, misuse of medication, restraining a person in an inappropriate way or inappropriate sanctions.

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

PSYCHOLOGICAL ABUSE

Including - emotional abuse, threats of harm or abandonment, coercion, isolation, deprivation of contact, verbal abuse, humiliation, harassment, intimidation or bullying and threatening or insulting behaviour, or withdrawal from services or supportive networks.

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 OR MATERIAL ABUSE

Including - misusing or stealing the person's property, money, possessions or benefits, cheating them, using them for financial gain, pressure in connection with wills, fraud, property, inheritance of financial transactions, controlling or withholding access to money or possessions.

Possible signs – having concerns around finances; not having enough money for personal needs; being too protective of money and things they own; not paying bills; not having normal home comforts.

SEXUAL ABUSE

Including rape or sexual assault, or direct or indirect sexual activity where the Vulnerable Person cannot or does not consent to, or which he or she was compelled to consent.

Possible signs – physical symptoms including soreness and not wanting to be touched, changes in appearance, including withdrawal.

NEGLECT OR ACTS OF OMISSION

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

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, language, age, sexuality, disability or perceived status in the Congregation.

Possible signs - the person not receiving the care services they require; their carer being overly critical or making derogatory remarks about the person; not allowing the person to be clothed as she wishes.

INSTITUTIONAL ABUSE

Institutional abuse is the mistreatment of people brought about by poor or inadequate care or support, or systematic poor practice that affects the whole care setting. It occurs when the individual's needs and wishes are sacrificed for the smooth and efficient running of a community, service or organisation. It is more likely to happen where staff or volunteers are:

- ◇ Inadequately trained
- ◇ Poorly supervised
- ◇ Not supported by management
- ◇ Have poor communication skills
- ◇ Part of a 'closed' culture, for example a care setting where new ideas, visitors, care management or other professional involvement is discouraged.

Possible signs: *absence of a personal care plan for a person; frequent admissions to hospital; instances of poor or unsatisfactory treatment or treatment that causes harm, by personnel; poor staff morale, high staff turnover and lack of clear lines of accountability and consistency of management; no ongoing assessment of quality provided; failure to implement recommendations highlighted in public inspection reports.*

PROFESSIONAL ABUSE

This is a misuse of power and trust by professionals and a failure to act on suspected abuse, poor care practice or neglect. This happens when there is an abuse of power, when the person is not seen and responded to as an individual, or is attributed a lower status. When there is an inappropriate use of rules, practices and customs. When gifts are given to or received from particular Vulnerable Persons.

Possible signs: *the misuse of power and abuse of trust by professionals; the failure to act on suspected abuse/crimes; not attending to the needs of all fairly and with respect; 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; entering into inappropriate relationships with a Vulnerable Person; poor, ill-informed or outmoded care practice; failure to support a Vulnerable Person to access health care/treatment; denying a Vulnerable Person access to professional support and services such as advocacy; inappropriate responses to challenging behaviours; failure to whistle blow on issues when internal procedures to highlight such issues are exhausted.*

PEER ABUSE

The abuse of one Vulnerable Person by another Vulnerable Person 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.

Possible signs: *unexplained bruises; fear of another member; unwillingness to be close to another member; being the subject of negative remarks.*

STRANGER ABUSE

A Vulnerable Person 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.

Possible signs: *fear of strangers; withdrawal from usual patterns of behaviour.*

WHO CAN ABUSE?

Anyone who has contact with a Vulnerable Person, may be abusive, including a member of their family, community or a friend, informal carer, health or social carer, or other worker.

WHERE MIGHT ABUSE OCCUR?

Abuse can happen anywhere, for example:

1. In our communities and residences
2. Within day care, residential care, nursing care or other institutional settings
3. In our ministry settings.

