**AURIS MICROSUCTION EAR WAX REMOVAL**

**Safeguarding Adults Policy**

**27/11/2021**

*Policy Owner: Kay Lewis*

*Policy approved by: NA as sole trader*

*Date Policy approved: as above*

*Next review Date: 27/11/2022*

**Introduction**

Kay Lewis is a Registered Nurse with over forty years of experience, is Registered with the Nursing midwifery council NMC and Royal college of Nursing RCN. Kay has been trained in the procedure of microsuction ear wax removal, by the Rotherham Ear Care service.

Kay has extensive qualifications in minor illness, physiology and physical examination, diabetes, respiratory health and chronic disease.

Ear wax removal is no longer available at GP surgeries, however the Welsh Assembly Government have issued a statement, that the service the service will be resumed, run by audiology and will be made available in primary care.

https://gov.wales/ear-wax-management-primary-and-community-care-pathway-html

In the meantime, Kay has set up a small independent ear wax removal service: AURIS MICROSUCTION providing a safe method of clearing blocked ears.  
  
AURIS MICROSUCTION is committed to Safeguarding Adults in line with national legislation and relevant national and local guidelines.   
  
We will safeguard adults by ensuring that procedures are delivered in a way which keeps all adults safe.

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

## **Policy Statement**

AURIS MICROSUCTION believes everyone has the right to live free from abuse or neglect regardless of age, ability or disability, sex, race, religion, ethnic origin, sexual orientation, marital or gender status.

AURIS MICROSUCTION committed to creating and maintaining a safe and positive environment and an open, listening culture where people feel able to share concerns without fear of retribution.  
  
AURIS MICROSUCTION acknowledges that safeguarding is everybody’s responsibility and is committed to prevent abuse and neglect through safeguarding the welfare of all adults involved.   
  
AURIS MICROSUCTION recognises that health, well-being, ability, disability and need for care and support can affect a person’s resilience. We recognise that some people experience barriers, for example, to communication in raising concerns or seeking help. We recognise that these factors can vary at different points in people’s lives.   
  
Actions taken by AURIS MICROSUCTION will be consistent with the principles of adult safeguarding ensuring that any action taken is prompt, proportionate and that it includes and respects the voice of the adult concerned.

**Purpose**

The purpose of this policy is to demonstrate the commitment of AURIS MICROSUCTION to safeguarding adults and to ensure that everyone involved in AURIS MICROSUCTION is aware of:

* The legislation, policy and procedures for safeguarding adults.
* Their role and responsibility for safeguarding adults.
* What to do or who to speak to if they have a concern relating to the welfare or wellbeing of an adult within the organisation.

**Scope**

This safeguarding adult policy and associated procedures apply to all individuals involved in AURIS MICROSUCTION and to all concerns about the safety of adults whilst at clinic appointments and domiciliary visits

**Commitments**

In order to implement this policy AURIS MICROSUCTION will ensure that:

* Everyone involved with AURIS MICROSUCTION is aware of the safeguarding adult procedures and knows what to do and who to contact if they have a concern relating to the welfare or wellbeing of an adult.
* Any concern that an adult is not safe is taken seriously, responded to promptly, and   
  followed up in line with AURIS MICROSUCTION Safeguarding Adults Policy and Procedures.
* The well-being of those at risk of harm will be put first and the adult actively supported to communicate their views and the outcomes they want to achieve. Those views and wishes will be respected and supported unless there are overriding reasons not to (see the Safeguarding Adults Procedures).
* Any actions taken will respect the rights and dignity of all those involved and be proportionate to the risk of harm.
* Confidential, detailed and accurate records of all safeguarding concerns are maintained and securely stored.

AURIS MICROSUCTION acts in accordance with best practice advice, from NMC, RCN and the Rotherham ear care guidelines.

