

ADULT SUPPORT & PROTECTION (SCOTLAND) POLICY

1. AIM

- 1.1. The aim/purpose of this policy is to set out what actions are required of staff working in Cygnet Health Care (Cygnet) services when dealing with adult protection issues and to ensure effective links with the relevant local authority Inter Agency Adult Support and Protection Procedures.
- 1.2. This document should be read in conjunction with the relevant local Inter Agency Adult Protection Procedures. This can be sourced from the relevant local authority and should be available at your service.
- 1.3. In accordance with legislation, Cygnet has a statutory responsibility to have clear policies and procedures in place to prevent the abuse of adults at risk of abuse, harm, or neglect (including self-neglect) and to act positively to report and respond to concerns raised regarding abuse.
- 1.4. It is the personal responsibility of every individual referring to this policy to ensure that they are viewing the latest version; this will always be published on Cygnet's online policy library, [myPolicy](#).

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2. SCOPE

- 2.1. This policy applies to all Cygnet services within Scotland.

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- 2.2. Safeguarding of Child visitors to Scottish services is covered by Cygnet's **Child and Young Person Safeguarding** Policy.
- 2.3. This policy applies to all staff - permanent, bank and agency. All staff will be required sign to indicate their awareness and understanding of this policy within their induction as per the induction process.
- 2.4. It is the agreed Policy and any deviation by staff from following this policy and supporting procedures and documents may be subject to disciplinary procedures.
- 2.5. Links to supporting Policy, documents and references are in **Section 8**.

3. INTRODUCTION

- 3.1. The protection of adults at risk of harm is not an option but a responsibility across all Cygnet services in Scotland. The expectation for all "at risk" adults in our services is that they are empowered through support from all staff and external parties including social work services, police, health and care organisations to be free from any preventable harm or exploitation. They are enabled to make their own choices about their lives and to live as independently as their personal circumstances may permit. Cygnet is committed to enabling our service users & patients to have the best support, protection and quality of life available to them.
- 3.2. It is the policy of Cygnet to support and protect anyone who receives our support. We are committed to the protection of adults at risk of harm, and the safeguarding and promoting of the interests and well-being of such adults is of paramount concern to the organisation.
- 3.3. Cygnet strives to ensure to the best of its ability that persons will not encounter harm of any form while in our care, and that, if abuse is suspected or detected, the situation will be reported immediately to allow investigation by the appropriate statutory agencies.
- 3.4. Cygnet undertakes to ensure it will seek to protect adults it works with from exploitative relationships. In such circumstances where it is found that an adult is at risk we will liaise with the host authorities Social Work Services to ensure that the adult continues to receive appropriate support as agreed. This will be in conjunction with the providing local authority.
- 3.5. Cygnet will ensure that staff will be alert to the possibility that they may become aware of service users & patients requiring support and protection. In all cases, staff will report their concerns using Cygnet reporting procedures, as detailed later in this policy and using the documentation provided in the appendixes section.
- 3.6. Cygnet recognises that the protection of adults at risk of harm is placed above all other operating principles and supersedes the principle of confidentiality in relation to disclosure to the relevant authorities.
- 3.7. Cygnet undertakes to ensure that any external parties/staff working or visiting our Scottish services is aware of and has access to this policy.

