



UNMASKED MENTAL HEALTH ("the Charity")

Safeguarding Policy

Introduction

The Charity has a zero-tolerance approach to abuse, and is committed to providing a safe environment in which individuals can seek support, knowing they will be treated with dignity and respect, and are safeguarded from harm, whether they are accessing the counselling service, talking therapy groups, or activity groups.

This Safeguarding Policy outlines the principles, procedures, and responsibilities that ensure the welfare of vulnerable adults is maintained in all aspects of our service delivery.

Purpose

The purpose of this policy is to:

- safeguard vulnerable adults from abuse, neglect, or exploitation;
- establish clear procedures for responding to safeguarding concerns or allegations;
- ensure that all employees, volunteers, clients, trustees, contractors and other third parties understand their responsibilities in relation to safeguarding;
- promote a culture of respect, understanding, and inclusion for all individuals accessing the Charity's services.

Scope

This policy applies to all employees, volunteers, trustees, contractors, and third parties working on behalf of the Charity, and clients accessing the Charity's services. The policy covers all services provided by the Charity, including, but not limited to:

- one-to-one counselling sessions;
- talking therapy groups;
- activity groups.

Definition of Vulnerable Adults

A vulnerable adult is any person aged 18 or over who has care and support needs who may be experiencing or at risk of harm or exploitation and they are unable to protect themselves or report the abuse.

Safeguarding Principles

The Charity is guided by the following principles:

- **Empowerment:** to empower vulnerable adults to make their own decisions and give informed consent, wherever possible, while providing support where needed;

- **Prevention:** to take proactive steps to prevent harm, including robust recruitment processes, ongoing staff training, and creating a safe environment;
- **Protection:** to ensure clear and effective procedures are in place to respond to safeguarding concerns;
- **Partnership:** to work collaboratively with other agencies, such as local authorities, healthcare professionals, and safeguarding bodies, to promote the safety and well-being of vulnerable adults;
- **Accountability:** to hold all individuals within scope accountable for safeguarding practices and ensure compliance with relevant safeguarding legislation.

There are six main elements to this policy:

- ensuring the Charity practices safe recruitment in checking the suitability of staff and volunteers during their work with those considered vulnerable adults;
- raising awareness of ways in which the Charity can work to keep clients/service users safe alongside equipping them with the appropriate skills needed to keep themselves safe;
- developing and implementing procedures for identifying and reporting any safeguarding concerns;
- supporting clients to access the appropriate therapeutic intervention through regular reviews so the counselling service feels they are working within their limits and competence. Resulting in knowing our limits and who, when and why to seek support or refer;
- establishing a safe environment in which clients can access services to assist in their growth and achieve their aims, such as signposting, community groups or hubs (ensuring not recommending or endorsing any above another);
- ensure knowledge relating to mental capacity, confidentiality, information sharing, agreements and consent are embedded in practice

The Charity will seek to keep its clients/service users safe by:

- valuing, listening to and respecting them;
- appointing a nominated Safeguarding Lead and a Deputy;
- adopting safeguarding best practices through our policies, procedures and code of conduct for staff and volunteers;
- providing effective management for staff and volunteers through supervision, support, training and quality assurance measures so that all staff and volunteers know about and follow our policies, procedures and behaviour codes confidently and competently;
- recruiting and selecting staff and volunteers safely, ensuring all necessary checks are made, including DBS checks which are renewed every 3 years;
- recording and storing and using information professionally and securely, in line with data protection legislation and guidance;
- sharing information about safeguarding and good practice with clients via leaflets, posters and discussions where appropriate;
- making sure that clients/service users know where to go for help if they have a concern;
- using our safeguarding procedures to share concerns and relevant information with agencies who need to know;
- using our procedures to manage any allegations against staff and volunteers appropriately;
- creating and maintaining an anti-bullying environment and ensuring that we have a policy and procedure to help us deal effectively with any bullying that does arise;

- ensuring that we have effective complaints and whistleblowing measures in place;
- ensuring that we provide a safe physical environment for our clients/service users, staff and volunteers, by applying health and safety measures in accordance with the law and regulatory guidance;
- building a safeguarding culture where staff and volunteers, treat each other with respect and are comfortable about sharing concerns.