* AURIS MICROSUCTION will cooperate with the Police and the relevant Local Authorities in taking action to safeguard an adult.
* AURIS MICROSUCTION is run solely by Kay Lewis who is up to date in all aspects of safeguarding training which is mandatory for her role as a registered nurse.
* AURIS MICROSUCTION shares information about anyone found to be a risk to adults with the appropriate bodies. For example: Disclosure and Barring Service, Services, Police, Local Authority/Social Services.
* When planning a clinic or domiciliary visit AURIS MICROSUCTION includes an assessment of, and risk to, the safety of all adults from abuse and neglect, Kay Lewis as a sole trader takes full responsibility for this role.
* This policy, related policies (see below) and the Safeguarding Adults Procedures are reviewed no less than on a two yearly basis and whenever there are changes in relevant legislation and/or government guidance as required by the Local Safeguarding Board, Public Health Wales , NMC and RCN or as a result of any other significant change or event.

**Implementation**

AURIS MICROSUCTION is committed to developing and maintaining its capability to implement this policy and procedures.

In order to do so the following will be in place:

* A clear line of accountability within the organisation for the safety and welfare of all adults.
* Access to relevant legal and professional advice.
* Safeguarding adult procedures that deal effectively with any concerns of abuse or neglect, including those caused through poor practice.
* A Safeguarding Lead/ Welfare Officer (see Appendix 1).
* Arrangements to work effectively with other relevant organisations to safeguard and promote the welfare of adults, including arrangements for sharing information.
* Codes of conduct for relevant individuals that specify zero tolerance of abuse in any form.
* Risk assessments that specifically include safeguarding of adults.
* Policies and procedures that address the following areas and which are consistent with this Safeguarding Adults policy.  
  + Safeguarding Children and adults.
  + Social Media
  + Equality, diversity and inclusion
  + Concerns, Complaints and Compliments
  + Information policy, data protection and information sharing

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SUPPORTING INFORMATION

**Key Points**

* There is a **legal duty on Local Authorities** to provide support to ‘adults at risk’.
* **Adults at risk** are defined in legislation and the criteria applied differs between each home nation.
* The safeguarding legislation applies **to all forms of abuse** that harm a person’s well-being.
* The law provides a framework for good practice in safeguarding that makes the overall **well-being** of the adult at risk a priority of any intervention.
* The law in all four home nations emphasises the importance of **person-centred safeguarding,** (referred to as **‘Making Safeguarding Personal’** in England).
* The law provides a framework for making decisions on behalf of adults who can’t make decisions for themselves (**Mental Capacity**).
* The law provides a framework for organisations to **share concerns** they have about adults at risk with the local authority.
* The law provides a framework for all organisations to **share information and cooperate** to protect adults at risk.

**Safeguarding Adults Legislation**

Safeguarding Adults in all home nations is compliant with United Nations directives on the rights of disabled people and commitments to the rights of older people. It is covered by:

* The Human Rights Act 1998
* The Data Protection Act 2018
* General Data Protection Regulations 2018

The practices and procedures within this policy are based on the relevant legislation and government guidance.

* England - The Care Act 2014  
  Care and Support Statutory Guidance (especially chapter 14) 2014
* Wales - Social Services and Well Being Act 2014  
  Wales Safeguarding Procedures 2019
* Scotland - Adult Support and Protection Act 2007  
  Adult Support and Protection (Scotland) Act 2007 Code of Practice 2014
* Northern Ireland - Adult Safeguarding Prevention and Protection in Partnership 2015

Many other pieces of UK and home nation legislation also affect adult safeguarding.   
These include legislation about different forms of abuse and those that govern information sharing. For example, legislation dealing with:

* Murder/attempted murder
* Physical Assault
* Sexual Offences
* Domestic Abuse/Coercive control
* Forced Marriage
* Female Genital Mutilation
* Theft and Fraud
* Modern slavery and Human exploitation
* Hate crime
* Harassment
* Listing and Barring of those unsuitable to work with adults with care and support needs

Each home nation also has legislation about the circumstances in which decisions can be made on behalf of an adult who is unable to make decisions for themselves:

* England and Wales - Mental Capacity Act 2005
* Scotland - Adults with Incapacity Act 2000
* Mental Capacity (Northern Ireland) 2016
* There are specific offences applying to the mistreatment of and sexual offences against adults who do not have Mental Capacity and specific offences where mistreatment is carried out by a person who is employed as a carer: e.g. wilful neglect and wilful mistreatment.