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4. LEGISLATION

- 4.1. In Scotland, there are three Acts of the Scottish Parliament, which relate specifically to adult protection. These are:
- 4.2. **Adults with Incapacity (Scotland) Act, 2000.** This Act imposes duties on, and assigns functions to, local authorities in relation to the making of enquiries in respect of adults who lack capacity, and the creation, application and supervision of proxy decision making powers in respect of such adults. Under the terms of Section 10 of the Adults with Incapacity (Scotland) Act 2000, the local authority must investigate 'any circumstances made known to them in which the personal welfare of an adult seems to be at risk'
- 4.3. This means that, the local authority must investigate allegations of abuse involving an adult who lacks the capacity to make or convey decisions for him or herself, whether the adult concerned agrees to the investigation or not. It is the function of the Public Guardian to investigate situations of suspected financial abuse involving adults who lack capacity under Section 6 of the same Act.
- 4.4. **Mental Health (Care & Treatment) Scotland Act, 2003.** This Act imposes duties on, and assigns functions to, local authorities and health boards in respect of social and mental health well-being, the making of enquiries in respect of persons who appear to have a mental disorder, and (where necessary) the application of compulsory measures in relation to the assessment and treatment of persons having a mental disorder.
- 4.5. **Adult Support and Protection (Scotland) Act 2007.** This Act imposes duties on, and assigns functions to, local authorities in respect of the making of enquiries, the conduct of investigations, the application for protective powers in respect of adults defined by the legislation to be at risk of actual or suspected harm. This Act also brought about the creation of Adult Protection Committees in every local authority area.
- 4.6. It is the responsibility of adult protection agencies, including Social Work Services and the Police to make enquiries (proactive and reactive) and to carry out appropriate investigations in order to establish:
- a) Whether or not an adult is at risk from harm or suspected harm; and, if so,
 - b) Which, if any, of the protective measures available in terms of the legislation are most appropriate to an adult at risk's individual circumstances.
- 4.7. It is, however, everyone's responsibility to report concerns regarding any adult who is, or who appears to be, at risk of harm to Social Work Services. If you are concerned that a vulnerable adult is at risk of exposure to criminal activity such as fraud then Police must be notified as well as Social Work. However, in order to avoid confusion and to have clear lines of accountability, Cygnet staff should report concerns directly to their Line Manager in the first instance. The procedure outlined later in this policy sets out the reporting guidelines.
- 4.8. For the purposes of the Adult Support & Protection (Scotland) Act 2007 ("ASP Act"), an "adult" is a person aged 16 or over. However, if the adult concerned is 16 or 17 years of age, it is possible that s/he is already subject to a Supervision

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Order or other Order under the Children (Scotland) Act, 1995, or other social work or childcare legislation Procedures (as per your Local Authority/Council. If Cygnet staff know that such an Order is in place in respect of that person, they should include that information in their report to their Line Manager. It is the responsibility of Social Work Services to carry out any investigations about anyone who may be subject to such an Order.

- 4.9. Under the Adult Support and Protection (Scotland) Act 2007 'adults at risk' are defined as adults aged 16 or over who:
- a) Are unable to safeguard their own well-being, property, rights or other interests,
 - b) Are at risk of harm, and
 - c) Because they are affected by disability, mental disorder, illness or physical or mental infirmity, are more vulnerable to being harmed than adults who are not so affected.
- 4.10. The Adult Support and Protection (Scotland) Act 2007 states harm includes all harmful conduct and in particular includes:
- Conduct, which causes physical harm.
 - Conduct, which causes psychological harm (for example by causing fear, alarm or distress).
 - Unlawful conduct, which appropriates or adversely affects property, rights or interests (for example: theft, fraud, embezzlement or extortion).
 - Conduct, which causes self-harm.

5. POLICY

Factors, which may indicate harmful behaviour towards an adult at risk.

- 5.1. These can include one or a combination of the following actions. The following indicators must, however, be used only as a guide:
- Harm can be a single or repeated act or lack of appropriate action, occurring within any relationship where there is an expectation of trust, which causes harm or distress to an adult. It can take the form of physical, sexual, emotional, psychological or domestic abuse, acts of neglect or omission, financial and material abuse and the withholding of information. The abuse can be multiple, involving some or all of the above.
 - Harm can occur in any setting: when an adult lives alone or with a relative; within nursing, residential, supported living or day care settings; in hospitals, custodial situations, support services in people's own homes and other places previously assumed safe, or in public places.
- 5.2. Staff will be aware that adults using Cygnet services might have come to the service because they have been subject to harm:
- In their own home.
 - In the community.
 - Having been abused by a relative, friend or acquaintance.
- 5.3. Alternatively, adults might be at risk of harm after they come to the service, for example from:
- Someone who is not a person coming into the service from outside.
 - Another person.
 - A member of staff.