DISCLOSING AND RESPONDING TO ABUSE

DISCLOSURES

1. A Vulnerable Person may disclose abuse to you
2. Someone else may tell you of their concerns or something that causes you concern
3. A Vulnerable Person may show some signs of physical injury for which there does not appear to be a satisfactory or credible explanation
4. A Vulnerable Person's demeanour/behaviour may lead you to suspect abuse or neglect
5. The behaviour of a person close to the Vulnerable Person makes you feel uncomfortable. This may include another staff member, volunteer, peer or family member
6. Through general good neighbourliness and social guardianship.
7. Being alert to potential abuse plays a major role in ensuring that Vulnerable Persons are safeguarded and it is important that all concerns about possible abuse are reported.

RESPONDING TO DISCLOSURES OF ABUSE

In situations where a Vulnerable Person discloses abuse, it is important that Sisters, Employees and Volunteers respond appropriately and in accordance with the following guidelines:

Do

1. Stay Calm
2. Listen and hear
3. Express concern and sympathy about what has happened
4. Reassure the person – tell her that she did the right thing in telling you
5. Let the person know that the information will be taken seriously and give information about what will happen next
6. If urgent medical/police help is required, call the emergency services
7. Ensure the immediate safety of the person
8. Be aware that medical and forensic evidence might be needed
9. Record what you have seen or what you have been told in writing, and include as much detail as possible
10. Date and sign the report
11. Report the matter to the Safeguarding Manager/Designated Liaison Person on the same day.
12. Act without delay.

Do Not

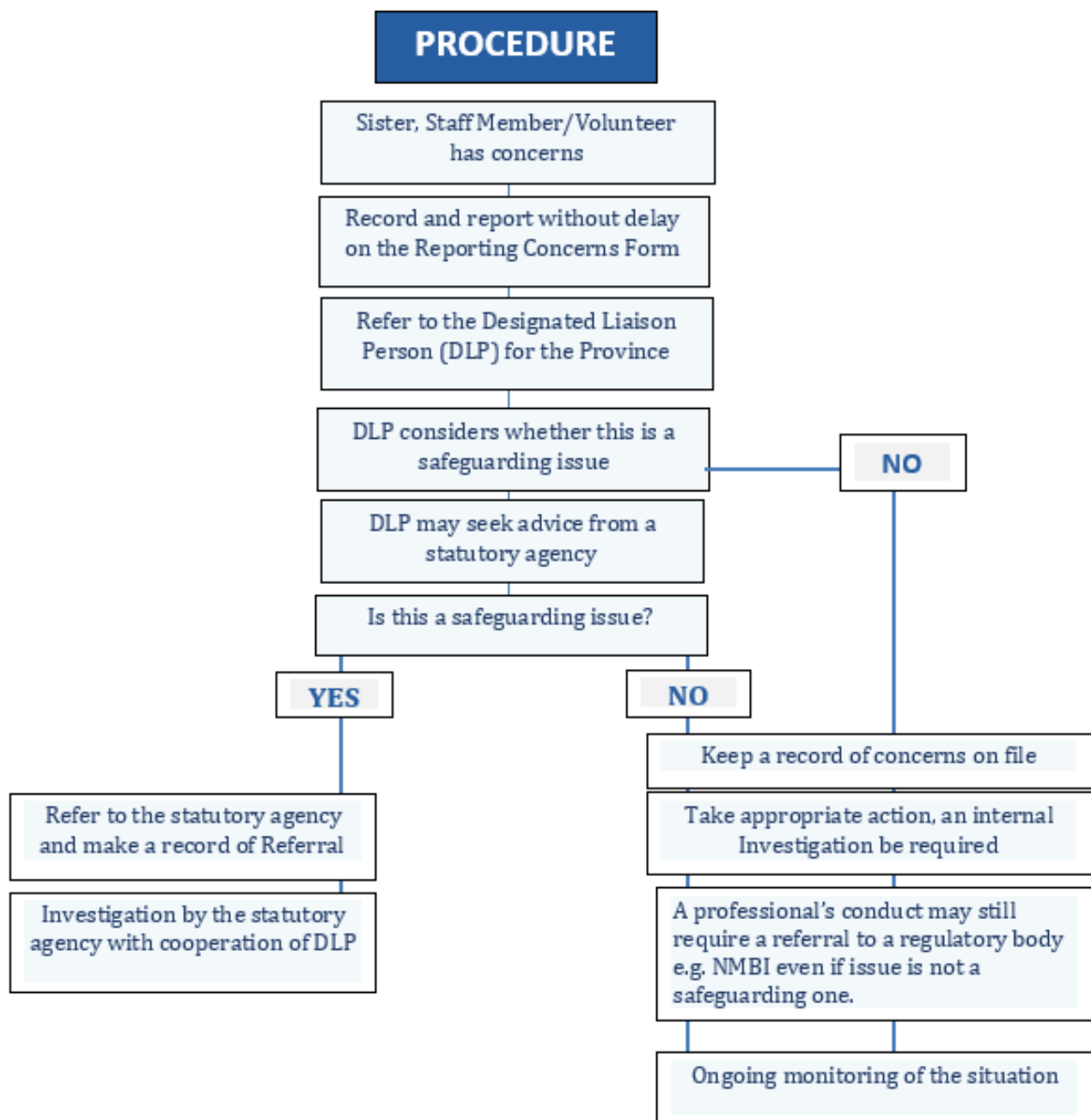
1. Stop someone disclosing to you
2. Appear shocked or display negative emotions
3. Promise to keep secrets
4. Press the person for more details or make them repeat the story
5. Make judgements
6. Give sweeping reassurances
7. Gossip about the disclosure or pass any information about this to anyone who does not have a legitimate need to know
8. Contact the alleged abuser
9. Attempt to investigate yourself
10. Leave details of your concern on a voice mail or by email
11. Delay in reporting the matter.