## **Definition of an Adult at Risk**

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The Safeguarding Adults legislation creates specific responsibilities on Local Authorities, Health, and the Police to provide additional protection from abuse and neglect to Adults at Risk.   
  
When a Local Authority has reason to believe there is an adult at risk, they have a responsibility to find out more about the situation and decide what actions need to be taken to support the adult. In Scotland and Wales, the Local Authority can gain access to an adult to find out if they are at risk of harm for example, if that access is being blocked by another person.   
  
The actions that need to be taken might be by the Local Authority (usually social services) and/or by other agencies, for example the Police and Health. A sporting organisation may need to take action as part of safeguarding an adult, for example, to use the disciplinary procedures in relation to a member of staff or member who has been reported to be harming a participant. The Local Authority role includes having multi-agency procedures which coordinate the actions taken by different organisations.

**AN ADULT AT RISK IS:**

**Definitions of adults at risk of abuse and neglect**

All practitioners should be aware of the [definitions of abuse and neglect in the Social Services and Well-being Act (Wales) 2014](http://www.legislation.gov.uk/anaw/2014/4/pdfs/anaw_20140004_en.pdf),

as well as the[**signs and indicators of abuse and neglect**](https://safeguarding.wales/adu/ap/a1p.p2.html). This is essential in order to communicate and address concerns about harm in a meaningful way.

s126(1) of the [Social Services and Well-being (Wales) Act 2014](http://www.legislation.gov.uk/anaw/2014/4/pdfs/anaw_20140004_en.pdf) defines an [adult at risk](https://safeguarding.wales/adu/a1/a1.p5.html#tooltip) as an adult who:

1. Is experiencing or is at risk of abuse or neglect,
2. Has needs for care and support (whether or not the authority is meeting any of those needs), and
3. As a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it.

It is important to note:

* the use of the term ‘at risk’ means that actual abuse or neglect does not need to occur before practitioners intervene, rather early interventions to protect an adult at risk should be considered to prevent actual abuse and neglect;
* the three conditions necessary to demonstrate an adult is at risk of abuse or neglect ensures that protection is provided to those with care and support needs who *also* require actions to secure the individual’s safety in the future because they are unable to protect themselves;
* that the abuse of adults deemed to be ‘at risk’ is often linked to their circumstances rather than the characteristics of the people experiencing harm;1
* risk of abuse or neglect may be the consequence of one concern or a result of cumulative factors.

**Abuse**

Abuse:

* can be physical, sexual, psychological, emotional or financial (includes theft, fraud, pressure about money, misuse of money)
* take place in any setting, whether in a private dwelling, an institution, or any other place.

[**Pointers for Practice: Signs and Indicators of Possible Abuse and Neglect in an Adult at Risk**](https://safeguarding.wales/adu/ap/a1p.p2.html)

**Neglect**

This describes a failure to meet a person’s basic needs physical, emotional, social or psychological needs, which is likely to result in an impairment of the person’s well-being (for example, an impairment of the person’s health).

It can take place in a range of settings, such as a private dwelling, residential or day care provision.

Practitioners should be aware that the following behaviours could place the adult at risk of abuse or neglect:

* Violence against women, domestic abuse and sexual violence (VAWDASV) this includes [Female Genital Mutilation](https://safeguarding.wales/adu/a1/a1.p5.html#tooltip)
* [Modern Slavery](https://safeguarding.wales/adu/a1/a1.p5.html#tooltip)
* [Domestic abuse and violence](https://safeguarding.wales/adu/a1/a1.p5.html#tooltip) against men
* Criminal exploitation

## It is important to note that this NOT exhaustive lists. Rather, they are provided to offer practitioners some pointers that may alert them to possible abuse or neglect in an adults.

## **Abuse and Neglect**

Abuse is a violation of an individual’s human and civil rights by another person or persons. It can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it. Any or all of the following types of abuse may be perpetrated as the result of deliberate intent, negligence, omission or ignorance.