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- 5.4. There is an expectation where the perpetrator of abuse is a member of staff that an internal investigation will not take precedence over reporting concerns to allow an investigation by Social Work Services and/or Police.

Types of Harm

- 5.5. **Physical Abuse**- involving actual or attempted injury to an adult defined as at risk. For example:
- Physical assault by punching, pushing, slapping, tying down, giving food or medication forcibly, or denial of medication.
 - Use of medication other than as prescribed.
 - Inappropriate restraint.
- 5.6. **Emotional/Psychological Abuse**- resulting in mental distress to the adult at risk. For example:
- Excessive shouting, bullying, humiliation.
 - Manipulation of, or the prevention of access to, services that would be of benefit to the adult.
 - Isolation or sensory deprivation.
 - Denigration of culture, religion, gender, age or sexuality.
- 5.7. **Financial or Material Abuse**- involving the exploitation of resources and property belonging to the adult at risk. For example:
- Theft or fraud.
 - Misuse of money, property or resources without the informed consent of the adult at risk.
- 5.8. **Sexual Abuse**- involving activity of a sexual nature where the adult at risk cannot or does not give consent. For example:
- Rape.
 - Acts of gross indecency.
 - Inappropriate touching or verbal or physical sexual harassment.
- 5.9. **Neglect and acts of omission** by others charged with the care of the adult, including ignoring medical or physical care needs. For example:
- Failure to provide access to appropriate health, social care or educational services.
 - Withholding of the necessities of life such as nutrition, appropriate heating, etc.
- 5.10. **Exploitation**- the deliberate targeting of vulnerable adults for personal benefit.
- 5.11. **Discriminatory abuse**- for example, treating one person less favourably than another.
- 5.12. **Information abuse**- deliberately giving erroneous information or withholding information.
- 5.13. **Human rights abuse**- for example deprivation of a right to family life or to a fair hearing.

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- 5.14. **Multiple Forms of Abuse**- This may occur in an ongoing relationship or service setting or to more than one person at a time. It is important therefore to look not only at a single incident, but to also consider the underlying dynamics and patterns of harm within a service.

Confidentiality

- 5.15. There is a clear requirement across agencies to co-operate in relation to the protection of adults seen to be at risk of harm. Cygnet will ensure appropriate mechanisms are in place for staff to report any concerns to Social Work Services and/or the Police, as may be appropriate in the circumstances. Cygnet will also ensure that appropriate mechanisms are in place in relation to any ongoing involvement and assistance by us, in consultation with the relevant statutory agencies, towards effective risk management and continuing support to the person.
- 5.16. To ensure appropriate protective measures can be put in place, it is recognised that confidential information will need to be shared with other workers, managers and other agencies on a "need to know" basis.
- 5.17. Cygnet staff have a duty to report concerns about an adult thought to be at risk of harm (as defined in the ASP Act). Failure to do so may result in disciplinary action.
- 5.18. Where an adult is thought to be at risk of harm, this will always override a professional or organisational requirement to keep information confidential, subject to the provisions of the General Data Protection Regulation (GDPR) 2016 and Data protection Act 2018. However, the disclosure should be limited to the relevant parties only. It is the responsibility of those employed or involved with Cygnet to take appropriate action to ensure the adult deemed to be at risk is protected from harm.
- 5.19. All staff are to abide by the Duty of Candour, this involves:
- Acknowledging, apologising and explaining when things go wrong.
 - Conducting a thorough investigation into the individual safety event and reassuring individuals, their families and carers that lessons learned will help prevent the individual safety event recurring.
 - Providing support for those involved (both individuals and staff) to cope with the physical and psychological consequences of an individual safety event.

Principles of Reporting and Information Sharing

- 5.20. The protection of adults at risk of harm is placed above all other operating principles and supersedes the principle of confidentiality. Any concerns a member of Cygnet staff may have regarding the safety and well-being of an adult at risk of harm should be brought to the attention of their Line Manager immediately.
- 5.21. Although it is recognised that a person's privacy must be protected at all times, in situations where abuse is suspected, there must be free communication between participating agencies throughout the investigation. Under no circumstances will information on an adult be withheld from Social Work Services because the holder of the information thinks that it might compromise

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a third party. If a staff member is given information relating to adult abuse 'in confidence' they must make clear that any information relating to adult or child abuse must be passed on to Social Work Services and/or Police for investigation.