All parties should be informed that they are entitled to seek legal advice and professional support.

SEEK BASIC INFORMATION FROM THE VULNERABLE PERSON

There may need to be some initial conversation with the Vulnerable Person who has disclosed information to you in order to ensure his/her safety. For example if a Sister, employee or volunteer notices a bruise on a Vulnerable Person's arm it would be appropriate to ask "I see you have a bruise on your arm. How did that happen?" **Sisters, Employees 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

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



RESPONSE TO ALLEGATIONS

The response from the Sisters of Mercy to any allegations against any members 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 Person and secondly to the Sister, Employee or Volunteer in question. (E.g. Police, Health Authority)

Responses will include the following:

1. Initially details of the incident will be recorded by the Designated Liaison Person (DLP) who will inform the Provincial Leader.
2. The Designated Liaison Person 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 statutory authorities.
3. The Designated Liaison Person 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.
4. The Designated Liaison Person will consult with the statutory authorities to ensure that any subsequent action does not prejudice their investigation. In all cases, the investigation by the statutory precedes any action which will be undertaken by the Province.
5. Following consultation, and if agreed with the statutory authorities, the Sister, employee, volunteer will be informed by the Designated Liaison Person, that an allegation has been made against her. The Designated Liaison Person will refer to the relevant person in the appropriate department, who will decide on the most appropriate way forward. It may be necessary to take protective measures which may include suspending the employee or other disciplinary measure in accordance with Employee Policy. 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.
6. Where the concerns or allegations relate to possible abuse by an employee 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.
7. If the concerns or allegations relate to a Sister of Mercy, the Provincial Leader will require the Sister to stand aside from ministry to allow the investigation to proceed. On conclusion of the investigation by the statutory authorities, the Provincial Leader may forward the case file to the Congregational leader to be reviewed in accordance with Canon Law.
8. A written record of meetings and consultations will be compiled by the Designated Liaison Person and a confidential case file will be opened and stored securely in Provincial office.

OUTCOMES

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

ALLEGATION OF HARM/RISK OF HARM SUBSTANTIATED – INDIVIDUAL REMOVED FROM ALL CONTACT WITH VULNERABLE PERSONS

The investigation finds that the allegation of harm/risk of harm is substantiated and the individual is removed from all relevant ministries. In these circumstances, Provincial and Congregational Leaderships must comply with the local statutory safeguarding procedures.