There are different types and patterns of abuse and neglect and different circumstances in which they may take place.

Safeguarding legislation in each home nation lists categories of abuse differently however, they all include the following types of abuse:

* Physical
* Sexual
* Psychological
* Neglect
* Financial

Abuse can take place in any relationship and there are many contexts in which abuse might take place; e.g. Institutional abuse, Domestic Abuse, Forced Marriage, Human Trafficking, Modern Slavery, Sexual Exploitation, County Lines, Radicalisation, Hate Crime, Mate Crime, Cyber bullying, Scams.

Often the perpetrator is known to the adult and may be in a position of trust and/or power.

**Wellbeing Principle**The concept of ‘well-being’ is threaded throughout UK legislation and is part of the Law about how health and social care is provided. Our well-being includes our mental and physical health, our relationships, our connection with our communities and our contribution to society.  
  
Being able to live free from abuse and neglect is a key element of well-being.

The legislation recognises that statutory agencies have sometimes acted disproportionately in the past. For example, removing an adult at risk from their own home when there were other ways of preventing harm. In the words of Justice Mumby ‘*What good is it making someone safe when we merely make them miserable?’* What Price Dignity? (2010)  
  
For that reason any actions taken to safeguard an adult must take their whole well-being into account and be proportionate to the risk of harm.

**Person Centred Safeguarding/ Making Safeguarding Personal**

The legislation also recognises that adults make choices that may mean that one part of our well-being suffers at the expense of another – for example we move away from friends and family to take a better job. Similarly, adults can choose to risk their personal safety; for example, to provide care to a partner with dementia who becomes abusive when they are disorientated and anxious.   
  
None of us can make these choices for another adult. If we are supporting someone to make choices about their own safety we need to understand ‘What matters’ to them and what outcomes they want to achieve from any actions agencies take to help them to protect themselves.  
  
The concept of ‘Person Centred Safeguarding’/’Making Safeguarding Personal’ means engaging the person in a conversation about how best to respond to their situation in a way that enhances their involvement, choice and control, as well as improving their quality of life, well-being and safety. Organisations work to support adults to achieve the outcomes they want for themselves. The adult’s views, wishes, feelings and beliefs must be taken into account when decisions are made about how to support them to be safe. There may be many different ways to prevent further harm. Working with the person will mean that actions taken help them to find the solution that is right for them. Treating people with respect, enhancing their dignity and supporting their ability to make decisions also helps promote people's sense of self-worth and supports recovery from abuse.

If someone has difficulty making their views and wishes known, then they can be supported or represented by an advocate. This might be a safe family member or friend of their choice or a professional advocate (usually from a third sector

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| **Wales (Social Services and Well Being Act 2014)** |
| **The Act’s principles are:**   * **Responsibility -** Safeguarding is everyone’s responsibility. * **Well-being -** Any actions taken must safeguard the person’s well-being. * **Person-centred approach** - Understand what outcomes the adult wishes to achieve and what matters to them. * **Voice and control -** Expect people to know what is best for them andsupport them to be involved in decision making about their lives. * **Language -** Make an active offer of use of the Welsh language and use professional interpreters where other languages are needed. * **Prevention** - It is better to take action before harm occurs. |

**Mental Capacity and Decision Making**

We make many decisions every day, often without realising. UK Law assumes that all people over the age of 16 have the ability to make their own decisions, unless it has been proved that they can’t. It also gives us the right to make any decision that we need to make and gives us the right to make our own decisions even if others consider them to be unwise.

We make so many decisions that it is easy to take this ability for granted. The Law says that to make a decision we need to:

* Understand information
* Remember it for long enough
* Think about the information
* Communicate our decision

A person’s ability to do this may be affected by things such as learning disability, dementia, mental health needs, acquired brain injury and physical ill health.   
  
Most adults have the ability to make their own decisions given the right support however, some adults with care and support needs have the experience of other people making decisions about them and for them.

