

# Vitruvian Dental Studio

## Safeguarding Adults Policy

### Aims

The practice team is committed to:

- following the guidelines set out in ‘Safeguarding in general dental practice, a toolkit for dental teams’ (2019) Public Health England, which sets out the current guidance and legislation underpinning safeguarding for general dental practice teams.  
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/791681](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/791681)
- ensuring that the welfare of adults is always paramount
- maximising people’s choice, control and inclusion and protecting their human rights
- working in partnership with others in order to safeguarding adults at risk
- ensuring safe and effective working practices are in place.
- supporting staff within the organisation.

### Introduction

This policy sets out the roles and responsibilities of the dental team at Vitruvian Dental Studio working together with other professionals and agencies in promoting adult’s welfare and safeguarding them from abuse and neglect.

This policy is intended to support staff working within the practice. Policies linked with this will include:

- whistle blowing
- complaints
- information sharing
- safeguarding children
- disciplinary, equality and diversity

### Scope

This policy applies to all staff (permanent, seconded or temporary) of my practice as well as all people who work on behalf of the Practice.

### Definitions

An adult at risk is defined as:

- any person aged 18 or over
- who is or may be in need of community care services by reason of mental or other disability age or illness
- and who is or maybe unable to take care of him or herself or unable to protect him or herself against significant harm or serious exploitation.

### Types of abuse

Abuse can take many forms, and incidents of abuse may be one-off or multiple, and affect one person or more. Abuse may also be very subtle and therefore we draw your attention to the following types of abuse which you may come across. Professionals and others should look beyond single incidents or individuals to identify patterns of harm. This list is not exhaustive, and we therefore encourage Volunteers to be alert and take the initiative to spot these forms of abuse as well as other forms that might occur:

**1. Physical abuse:** including hitting, slapping, scratching, pushing, rough handling, kicking, misuse of medication, restraint without justifiable reasons, inappropriate sanctions including deprivation of food, warmth, clothing and health care needs.

**2. Sexual abuse:** including rape, indecent exposure, sexual harassment, inappropriate looking or touching, unwanted sexual text messages, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into and sexual coercion,

**3. Emotional or Psychological abuse:** including threats of harm or abandonment, deprivation of contact, humiliation, ridicule, blaming, controlling, intimidation, coercion, unwanted communication, stalking, harassment, inappropriate messaging; with kisses attached, verbal abuse and cyber bullying, isolation or unreasonable and unjustified withdrawal from services or supportive networks. Deliberate denial of religious or cultural needs and failure to provide access to appropriate skills and educational development.

**4. Domestic violence:** including psychological, physical, sexual, financial, emotional abuse; so, called 'honour' based violence. And can affect those it is not aimed at within the home.

**5. Financial or material abuse:** including misuse or theft of money, fraud, extortion of material assets or inappropriate requests for money, pressure in connection with wills, property or inheritance of financial transactions, or the misuse or misappropriation of property, possessions or benefits.

**6. Neglect and acts of omission:** including ignoring medical or physical care needs, failure to provide access to appropriate health, social care and support or educational services or equipment for functional independence, the withholding of the necessities of life, such as medication, adequate nutrition, heating and lighting. Failure to give privacy and dignity.

**7. Modern slavery:** encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.

**8. Discriminatory abuse:** including forms of harassment, slurs or similar treatment; because of race, colour, language, gender and gender identity, age, disability, sexual orientation or religion. Hate crime

**9 Organisational abuse:** including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

**10. Self-Neglect:** this covers a wide range of behaviour, neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding. Safeguarding within the Affiliated Group

**11. Use of Social Media in an abusive way:** abuse can also occur through social media and this is often harder to detect. It is important to remember that the type of abuse that can occur through social media does not always include emotional and psychological abuse and can include sexual and financial abuse. Social media includes (but is not limited to): networking sites such as Facebook, Twitter and LinkedIn, email, text messages, Skype and instant messaging services.