- 5.22. If the adult is profoundly deaf and requires the services of a sign language interpreter or communication support worker, one should be appointed to work with the adult. This should be arranged in consultation between Cygnet and social work as appropriate. Other forms of assistance to communication should be utilised if the adult cannot communicate using speech.
- 5.23. If the adult does not have English as a first language and requires the services of an interpreter, an interpreter from the Interpreting Service should be appointed to work with the adult. This should be arranged in consultation between Cygnet and social work as appropriate.
- 5.24. Using a member of the adult's family as an interpreter or communication support worker should be avoided.

Named Person/Post

- 5.25. Cygnet acknowledges that having a specific member of staff as a named person/post in respect of adult protection is good practice. Our named person/post will usually be a service manager within the organisation who has sufficient knowledge/expertise to deal with any concerns raised.
- 5.26. Cygnet recognises that providing a named person/post ensures that all allegations of abuse are reported to a central point to allow a consistent response and to maintain an overview of reports from staff. Concerns can then be passed on quickly and appropriately.
- 5.27. The named person/post will monitor issues and detect trends as these occur.
- 5.28. Our named person/post is: **The service Manager**
- 5.29. If unavailable the second named person/post is: The **Regional Operations Manager**
- 5.30. The relevant Regional operations Manager will be informed of all adult protection issues. They in turn will inform the **Regional Operations Director**.

6. ADULT SUPPORT AND PROTECTION PROCEDURES

Introduction

- 6.1. These procedures details the action you should take on suspecting harm or poor practice to ensure the welfare and safety of adults at risk of harm.

Responsibilities of Cygnet Staff:

- 6.2. Any report that an adult may be at risk of harm, including anonymous referrals, should be taken seriously. All cases should be considered with an open mind. In all instances, the information given must be reported immediately to your Line Manager/named person.
- 6.3. Our named person/post is: **The Service Manager**

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- 6.4. If unavailable the second named person/post is: The **Regional Operations Manager**
- 6.5. In the event that you become aware that an adult may be at risk of harm or you are told directly by a person that they are being/have been abused, you should be aware that the adult may be feeling vulnerable or upset when disclosing this information.
- 6.6. You should be supportive and reassure the adult by listening carefully, but do not ask unnecessary questions. It is not your role to investigate.
- 6.7. You should take steps to ensure the safety of the vulnerable adult involved.

Reporting

- 6.8. You should advise the adult service user/patient that the information will have to be passed on to your Line Manager and that Social Work Services may be required to investigate further.
- 6.9. When you feel it is appropriate to leave the person who is disclosing the abuse, the information given by the person should be passed on immediately to your Line Manager.
- 6.10. Where you are concerned for the immediate safety and well-being of a person, contact emergency services i.e. ambulance and Police immediately. Do not delay. You can contact your Line Manager once you are satisfied that the person is safe.
- 6.11. If you suspect that abuse has taken place you should contact the Police immediately and steps should be taken to preserve evidence. You can then contact your Line Manager who will contact the relevant local ASP team
- 6.12. If you are unhappy with the response from your Line Manager, you should contact your Regional Operations Manager who may contact Social Work Services at the appropriate office and outline your concerns and the basis for them.
- 6.13. If you are unhappy with the response from Social Work Services you can raise this with your Line Manager or Named Person/post who will decide whether the Care Inspectorate should be informed.
- 6.14. Record the nature of your concern on the online Incident Management System and highlight anything the person may have told you using, as far as possible, the words used by the person. This information will form the basis of the referral, and will be required if there is an investigation. As much information as possible should be recorded, please record the facts only and no opinions or assumptions should be included.
- 6.15. Information/reports may also be recorded on Multi Agency Referral Forms (AP1). Certain ASP teams make use of these documents as a simplified way of highlighting concerns/risk/abuse. However these are not standardised in every Scottish region. Each Cygnet service will determine what their local ASP team require and then develop a specific protocol/framework for contacting their ASP team.