Some people can only make simple decisions like which colour T-shirt to wear or can only make decisions if a lot of time is spent supporting them to understand the options. If someone has a disability that means they need support to understand or make a decision this must be provided. A small number of people cannot make any decisions. Being unable to make a decision is called “lacking mental capacity”.   
  
Mental capacity refers to the ability to make a decision at the time that decision is needed. A person’s mental capacity can change. If it is safe/possible to wait until they are able to be involved in decision making or to make the decision themselves.  
  
For example:

* A person with epilepsy may not be able to make a decision following a seizure.
* Someone who is anxious may not be able to make a decision at that point.
* A person may not be able to respond as quickly if they have just taken some medication that causes fatigue.

Mental Capacity is important for safeguarding for several reasons.  
  
Not being allowed to make decisions one is capable of making is abuse. For example, a disabled adult may want to take part in an activity but their parent who is their carer won’t allow them to and will not provide the support they would need. Conversely the adult may not seem to be benefiting from an activity other people are insisting they do.  
  
Another situation is where an adult is being abused and they are scared of the consequences of going against the views of the person abusing them. It is recognised in the law as coercion and a person can be seen not to have mental capacity because they cannot make ‘free and informed decisions’.  
  
Mental Capacity must also be considered when we believe abuse or neglect might be taking place. It is important to make sure an ‘adult at risk’ has choices in the actions taken to safeguard them, including whether or not they want other people informed about what has happened, however, in some situations the adult may not have the mental capacity to understand the choice or to tell you their views.   
  
If a person who has a lot of difficulty making their own decisions is thought to be being abused or neglected you will need to refer the situation to the Local Authority, and this should result in health or social care professionals making an assessment of mental capacity and/or getting the person the support they need to make decisions.

**Recording and Information Sharing**  
  
Information about concerns of abuse includes personal data. It is therefore important to be clear as to the grounds for processing and sharing information about concerns of abuse.   
  
Processing information includes record keeping. Records relating to safeguarding concerns must be accurate and relevant. They must be stored confidentially with access only to those with a need to know.   
  
Sharing information, with the right people, is central to good practice in safeguarding adults. However, information sharing must only ever be with those with a ‘need to know’.  
This does **NOT** automatically include the persons spouse, partner, adult, child, unpaid or paid carer. Information should only be shared with family and friends and/or carers with the consent of the adult or if the adult does not have capacity to make that decision and family/ friends/ carers need to know in order to help keep the person safe.

The purpose of Data Protection legislation is not to prevent information sharing but to ensure personal information is only shared appropriately. Data protection legislation allows information sharing within an organisation. For example:

* Anyone who has a concern about harm can make a report to an appropriate person within the same organisation
* Case management meetings can take place to agree to co-ordinate actions by the organisation

There are also many situations in which it is perfectly legal to share information about adult safeguarding concerns outside the organisation. Importantly personal information can be shared with the consent of the adult concerned. However, the adult may not always want information to be shared. This may be because they fear repercussions from the person causing harm or are scared that they will lose control of their situation to statutory bodies or because they feel stupid or embarrassed. Their wishes should be respected unless there are over-riding reasons for sharing information.  
  
The circumstances when we need to share information without the adult’s consent include those where:

* it is not safe to contact the adult to gain their consent – i.e. it might put them or the person making contact at further risk.
* you believe they or someone else is at risk, including children.
* you believe the adult is being coerced or is under duress.
* it is necessary to contact the police to prevent a crime, or to report that a serious crime has been committed.
* the adult does not have mental capacity to consent to information being shared about them.
* the person causing harm has care and support needs.
* the concerns are about an adult at risk living in Wales or Northern Ireland (where there is a duty to report to the Local Authority).

When information is shared without the consent of the adult this must be explained to them, when it is safe to do so, and any further actions should still fully include them.  
  
If you are in doubt as to whether to share information seek advice e.g. seek legal advice and/or contact the Local Authority and explain the situation without giving personal details about the person at risk or the person causing harm.  
  
Any decision to share or not to share information with an external person or organisation must be recorded together with the reasons to share or not share information.