The Charity recognises that because of the nature of the therapeutic intervention it offers, staff and those within the counselling service are well placed to observe signs of abuse or neglect relating to clients/service users.

The Charity aims to:

- **Empower** - Establish and maintain an environment where clients/service users feel safe, secure, informed and listened to. Working with them at all stages to achieve the outcomes they choose;
- **Protect** - Ensure provision of information on recognising signs of abuse and/or neglect are available and staff working within the Charity whom clients/service users can approach if they have concerns about themselves or another person. Responding immediately to those concerns through awareness of the safeguarding procedure.
- **Prevent** – Being proactive in stopping safeguarding concerns from developing and working to support vulnerable adults when it does. This is achieved through the provision of adult safeguarding training (Level 2) for staff and volunteers as compulsory during their time at the Charity;;
- **Proportionality** –Firstly making use of preventative measures and secondly, through responding to a safeguarding concern in a way that is proportionate to the risk involved and takes into account the impact to quality of life and dignity of the person/s concerned. Responding to the specific circumstance and adapting to fulfil the wishes of those concerned within the boundaries provided in the safeguarding procedure.
- **Partnership** –The Charity maintaining partnerships with local and national agencies and the development of procedures that help prevent, detect and report suspected cases of abuse and/or neglect that reflect these partnerships. Sharing good practice but not sensitive information (DPA 2018) and only sharing on a strict ‘need to know’ basis.
- **Accountability** –Being transparent and taking responsibility for practices relating to safeguarding used to support any vulnerable adult. Keeping all concerned informed at all times about changes, decisions or outcomes. Who and how each person is involved and how to get in touch with the named person. Knowing the safeguarding ‘traffic light’ and keeping that person safe.

Forms of Abuse

- **Physical abuse** includes hitting, slapping, pushing, kicking, squeezing, shaking, pinching, misuse of any medication, undue restraint or force feeding;
- **Sexual abuse** includes sexual assault, rape or other sexual acts, the inappropriate touching of the individual or coercion into the viewing of pornographic materials;
- **Psychological Abuse** includes threats of harm, abandonment or withdrawal of social contact, humiliation, shouting, bullying, name calling, intimidation, harassment, or the denial or withdrawal from required services, contacts and social family networks;

- **Financial or Material Abuse** include the failure to access appropriate services for recognised needs, avoidance of required health care, ignoring physical care needs, withholding of adequate nutrition, clothing or warmth, exposing the person to unacceptable risk, omitting to provide or ensure adequate supervision;
- **Discriminatory Abuse** includes any acts that use hurtful language, cause harassment or similar treatment of the individual because of their race, sex, age, disability, faith, culture, sexual orientation etc;
- **Institutional Abuse** includes the use of systems, routines practice or care that neglect individual needs and create an imbalance and control within a managed setting such as residential/nursing care or day services;
- **Abuse of Civil Rights** includes the denial of, or coercive influence on, an individual's rights to be registered and to vote, the right to be treated as an equal with dignity and respect, the right of freedom of speech or movement.

This is not an exhaustive list of examples, but merely a guide to the most regular forms of abuse.

How abuse may come to light:

- a person discloses abuse and/or neglect;
- a person witnesses an event of abuse and/or neglect occurring;
- becoming aware of changes to behaviour;
- noticing physical signs of abuse and/or neglect.

Signs of Abuse

Indicators are the main signs and symptoms, which suggest that some form of abuse may have occurred, but caution is advised against suggesting adult abuse merely due to the presence of one or more of these indicators without further detailed assessment/investigation. Typically, an abusive situation will involve indicators from a number of groups in combination.

Possible signs include:

- **Physical abuse** – history of unexplained falls or minor injuries, unexplained bruising or burns, unexplained fractures or lacerations, weight loss, untreated medical problems;
- **Sexual abuse** – withdrawal, pain or itching, bruising or bleeding in the rectal or genital area, bruising to thighs or upper arms, difficulty in walking or sitting, self-inflicted injury;
- **Psychological abuse** – fearfulness expressed in the eyes, inability to sleep or prolonged periods in bed, change in appetite, tearfulness, unexplained paranoia, low self-esteem, excessive fears, anxiety, agitation;
- **Financial abuse** – lacking belongings or services, unexplained or sudden inability to pay bills, lack of receptiveness to any assistance requiring expenditure;
- **Discriminatory abuse** – receiving hate mail, receiving criminal damage to property, tendency to withdrawal and isolation, fearfulness and anxiety, loss of self-esteem, expressions of anger and frustration;
- **Institutional abuse** – enforced schedule of activities, limiting of social freedom, lack of adequate clothing, poor personal hygiene, low quality diet;
- **Abuse of civil rights** - tendency to withdrawal and isolation, fearfulness and anxiety, loss of self-esteem, expressions of anger and frustration.

