

## **Safeguarding Adults at Risk of Abuse Irish Heart Foundation Policy Statement**

### **Introduction**

The Irish Heart Foundation is fully committed to the welfare and well-being of its adult members who are affected by cardiovascular disease and to the general public whom we encounter through the delivery of patient support services and health checks.

As an organisation that supports people living with cardiovascular disease such as a stroke or a heart condition, we encounter some adults who may be at a higher risk of abuse because of their medical condition or their circumstance. (See appendix one for a definition of abuse and types of abuse.)

Due to this we take every reasonable precaution to promote the safety of adults at risk who use our services. This is considered in our policies and procedures and in the recruitment and training of our staff and volunteers.

Our IHF safeguarding policy and procedures is aligned with the HSE Safeguarding Vulnerable Persons at Risk of Abuse – National Policy and Procedures (2014).

**Note:** the HSE has replaced the term “vulnerable adult” with “adult at risk of abuse”. The Irish Heart Foundation will use the same terminology in this document.

### **Responsibility of Employees and Volunteers**

The IHF recognises the right of adults at risk of abuse to be protected from harm, treated with respect, listened to and have their views taken into consideration in matters that affect them. Management, staff and volunteers in this organisation recognise that the welfare and well-being of our members, and of the public who come to us for advice and guidance is paramount.

As an organisation that received some public funding for some services, all volunteers and staff are made aware that safeguarding adults at risk of abuse is an essential part of their duty. Staff and volunteers are alert to the fact that abuse can occur in a range of settings and, therefore, must make themselves aware of the signs of abuse and the appropriate procedures to report such concerns or allegations of abuse.

The Irish Heart Foundation is legally obligated to report all declarations and concerns of abuse towards adults at risk of abuse to the HSE National Safeguarding teams.

To ensure we meet our legal obligations and always support the welfare and wellbeing of cardiovascular patients and the public whom we encounter, we equip our staff and volunteers with training and have policies and procedures in place as follows:

- A Designated Liaison Person (DLP) and two deputies. These are staff members responsible for receiving allegations of abuse regarding service users and for leading the response to these allegations.
- A training programme which includes completion of the HSE Land Safeguarding Adults at Risk of Abuse course, and the IHF's safeguarding training module.
- A Safeguarding policy and procedures to recognise, respond to and report concerns about adults at risk of abuse.
- A confidentiality policy.
- Safe recruiting procedures which include a requirement to complete Garda vetting and supply two relevant references.
- A policy and procedure to respond to and escalate accidents and incidents.
- A policy and procedure to respond to complaints.

This document forms part of a suite of documents that are used to safeguard and promote the welfare and wellbeing of adults at risk of abuse with whom we work. These documents are listed in appendix two (supporting policies and procedure) below and are available to view on request.

### **Our work with adults at risk of abuse**

The Irish Heart Foundation works directly with adults at risk of abuse by phone, in-person, online via Zoom and WhatsApp platforms and via the Facebook social media application in the provision of the following services:

- Stroke Connect phone service.
- Heart Connect phone service.
- Nurse support line phone and email service.
- In-person and online support groups.
- In-person and online information events.
- Health checks service.

### **Safeguarding Principles**

The Irish Heart Foundation adheres to the following principles in respect of its obligations towards safeguarding adults at risk of abuse:

#### **1. Human Rights**

All persons have a fundamental right to dignity and respect. Basic human rights, including rights to participation in society, are enshrined in the Constitution and the laws of the State.

#### **2. Person Centeredness**

Person Centeredness is the principle which places the person as an individual at the heart and centre of any exchange concerning the provision or delivery of a service. It is a dynamic approach that places the person in the centre.

### 3. **Advocacy**

Advocacy assumes an important role in enabling people to know their rights and voice their concerns. The role of an advocate is to ensure that individuals have access to all the relevant and accurate information to allow them to be able to make informed choices.

### 4. **Empowerment**

This principle recognises the right of all persons to lead as independent a life as possible. Every possible support should be provided in order to realise that right. Self-directedness recognises the right of the individual to self-determination insofar as is possible, even if this entails some degree of risk. Abiding by this principle means ensuring that risks are recognised, understood and minimised as far as possible, while supporting the person to pursue their goals and preferences.

### 5. **Collaboration**

Interagency collaboration is an essential component to successful safeguarding. It can be undermined by single service focus, poor information sharing, limited understanding of roles, different organisational priorities and poor involvement of key service providers in adult safeguarding meetings.

### 6. **Confidentiality**

All adults at risk of abuse must be secure in the knowledge that all information about them is managed appropriately and that there is a clear understanding of confidentiality among all service personnel. The effective safeguarding of an adult at risk of abuse often depends on the willingness of the staff in statutory and voluntary organisations involved with vulnerable persons to share and exchange relevant information. It is, therefore, critical that there is a clear understanding of professional and legal responsibilities with regard to confidentiality and the exchange of information. All information regarding concerns or allegations of abuse or assessments of abuse of a person at risk of abuse should be shared, on 'a need to know' basis in the interests of that person, with the relevant statutory authorities and relevant professionals.

## **Risk Assessments**

The Irish Heart Foundation has carried out risk assessments of the potential for harm to an adult at risk of abuse while availing of our services.