## **Appendix 1 - Example Role Description: Safeguarding Lead**

Duties and responsibilities include

* Play a lead role in developing and establishing the organisation’s approach to safeguarding adults and in maintaining and reviewing the organisation’s implementation plan for safeguarding adults in line with current legislation and best practice.
* Coordinate the dissemination of the safeguarding adult policy, procedures and resources throughout the organisation.
* Contribute to ensuring other policies and procedures are consistent with the organisation’s commitment to safeguarding adults.
* Advise on the organisation’s training needs and the development of its training strategy.
* Receive reports of and manage cases of poor practice and abuse reported to the organisation – including an appropriate recording system.
* Support the chair to co-ordinate the case management process.
* Manage liaison with, and referrals to, external agencies for example adult social-care services and the police.
* Create a central point of contact for internal and external individuals and agencies concerned about the safety of adults within the organisation.

Represent the organisation at external meetings related to safeguarding.

**Appendix 2 – Sources of Information and Support**

**Action on Elder Abuse**

A national organisation based in London. It aims to prevent the abuse of older people by raising awareness, encouraging education, promoting research and collecting and disseminating information.

[Tel: 020 8765 7000](Tel:020%208765%207000)Email: [enquiries@elderabuse.org.uk](mailto:enquiries@elderabuse.org.uk)[www.elderabuse.org.uk](http://www.elderabuse.org.uk/)

**Men’s Advice Line**

For male domestic abuse survivors

Tel: 0808 801 0327

**National LGBT+ Domestic Abuse Helpline**Tel: 0800 999 5428

**National 24Hour Freephone Domestic Abuse Helplines**

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|  | **Wales** |
|  | Llinell Gymorth Byw HebOfn/ Live free from fear helpline Tel: 0808 8010 800  Type Talk: 18001 0808 801 0800 Text: 078600 77 333 |

**Rape Crisis Federation of England and Wales**

Rape Crisis was launched in 1996 and exists to provide a range of facilities and resources to enable the continuance and development of Rape Crisis Groups throughout Wales and England.

Email: [info@rapecrisis.co.uk](mailto:info@rapecrisis.co.uk)[www.rapecrisis.co.uk](http://www.rapecrisis.co.uk/)

**Respond**

Respond provides a range of services to victims and perpetrators of sexual abuse who have learning disabilities, and training and support to those working with them.

[Tel: 020 7383 0700](tel:%20020%207383%200700) or

[0808 808 0700](tel:%200808%20808%200700) (Helpline)   
Email: [services@respond.org.uk](mailto:services@respond.org.uk)[www.respond.org.uk](http://www.respond.org.uk/)

**Stop Hate Crime**

Works to challenge all forms of Hate Crime and discrimination, based on any aspect of an individual’s identity. Stop Hate UK provides independent, confidential and accessible reporting and support for victims, witnesses and third parties.

24 hours service:

Telephone: 0800 138 1625

Web Chat: [www.stophateuk.org/talk-to-us/](http://www.stophateuk.org/talk-to-us/)

E mail: [talk@stophateuk.org](mailto:talk@stophateuk.org)

Text: 07717 989 025  
Text relay: 18001 0800 138 1625  
By post: PO Box 851, Leeds LS1 9QS

**Susy Lamplugh Trust**

The Trust is a leading authority on personal safety. Its role is to minimise the damage caused to individuals and to society by aggression in all its forms – physical, verbal and psychological.

[Tel: 020 83921839](tel:%20020%2083921839)[Fax: 020 8392 1830](http://fax:%20020%208392%201830/)Email: [info@suzylamplugh.org](mailto:info@suzylamplugh.org)[www.suzylamplugh.org](http://www.suzylamplugh.org/)

**Victim Support**

Provides practical advice and help, emotional support and reassurance to those who have suffered the effects of a crime.

Tel: 0808 168 9111

[www.victimsupport.com](http://www.victimsupport.com/)

**Women’s Aid Federation of England and Wales**

Women’s Aid is a national domestic violence charity. It also runs a domestic violence online help service.

[www.womensaid.org.uk/information-support](http://www.womensaid.org.uk/information-support/)

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