Thus, all adults who meet the above criteria may be defined as adults at risk.

### **Responsibilities of the Dental Practice**

- To take action to identify and prevent abuse from happening.
- Respond appropriately when abuse has or is suspected to have occurred.
- Ensure that the agreed safeguarding adult's procedures are followed at all times.
- Provide support, advice and resources to staff in responding to safeguarding adult issues.
- Inform staff of any local or national issues relating to safeguarding adults.
- Ensure staff are aware of their responsibilities to attend training and to support staff in accessing these events.

- Ensuring that the organisation has a dedicated staff member with an expertise in safeguarding adults.
- Ensuring staff have access to appropriate consultation and supervision regarding safeguarding adults.
- Understand how diversity, beliefs and values of people who use services may influence the identification, prevention and response to safeguarding concerns.
- Ensure that information is available for people that use services, family members setting out what to do if they have a concern
- Ensure that all employees who come in contact with adults at risk have a DBS check in line with the requirements of the Independent Safeguarding Authority Vetting and Barring Scheme.

### **Responsibilities of all staff**

- Follow the safeguarding policies and procedures at all times, particularly if concerns arise about the safety or welfare of an adult at risk.
- Participate in safeguarding adults training and maintain current working knowledge.
- Become familiar with the Safeguarding Adults Guidelines.
- Discuss any concerns about the welfare of an adult at risk with their line manager.
- Contribute to actions required including information sharing and attending meetings.
- Work collaboratively with other agencies to safeguarding and protect the welfare of people who use services.
- Always remain alert to the possibility of abuse.
- Recognise the impact that diversity, beliefs and values of people who use services can have.

### **Reporting Abuse**

1. If staff suspect a vulnerable person is being abused or is at risk of abuse, they are expected to report concerns to a line manager (unless they suspect that the line manager is implicated –in such circumstances the whistle blowing policy should be followed).
2. If at any time staff feel the person needs urgent medical assistance, they have a duty to call for an ambulance or arrange for a doctor to see the person at the earliest opportunity.
3. If at the time staff have reason to believe the vulnerable person is in immediate and serious risk of harm or that a crime has been committed the police must be called.
4. An incident reporting/significant events form is to be completed to log and report any safeguarding concerns or issues. This is found in the 'Complaints & Significant Events' folder.

All service users need to be safe. Throughout the process the service users need remain paramount. This process is about protecting the adult and prevention of abuse.

It is important that consideration be given to a co-ordinated approach and partnership working, where it is identified that both the alleged abuser and alleged victim are service users. Where both parties are receiving a service, staff should discuss cases and work together, however meetings with both the alleged abuser and alleged victim in attendance, are not considered appropriate.

The adult's safeguarding local contact details for Vitruvian Dental Studio are:

<https://leedssafeguardingadults.org.uk/>

The adults safeguarding lead for Vitruvian Dental Studio is: James Nolan

### **Allegation of abuse by a staff member**

Employees should be aware that abuse is a serious matter that can lead to a criminal conviction. Where applicable the organisations disciplinary policy should be implemented.

### **Confidentiality and information sharing**

It is important to identify an abusive situation as early as possible so that the individual can be protected. Withholding information may lead to abuse not being dealt with in a timely manner.

Confidentiality must never be confused with secrecy. Staff have a duty to share information relating to suspected abuse with Social Care. Consent is not required to breach confidentiality (capacity issues must be considered) and make a safeguarding referral where;

- A serious crime has been committed
- Where the alleged perpetrator may go on to abuse other adults
- Other adults at risk are at risk in some way
- The adult at risk is deemed to be in serious risk
- The public interest overrides the interest of the individual
- When a member of staff of a statutory service, a private or voluntary service or a volunteer is the person accused of abuse, malpractice or poor professional standards.

If a worker has any doubt about the legality of sharing information, they must in the first instance consult the head of the compliance department.

### **Monitoring**

This policy will be reviewed annually.

Approved By: James Nolan

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