ALLEGATION OF HARM/RISK OF HARM SUBSTANTIATED – INDIVIDUAL REINSTATED TO REGULATED CONTACT WITH VULNERABLE PERSONS

The investigation finds that the allegation is substantiated but the circumstances of the case are such that the individual can be reinstated to the regulated contact with Vulnerable Persons. Where necessary, the individual is subject to appropriate disciplinary sanctions. Training/retraining is undertaken and support or supervision arrangements are put in place. Relevant professional bodies may need to be informed.

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 Person. 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. Relevant Professional Regulatory bodies may also need to be informed depending on the seriousness of the conduct concerned.

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 Person. The individual may be reinstated and provided with support as appropriate. This outcome does not exclude an assessment that lessons may be learned and that, for example, care issues need to be addressed within the normal management arrangements.

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

In some jurisdictions mandatory reporting is a legal requirement. Where that is the case there must be compliance with the law. It is a legal requirement in some jurisdictions, including Ireland, for any person who knows or believes that a serious offence has been committed, including offences relating to Rape, Sexual Assault and False Imprisonment, to report this to the police. The Congregational Whistleblowing Policy provides guidance on mandatory reporting.

SECTION 5

STANDARD 5

Assessing and Managing Risks with Regard to Safeguarding Vulnerable Persons.

The primary aim of the Safeguarding Vulnerable Persons Policy is to manage the risk of abuse to Vulnerable Persons, by establishing a culture in which the rights of Vulnerable Persons are fully respected. This involves 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.

This Policy has the potential to reduce the likelihood and impact of abuse by:

- ◇ Implementing safe recruitment and selection procedures.
- ◇ Ensuring that Sisters, employees and volunteers are properly aware of indicators of vulnerability and risk and the possible signs of abuse. They must be trained, supervised and protected to respond quickly to concerns about actual, alleged or suspected abuse.
- ◇ Ensuring that Sisters, employees and volunteers are properly inducted, trained, supported and supervised in their work with Vulnerable Persons. This will include training in acceptable behaviours, good practice, and procedures for challenging poor practice.
- ◇ Promoting a culture of inclusion, transparency and openness throughout the Provinces and within the ministries/services/activities provided.
- ◇ Ensuring that Sisters, employees and volunteers are aware of how personal data in relation to Vulnerable Persons and abuse of them should be handled.
- ◇ Having in place effective management practices supported by policies and procedures.

RECORDING

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 Persons, Sisters, Employees, 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 and recorded. It is important that accidents, incidents or near misses which involve Vulnerable Persons are reported to the Local Leader or Manager who will determine how the matter should be taken forward. An Incident Report Form, including a detailed outline of the incident/accident/near miss, should be completed on every occasion by the person making the report.

SECTION 6

STANDARD 6

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

COMPLAINTS PROCEDURE

The Sisters of Mercy encourage feedback from Vulnerable Persons, carers, advocates, Sisters, Employees and Volunteers with a view to improving the way in which activities and ministries are provided. Where carers, Vulnerable Persons or others have a complaint about how a concern of a safeguarding nature has been dealt with, they are given access to the following complaints-handling procedures.

Complaints relating to safeguarding issues should be made to the DLP, or, if it relates to her, to her deputy, or to the member of the Provincial leadership team with safeguarding responsibility.

The following sequence of measures will then be taken:

1. Letter acknowledging receipt of complaint sent to complainant within 7 days;
2. Investigation of complaint by Provincial leadership team;
3. Invitation sent to complainant to meet Provincial leader or her delegate, within 14 days of acknowledgment letter being sent;
4. Written record of this meeting, and of any decisions/solutions arising out of it, sent to complainant for comments/approval;
5. If meeting between complainant and Provincial leader or her delegate does not take place, a detailed written response to the complaint, and a proposed resolution, is sent to the complainant by the Provincial leader, within 21 days of the sending of the acknowledgment letter;
6. If complainant expresses dissatisfaction with written response the Provincial leadership invites further contact and informs the HSE;
7. The complainant is given/sent details of how to contact HSE.