Below is a list of the areas of risk and the procedures in place to managing and minimising these risks:

<p>Staff and volunteer lack relevant skills and competencies to meet their safeguarding responsibilities.</p>	<ul style="list-style-type: none"> <li>• Comprehensive training is provided on joining the IHF.</li> <li>• Safeguarding policy and procedures are implemented and up to date. These must be</li> </ul>
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	<p>read and sign off by all staff and volunteers working with adults at risk of abuse.</p> <ul style="list-style-type: none"> <li>• All staff and volunteers working with adults at risk of abuse are Garda vetted and vetting is renewed every 3 years.</li> <li>• Staff and volunteers supervision policies and procedures are in place.</li> <li>• Refresher training with case studies is provided annually.</li> <li>• Weekly team meetings have safeguarding as a reoccurring item on the agenda.</li> <li>• There is an appointed, trained and clearly identified designated liaison person (DLP) and one deputy.</li> </ul>
<p>Risk of harm from third parties who the Irish Heart Foundation contract to provide services, i.e. counsellors, programme facilitators and physical activity trainers.</p>	<ul style="list-style-type: none"> <li>• All third-party contractors are Garda vetted and vetting is renewed every 3 years.</li> <li>• All third-party contractors must supply details of their professional affiliation and accreditation.</li> <li>• All third-party contractors must declare they have completed training in safeguarding adults at risk of abuse.</li> <li>• There is a complaints procedure in place should members wish to complain about a third-party contractor.</li> <li>• A bi-annual survey of service satisfaction is conducted with all service users.</li> </ul>
<p>Risk of staff drinking alcohol or taking illegal drugs during Irish Heart Foundation duties</p>	<ul style="list-style-type: none"> <li>• Staff and volunteers are prohibited from drinking alcohol or taking illegal drugs while undertaking IHF duties.</li> <li>• Code of conduct and sanctions are in place for misconduct.</li> </ul>
<p>Inappropriate communication with members and service users, by phone, email, social media or in-person</p>	<ul style="list-style-type: none"> <li>• Service policies and procedures in place.</li> <li>•</li> </ul>

In addition to our safeguarding policy and training requirements for staff and volunteers, there are policies and procedures that support our intention to safeguard adults at risk of abuse while they are availing of our services. These documents are listed in appendix two (supporting policies and procedure) below and are available to view on request.

## Implementation

We recognise that implementation is an ongoing process. Our service is committed to the implementation and ongoing review of this Safeguarding Adults at Risk of Abuse Statement and the associated policies and procedures. We are committed to the safety, welfare and wellbeing of adults at risk of abuse who are using our services. This statement will be reviewed annually.

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Signed

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Date

**Emma Balmaine**, CEO on behalf of the Irish Heart Foundation

**Tracy Egan, Nurse Support Line and Heart Conditions Manager**  
Designated Liaison Person

**Michelle Hegarty, Support Coordinator**  
Deputy Designated Liaison Person

**Tracy James, Health Checks Manager**

## **Appendix one – A definition of abuse, sources of abuse and types of abuse:**

The IHF understands the definition of abuse in accordance with the HSE Safeguarding Vulnerable Adults at Risk of Abuse national policy and procedure as:

Abuse may be 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 wellbeing, 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.”

This definition excludes self-neglect which is an inability or unwillingness to provide for oneself. However, the HSE acknowledges that people may come into contact with individuals living in conditions of extreme self-neglect. To address this issue the HSE has developed a specific policy to manage such situations – (Section 3 of The HSE Safeguarding Vulnerable Adults at Risk of abuse national policy and section 2 of this policy). Although this abuse definition focuses on acts of abuse by individuals, abuse can also arise from inappropriate or inadequate care or programmes of care.

### **Sources of Abuse**

Anyone who has contact with an adult at risk of abuse may be abusive, including:

- a member of their family
- community or a friend
- informal carer
- healthcare/ social care
- other workers

### **Professional Abuse**

Misuse of power and trust by professionals and a failure to act on suspected abuse, poor care practice or neglect.

### **Peer Abuse**

For example, the abuse of one adult with a disability by another adult with a disability.

### **Stranger Abuse**

For example, by someone unfamiliar to the person.

### **Types of Abuse**

1. **Physical abuse** includes hitting, slapping, pushing, kicking, misuse of medication, restraint, or inappropriate sanctions.

2. **Sexual abuse** includes rape and sexual assault, or sexual acts to which the vulnerable person has not consented, or could not consent, or into which he or she was compelled to consent.
3. **Psychological abuse** includes emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks.
4. **Financial or material abuse** includes theft, fraud, exploitation, pressure in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions, or benefits.
5. **Neglect and acts of omission** include ignoring medical or physical care needs, failure to provide access to appropriate health, social care, or educational services, and the withholding of the necessities of life such as medication, adequate nutrition, and heating.
6. **Discriminatory abuse** includes ageism, racism, sexism, based on a person's disability, and other forms of harassment, slurs, or similar treatment.
7. **Institutional abuse** may occur within residential care and acute settings including nursing homes, acute hospitals, and any other in-patient settings, and may involve poor standards of care, rigid routines, and inadequate responses to complex needs.

## **Appendix two – supporting policies and procedures**

Our statement on safeguarding adults at risk of abuse has been developed in line with the HSE Safeguarding Vulnerable Persons at Risk of Abuse – National Policy and Procedures (2014).

In addition to our safeguarding policy and training requirements for staff and volunteers, the following procedures support our intention to safeguard adults at risk of abuse while they are availing of our services:

- Appointing a designated liaison person (DLP) and deputies.
- Maintaining a list of mandated persons.
- Recruiting, managing and training staff and volunteers.
- Codes of behaviour for staff and volunteers.
- Dealing with allegations against staff and volunteers
- Reporting procedures for safeguarding adults at risk of abuse within the organisation and externally to HSE Safeguarding.
- Anti-bullying procedures.
- Confidentiality and GDPR policy and procedures.
- Involvement of primary carers as appropriate.
- Accidents and incidents policy and procedures.
- Complaints policy and procedures.
- Suicidal ideation policy and procedures.
- Medical escalation policy and procedures.

All policies and procedures are available on request via [info@irishheart.ie](mailto:info@irishheart.ie)