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- 6.16. If there is visual evidence (in the form of an injury, bruise, scratch etc.) then highlight this on the body map section in the online Incident Management System.
- 6.17. Some ASP teams have a 'reporting threshold guidance' document and will provide this to each service. This is a valuable resource which can assist the staff member who believes there may be a need to report possible abuse/harm to determine whether they should make a report to the ASP team. However it should be noted that these threshold documents are only to be used as a guide and they are not standardised for every region/local authority in Scotland.
- 6.18. Each regional Adult Support & Protection (ASP) team have their own preference in Scotland as to the order they wish to be contacted. Some teams are happy to receive an AP1 directly and then they may follow this up with a phone call or email. However some Scottish ASP teams prefer the reporting staff member to phone in the concern first, then to follow this up by submitting an email or AP1 document. Services should ensure staff are aware of the local expectations for their service and stakeholders.
- 6.19. These preferences/protocols will be displayed within the nursing station of each Scottish service.
- 6.20. Any copies of AP1 forms (or similar) submitted will be kept and securely stored at the Cygnet Locality. The Service Manager will determine whom this information can be shared with, will maintain an overview of reports from staff, monitor issues and detect trends as these occur.

Responsibilities of Cygnet Service Manager/Named Person

- 6.21. The Service Manager/named person will telephone the relevant Social Work Services location and give details of the alleged abuse. In accordance with the relevant Inter Agency Adult Protection Procedures, the information should be followed up in writing within 24 hours using any agreed recording templates that the local ASP team have advised.
- 6.22. Where information is given to your Line Manger out-of-hours, Local expectations must be followed and this will include informing the host Social Work Services Out-of-Hours Service in most instances.
- 6.23. The Service Manager/named person making contact with Social Work Services, ASP teams and/or the Police must make a note of the following:
- The date and time that contact was made. Where contact cannot immediately be made, the reason for this must be recorded. Details of all unsuccessful attempts to make contact must also be recorded on the service user/patients incident report
 - Name, address and full details of those contacted.
 - Details of who should be contacted for future follow-up/agreed further action including Next of Kin, social worker, care manager or Guardian.
- 6.24. The Service manager/named person should contact the care manager/social worker in the relevant local authority immediately. This should include the host local authority as well as the placing authority.

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- 6.25. The Care Inspectorate will be contacted by the Cygnet Service Manager to report incidents of abuse within the service.

Concerns raised

- 6.26. All concerns of an adult protection nature should be reported to the relevant Social Work Services office. Social Work Services will seek to allocate the matter to a member of their staff who has sufficient knowledge and expertise to deal with any concerns raised. It will be the responsibility of the designated Cygnet Service Manager to ensure that all instances of alleged or suspected harm to an adult seen to be at risk and requiring protection are treated seriously and that appropriate liaison with Social Work Services, ASP teams and/or the Police is provided.
- 6.27. Allegations Involving Staff - What if it is someone within Cygnet that you are concerned about?
- 6.28. If you have observed Cygnet staff acting in a way that has caused you to be concerned you should contact your Line Manager outlining your concerns and the basis for them. They will take your concerns seriously, make appropriate enquires into them and thereafter decide on the appropriate course of action.
- 6.29. If your concerns are about your Line Manager, then you should inform your Regional Operations Manager.
- 6.30. In situations where the alleged abuser is a member of staff, Cygnet Investigatory and Disciplinary Procedures should be followed, but will not supersede an adult protection referral or investigation by statutory agencies. In other words, care must be taken to ensure that implementation of any internal procedures (for example, fact finding) does not undermine or impede any investigation externally by statutory agencies. It may be appropriate to suspend or send home the member of staff concerned. Advice should be sought internally from the Human Resource Department or externally from Social Work Services before proceeding. Permission to investigate must be sought from the Social Work Team Manager.
- 6.31. In such cases, the Scottish Social work department in the locality will be contacted by the appropriate Service Manager from Cygnet. The decision will be recorded in the staff members' personnel file in the service.
- 6.32. Cygnet's **Freedom to Speak Up** policy is available as required and can be found in your service or is available from Human Resources.