These procedures will be followed to ensure that complaints are 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 relevant local provincial office.

SECTION 7

STANDARD 7

The Congregation has a clear policy on the Management of Records, Confidentiality and Sharing of Information.

CONFIDENTIALITY

Sisters, employees and volunteers should treat all information relating to concerns, allegations or suspicions around the abuse of a Vulnerable Person, as confidential. This information should only be communicated on a need-to-know basis and, in most circumstances, with the consent of the Vulnerable Person.

The obligation to protect confidentiality may be stated in three core ethical principles:

- ◇ Individuals have a fundamental right to the confidentiality and privacy of information relating 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, employees 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 Safeguarding Manager /Designated Liaison Person in local provincial offices.

SECTION 8

STANDARD 8

There is a written Code of Behaviour that outlines expected behaviour for all involved with the Congregation, including visitors.

CODE OF BEHAVIOUR

The Sisters of Mercy, Employees and Volunteers encounter Vulnerable Persons in a range of situations and locations. The Mercy Code of Behaviour sets out the expectation that Sisters, Employees, Volunteers and everyone who uses its services, 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:

1. Treat Vulnerable Persons with dignity and respect.
2. Be patient and listen.
3. Value Vulnerable Persons as individuals and adopt a person-centred approach.
4. Treat all Vulnerable Persons fairly and equally.
5. Behave in a way that builds up and maintains the trust and confidence of Vulnerable Persons.
6. Encourage Vulnerable Persons to participate and fulfil their ability and potential.
7. Promote the independence and choice of Vulnerable Persons while protecting them as far as possible from danger and harm.
8. Respect the rights of Vulnerable Persons while seeking to ensure that their behaviour does not harm themselves or other people.
9. Be accountable for the quality of their work, taking responsibility for improving and updating knowledge and skills.

Sisters, Employees and Volunteers Should:

1. Ensure that physical contact is person-centred and appropriate to the task required.
2. Understand and implement a Vulnerable Person's care plan where required to do so.
3. Provide personal care sensitively and with respect for the individual's dignity and privacy.
4. Seek to defuse a challenging situation, thereby avoiding the need to use any form of restriction.
5. Only use restriction and restraint e.g. using chair strap, where it is absolutely necessary to protect the Vulnerable Persons or others from harm.
6. Be open to and aware of diversity in the beliefs and practices of Vulnerable Persons and their families.
7. Be aware of the difficulties posed by language barriers and other communication difficulties.
8. Do not discriminate against Vulnerable Persons who have different cultural backgrounds and beliefs.
9. Use the procedures in this Policy to report any discrimination against Vulnerable Persons and their families by others.
10. Report any concerns to their Line Manager/Designated Liaison Person.
11. Maintain records of Vulnerable persons personal allowances, receipts and expenditure as appropriate.

12. Have another member of staff present if they are accessing/using the Vulnerable Person's money on his/her behalf.
13. Never derive personal gain when using the Vulnerable Person's money on his/her behalf.
14. Never borrow money from, or loan money to, a Vulnerable Person.
15. Do not accept any gifts or favours from a Vulnerable Person that could reasonably give the impression that you are providing someone with preferential treatment, or could influence your professional integrity.
16. Report suspicions of financial abuse.
17. Report any inappropriate use of images of a Vulnerable Person.
18. Report any inappropriate or dangerous behaviour on the internet that involves a Vulnerable Person.
19. Encourage Vulnerable Persons to tell someone if they encounter anything that makes them feel unsafe or threatened.

Sisters, Employees or Volunteers should avoid:

- ◇ Spending excessive amounts of time alone and away from others with Vulnerable Persons.
- ◇ Taking a Vulnerable Person to his/her home.
- ◇ Taking a Vulnerable Person alone on a car journey, when to do so would pose a risk to either one.