This is not an exhaustive list of examples, but merely a guide to the most regular signs of abuse.

Safeguarding Procedure

The purpose of this procedure is to provide a clear and direct structure for if/when a situation arises that gives cause for concern for the safety of self or others.

Follow the 4 R's:

- **Recognise** – Recognise that you have a concern, or someone has made a disclosure to you;
- **Respond** – Reassure the individual, ask what they would like to happen and let them know what action you will take;
- **Refer** – Pass the concerns on to a member of the Safeguarding Team. (amber/red – inform the client/service user of the need to invite a member of the Safeguarding Team into the session for both the support for self and the client, to follow procedure when a concern has been raised and measure risk;
- **Record** – what you have seen, heard, or been told – ensure you record these as soon as possible, remain objective:
 - Minor, not immediate threat, danger or risk – (GREEN)
 - ensure clear objective notes are recorded and discuss further at supervision.
 - you are unsure if the potential level of threat, danger or risk is mild or moderate – (AMBER)
 - gain consent from your client/service user (where possible) to consult with a Safeguarding Lead and/or contact your supervisor as soon as you are able, to agree necessary measures to support the client/service user;
 - the sharing of this information is on a strict 'need to know' basis and only share what is necessary (refer to flowchart);
 - should the client not consent then again refer to the agreement in that "although every effort will be made to obtain your consent where possible, it must be recognised that there are occasions where this may not be possible";
 - it is best practice to work with the client/service user towards an agreed outcome but not when doing so would increase the potential threat, danger or risk to self or others.
 - the threat, danger or risk is serious and/or immediate – (RED)
 - inform management and/or Safeguarding Lead/Deputy who will then take the necessary next steps to ensure the client's/service user's safety.

A report will be made for both amber and red concerns raised, next steps will be decided, an investigation may be required, and the outcome of the investigation recorded. You should:

- never promise confidentiality – you will have to break it and with it that persons trust in you and explain what may happen as a result of disclosure;
- listen carefully and stay calm – you need to listen without making assumptions or judgements;
- question normally and without pressure and only to understand what you have heard. Never ask leading questions or put words in the person's mouth;
- ask who, when, where and what happened but not why;
- repeat, to check your understanding of the situation;

- find out what they want to happen next but inform them you may have to go against their wishes (e.g. if they ask you not to disclose to anyone else);
- report (if necessary) – inform the person/client that you must pass the information on, but only those that need to know about it will be told. Inform them of who you will report the matter to. Should the concern be amber/red then a member of the Safeguarding Team should be invited to join the session;
- if appropriate further advice will be sought and/or a referral made.

Do not be alone with a safeguarding concern, there is always someone to go to at all times.

Associated Policies and Procedures

- Safe Recruitment / Disclosure and Barring procedure
- Health and Safety Policy
- GDPR and Privacy Policy
- Confidentiality Policy
- Equality, Diversity and Inclusion Policy
- Disciplinary and Grievance Policy and Procedure

This policy has been created with guidance given in the BACP GPiA resources:

- 030 Safeguarding vulnerable adults within the counselling professions in England and Wales
- 042 Working with suicidal clients in the counselling professions, and
- 057 Suicide within the work of the counselling professions in England and Wales and
- The Care Act (2014)
- Mental Capacity Act (2005)
- DPA Act (2018)

Contact Details

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Date last updated	Role	Name	Review Date
5 th September 2023	Chief Executive Officer	Mel Stead	5 th September 2024
10 th June 2024	Operations Director	Jo Core	10 th June 2025
19 th May 2025	Trustee	Helen Naylor	19 th May 2026
13 th April 2026	Trustee	Helen Naylor	13 th April 2027