Frequent Complaints without Foundation

- 6.33. A situation where a person makes frequent complaints alleging abuse, which after full investigation are found to be vexatious, cannot be ignored. In such cases it is good practice to always follow the above reporting procedures. The allegation must be reported to their care manager and the pattern of allegations must be reviewed regularly in case abuse is taking place.

What Happens Next?

- 6.34. Once they have received a referral, it is the duty of Social Work Services to make enquiries and to investigate matters of concern in relation to the protection of an adult deemed to be at risk of harm as defined by the

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legislation. Where it is alleged that a crime has been committed against the adult, investigation is likely to be progressed jointly in consultation with the Police.

- 6.35. The investigating officers may need to speak to the staff member from whom the concerns originated. Managers and staff of Cygnet will co-operate fully with any Police or Social Work Services enquiries, and Service Managers will ensure staff are facilitated in this process.
- 6.36. The Line Manager will take advice from the investigating officer about the suitability of seeking an Advocacy Worker or Appropriate Adult to work with the adult.

Supporting the Adult at Risk of Harm

- 6.37. It is important that all employees and those involved directly with the adult thought to be at risk of harm act throughout in a facilitating and supportive manner. Staff should avoid being judgemental and should not introduce personal or third party experiences of harm. Every effort should be made to enable the adult to express their wishes and to make decisions to the best of their ability where appropriate, but, within a duty of care, the overriding concern is the protection of the adult from harm.
- 6.38. The person you are supporting is likely to continue to be involved with Cygnet following the reporting of the concerns. Links should be maintained with the Social Work Services office involved in any investigation, in order to offer the appropriate support to the person.

Supporting the Cygnet staff

- 6.39. The staff involved will be offered support and counselling as appropriate.

7. TRAINING

- 7.1. As an allegation of abuse can come to the notice of any member of staff at any time, all staff members will receive training in Adult Protection Procedures, either as part of an initial induction, or as part of an ongoing training programme. The e-learning aspect of the training will be required annually.
- 7.2. Cygnet employees will be made aware of the existence of the Adult Support and Protection Policy and Procedures, and their responsibilities in relation to the Adult Protection process:
- Through the provision of training – e-learning
 - By issuing a copy of the policy to all staff members
 - By publicising (in the form of posters/booklets etc.) its existence at strategic points of office/service locations.
- 7.3. If available, staff may also be provided with additional training from local authority ASP teams.
- 7.4. All managers must ensure they receive the required training from their local authority to carry out the ASP lead role for their service, and attend refreshers and updates as stipulated by that authority.

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8. STANDARD FORMS, LETTERS AND REFERENCES

This Policy

- 8.1. Adult Support and Protection EASYREAD Photosymbols (4-24.01)
- 8.2. Adult Support and Protection EASYREAD Widget (4-24.01)
- 8.3. Adult Protection Referral D&G AP1 Form (4-24.02)
- 8.4. Forth Valley AP1 Form (4-24.03)
- 8.5. Blank First Contact Form (4-24.04)

Linked Policy

- 8.6. Incident Reporting and Management (4-14)
 - Notifications to CIS Poster (4-14-10.2)
 - Notifications to HIS Poster (4-14-10.3)
- 8.7. Child and Young Persons Safeguarding (4-16)
- 8.8. Chaperoning and Personal Care (2-11)
- 8.9. Complaints and compliments (6-01)
- 8.10. Consent to treatment (1-03)
- 8.11. Positive and Safe Care – Reducing Restrictive Practice (2-05)
- 8.12. Prevent (4-21)
- 8.13. Health and Safety (H&S 01)
- 8.14. Staff conduct (HR 02)
- 8.15. Raising a Concern: Freedom to Speak Up (HR 03)
- 8.16. Disciplinary Procedures (HR 15)
- 8.17. Recruitment Policy (HR 18)
- 8.18. Data Protection, Access to Records and Confidentiality (IG 02)
- 8.19. Data Sharing (IG 08)