Sisters, Employees or Volunteers should never:

- a. Abuse, neglect, harm or place at risk of harm, Vulnerable Persons whether by omission or commission.
- b. Make inappropriate comments/jokes about, or to, a Vulnerable Person.
- c. Engage in rough physical games (including horseplay) with Vulnerable Persons.
- d. Engage in sexually provocative games or make sexually suggestive comments to Vulnerable Persons.
- e. Form inappropriate relationships with Vulnerable Persons.
- f. Gossip about personal details of Vulnerable Persons and their families.
- g. Photograph/video a Vulnerable Person even by mobile phone, without the Vulnerable Person's valid written consent.

Breaching the Code of Behaviour is a serious issue which will be investigated and may result in disciplinary action, and ultimately dismissal. In each province contact details for safeguarding personnel must be clearly stated in relevant policies.

RELATED POLICIES

Within the Congregation there are other policies which link with this Safeguarding Vulnerable Persons policy. This is a demonstration of how embedded we intend safeguarding to be within our ethos and structures and of how we intend it to inform all our procedures relating to Vulnerable Persons.

These other Policies include:

- ◇ Dignity & Respect
- ◇ Anti-bullying
- ◇ Whistleblowing
- ◇ Data-Protection
- ◇ Health & Wellbeing
- ◇ Mediation

THE STANDARDS AROUND WHICH OUR POLICY IS FORMULATED

STANDARD 1

The Congregation has a Safeguarding Vulnerable Person's (SVP) policy supported by robust procedures.

STANDARD 2

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

STANDARD 3

Effective and relevant training must be provided for all involved in the care of Vulnerable Persons in our communities.

STANDARD 4

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

STANDARD 5

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

STANDARD 6

There are clear procedures for receiving comments and suggestions, and for addressing concerns and complaints to the Congregation.

STANDARD 7

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

STANDARD 8

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

LEGAL CONTEXT

There are a number of pieces of legislation/orders/public policy guidelines relating to safeguarding and protecting Vulnerable Persons in the jurisdictions where members of the Congregation live and work. We refer here to those available to us.

REPUBLIC OF IRELAND

1. *Criminal Justice (Withholding of information on offences against Children and Vulnerable Persons) Act 2012*

Places a legal requirement on any person who knows or believes that a scheduled offence has been committed to report such information to an Garda Síochána.

2. *National Vetting Bureau (Children and Vulnerable Persons) Act, 2012-2016*

The National Vetting Bureau Act makes it mandatory for people working with Children or Vulnerable Persons to be vetted by the Garda Síochána, National Vetting Bureau.

3. *Safeguarding Vulnerable Persons at Risk of Abuse: HSE Social Care Division, 2008*

The Health Service Executive has developed an overarching policy to safeguard Vulnerable Persons from abuse

NORTHERN IRELAND

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

This defines regulated activity with children and adults. Regulated activity is work which a Barred person must not undertake.

◇ ***The Criminal Law Act (Northern Ireland) 1967***

This 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 Human Rights Act 1998 – enacted 2000***

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 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.

REPUBLIC OF SOUTH AFRICA

Older Persons Act (2006); operational since 2010.

UNITED STATES OF AMERICA

Each Catholic diocese has a policy on the safeguarding of children and vulnerable adults. These may be read on the website of the US Conference of Catholic Bishops (usccb.org)

DEFINING THE TERM VULNERABLE PERSON

NORTHERN IRELAND

“A vulnerable Person 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).

Since 2009 this definition has been further refined: in public policy references are to ‘adults at risk of harm’ and ‘adults in need of protection’ In Northern Ireland there has been a move away from the concept of ‘vulnerability’ towards establishing the concept of ‘risk of harm’ in adulthood.

REPUBLIC OF IRELAND

Criminal Justice (Withholding of information on offences against Children and Vulnerable Persons Act 2012

“Vulnerable Person” means a person (including, in so far as the offences specified at paragraph 8 of Schedule 2 are concerned, a child aged 17 years old) –

who -

- I. is suffering from a disorder of the mind, whether as a result of mental illness or dementia, or
- II. has an intellectual disability, which is of such a nature or degree as to severely restrict the capacity of the person to guard himself or herself against serious exploitation or abuse, whether physical or sexual by another person, or
- III. who is suffering from an enduring physical impairment or injury which is of such a nature or degree to severely restrict the capacity of the person to guard himself or person or to report such exploitation or abuse to the Garda Siochana or both.

WHO IS A VULNERABLE ADULT

We accept the following definition of a Vulnerable Person for the purposes of this Policy:

“A Vulnerable Person is a person who may be restricted in capacity to guard himself/herself against harm or exploitation or to report such harm or exploitation. Restriction of capacity may arise as a result of physical or intellectual impairment. Vulnerability to abuse is influenced by both context and individual circumstances. (HSE National Policy & Procedures on Safeguarding Vulnerable Persons at Risk from Abuse 2014)

The differences between this definition and those pertaining in other jurisdictions for the Congregation are set out in Appendix 3B.

UNITED STATES OF AMERICA

Defining a 'Vulnerable Person' must be inferred from Federal and State legislation on Safeguarding Children.

REPUBLIC OF SOUTH AFRICA

There is no definition of a 'vulnerable adult' as such but the following applies:

An older person in need of care and protection is one who:

- ◇ *Has his or her income, assets or old age grant taken against his or her wishes, or who suffers an economic abuse;*
- ◇ *Has been removed from his/her property against his/her wishes;*
- ◇ *Has been neglected or abandoned without means of support;*
- ◇ *Abuses or is addicted to a substance and is without any support or treatment;*
- ◇ *Lives in circumstances likely to cause or be conducive to seduction, abduction or sexual exploitation;*
- ◇ *Lives in, or is exposed to, circumstances which may harm that older person physically or mentally;*
- ◇ *Is in a state of physical, mental or social neglect.*

DEFINITIONS OF ABUSE OF A VULNERABLE PERSON

REPUBLIC OF IRELAND AND NORTHERN IRELAND

In both jurisdictions the following description/definition of abuse are taken from Irish/British public and ecclesiastical policy statements. They can never be comprehensive. They are broadly in line with definitions current in the Republic of Ireland and Northern Ireland.

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 Person 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 Persons, (DHSS 1996)

UNITED STATES OF AMERICA

No common definition appears to have been accepted across states or Catholic dioceses. Diocesan websites provide a wealth of information on the protection of children and young people from various types of exploitation.

REPUBLIC OF SOUTH AFRICA

A definition of abuse is implicit in the description of a person needing protection given above.

ROLE OF DESIGNATED LIAISON PERSON

Each Provincial/Provincial Leadership Team must appoint 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 Vulnerable Persons. 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 Person, she will act promptly and in accordance with agreed procedures. She 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. She should make every effort to obtain the consent of the vulnerable person, if possible, and 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 person that s/he was harmed or abused
- ◇ An account by a person who saw the vulnerable person 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 person is suffering from emotional or physical neglect.

The Sisters of Mercy recognise that the welfare of the vulnerable person 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 with the Provincial Leader, and if necessary, the relevant statutory agencies;
- ◇ Where a discussion has taken place and it is decided that a referral should not be made to a statutory agency, 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 Person is being harmed and protective action is required.
- ◇ In situations where advice of the statutory agency was sought and where they consider the concern to be of a safeguarding nature a formal written referral will always be made by the Designated Liaison Person.
- ◇ The Designated Liaison Person will be available as required to assist the investigation undertaken by the statutory and law enforcement agencies.

PLEASE ANSWER ALL RELEVANT QUESTIONS AS FULLY AS YOU CAN

Work location:	
Name of Vulnerable Person:	
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 Person make the disclosure to?
What did the Vulnerable Person actually say?

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

Has the Vulnerable Person 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 PERSON

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 PERSON EXPRESSED ANY RESERVATIONS ABOUT YOU TALKING TO THE LINE MANAGER OR NOMINATED MANAGER ABOUT THE MATTER?

**6 DOES THE VULNERABLE PERSON 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: _____