



Safeguarding Policy

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INTRODUCTION

MMHS wishes to ensure that every person dealing with us in any capacity can do so safely and with confidence. This reflects the Charity Commission Guidance that:

"You must take reasonable steps to protect from harm people who come into contact with your charity".

We are mindful that, in our interactions with our ministerial residents, we may also become aware of wider risks and situations that could lead to harm and we take this seriously.

Our policy is to respond proportionately and with compassion, where appropriate referring our ministerial residents to those organisations with a lead role in safeguarding in their communities.

DEFINITION

Safeguarding means protecting a person's right to live safely, free from both abuse and neglect. To effect this, people and organisations must co-operate to stop abuse and prevent harmful situations once they are identified and, where possible, prevent their occurrence in the first place. Safeguarding includes having due regard for an individual's views, wishes, feelings, beliefs and wellbeing before deciding on any course of action.

SAFEGUARDING LEGISLATION

The Care Act 2014 places a series of duties and responsibilities on local authorities to provide support and services for people who have care and support needs. If someone is concerned that a person with care and support needs is experiencing or at risk of abuse or neglect, they should raise a concern with the council responsible for adult social services in their area. The main principles of safeguarding from the Act are listed in this Policy.

Of relevance also is Mental Capacity Act 2005 which protects people's rights to make their own decisions where they are able to do so, including the right to make an unwise decision. People's views should always be considered, even if they lack the capacity to make a specific decision.

Other Acts which touch on safeguarding issues are the Safeguarding Vulnerable Groups Act 2006, the Sexual Offences Act 2003 and the Human Rights Act 1998. The provisions of the legislation are carried forward into the guidance offered by bodies such as the National Council for Voluntary Organisations and the Charity Commission. MMHS has reference to this guidance in developing its Policy and procedures.

PRINCIPLES

MMHS is committed to the six key principles of safeguarding within the Care Act 2014:

1. **Empowerment** – supporting people to make their own decisions and to give their informed consent.
2. **Prevention** – acting before harm occurs.
3. **Proportionality** – taking the least intrusive response appropriate to the risk identified.
4. **Protection** – supporting and representing those in danger or in greatest need.
5. **Partnership** – ensuring communities play a part in preventing, detecting and reporting neglect and abuse.
6. **Accountability** – being accountable and transparent when delivering safeguarding.

SAFEGUARDING OBLIGATIONS

As a landlord, MMHS has a duty of care towards our ministerial residents to ensure that the property we provide is safe and free from health hazards. Beyond the duties around health and safety, there is no specific safeguarding duty required from MMHS in this relationship.

However, MMHS does have safeguarding responsibilities arising from being a charity with beneficiaries and operating for the public benefit. In summary, under the Charity Commission guidance, MMHS needs to promote a strong safeguarding culture that aims to:

- protect beneficiaries, volunteers, staff and anyone who comes into contact with the charity;
- minimise the risks of harm or abuse to such individuals;
- give confidence to all that any concerns raised will be dealt with appropriately; and
- ensure that everyone involved in the charity, at whatever level or in whatever role, understands their responsibilities.

One of the measures we take is to ensure that staff and trustees are subject to DBS checks every 2 years.

AUTHORITY

Ultimate oversight and responsibility for safeguarding lies with the Board which delegates authority to the Executive to operate and manage the safeguarding function.

The Board approves and monitors the Policy which is reviewed every two years, or immediately after any serious event, to ascertain its continuing relevance.

In addition to the standing item on safeguarding at every board meeting, the Executive will make a full report to the next immediate board meeting after a 'safeguarding event' has occurred which has caused us to invoke reporting under this policy.

DESIGNATED SAFEGUARDING LEAD

MMHS has appointed a Designated Safeguarding Lead Trustee to be the first point of contact on the Board of Trustees and a Safeguarding Lead Officer whose role is summarised by the NCVO as to:

- Advise and support the senior team in developing and establishing the organisation's approach to safeguarding
- Play a lead role in maintaining and reviewing the organisation's plan for safeguarding
- Coordinate the distribution of policies, procedures and safeguarding resources throughout your organisation
- Advise on training needs and development, providing training where appropriate
- Provide safeguarding advice and support to staff and volunteers
- Manage safeguarding concerns, allegations or incidents reported to the organisation
- Manage referrals to key safeguarding agencies (e.g. social services or police) of any incidents or allegations of abuse and harm.

SCOPE

In considering the scope of this policy and the management of safeguarding risks, MMHS has identified the following groups for particular attention, although this should not be considered a comprehensive list:

Group	Potential harms	Potential sources
Ministerial residents in their homes	Personal safety due to attack or abuse Increasing vulnerability due to age, infirmity, illness, neglect Having their affairs managed by others without consent	Contractors/suppliers – whether sourced by MMHS or directly by ministerial residents Family members, friends or other visitors to, or staying in, our ministerial residents' homes. Our staff
Our staff visiting ministerial residents' homes	Personal safety due to attack or abuse	Ministerial residents, family members of residents Contractors/suppliers Other visitors to ministerial residents' properties
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Group	Potential harms	Potential sources
		Other visitors to ministerial residents' properties Our staff
Family members or friends or others visiting ministerial residents' homes. Some households have adult children or grandchildren living, or staying temporarily, with our ministerial residents	Personal safety due to attack or abuse Having their affairs managed by others without consent	Ministerial residents, other family members or visitors to, or staying in, our ministerial residents' homes Other contractors/suppliers Other visitors to ministerial residents' properties Our staff
Staff in the office	Receipt of abusive calls, email, correspondence Physical threats	Other staff Ministerial residents and their families Visitors to the office

TYPES OF ABUSE

Some safeguarding situations may be due to abuse, which is a violation of a person's human and civil rights by another person or organisation which may cause significant harm to that person.

Some types of abuse are:

- Physical
- Sexual
- Emotional/Psychological/Mental
- Neglect
- Acts of omission
- Financial or material abuse
- Discriminatory
- Organisational/institutional
- Self-neglect
- Domestic abuse
- Modern slavery
- Other Coercive control.

In our procedures and associated training, we recognise that sometimes the perpetrator of the abuse is known to the adult and may be in a position of trust and power.

RECOGNISING SAFEGUARDING ISSUES

MMHS encounters many wellbeing issues which are not necessarily at the level of a safeguarding concern and can be managed under associated policies such as Aids and Adaptations, the Wellbeing Fund or our lone working procedures. In broad terms, safeguarding concerns may be raised if people exhibit one or a combination of the following:

- need care (physical, medical, psychological)
- need support (shelter, emotional, nourishment)
- currently experiencing abuse or neglect
- at risk of experiencing abuse or neglect
- unable to protect themselves from abuse or neglect.

MMHS staff will be trained to recognise signs that a person may *potentially* be experiencing abuse or neglect such as:

- unexplained bruises or injuries
- belongings or money going missing
- post laid out, unopened
- not attending usual activities
- not responding to contact
- becoming withdrawn and quiet, especially around a particular person or persons
- change in appearance of the person e.g. changes in weight, personal hygiene or way of dressing
- someone else interrupting and speaking across or for the person
- a person showing fear or usual level of anxiety.

Our procedures and training recognise that these indicators may be made known to MMHS by a staff member on a routine visit, by a ministerial resident reporting a situation to a visiting or office-based staff member, or by a member of the public notifying MMHS of the situation.

RESPONDING

The Safeguarding Lead Officer will make an initial assessment and will, if possible, talk to the person reporting the concern and gather further information. This assessment will consider the type of concern reported, any action already taken and how MMHS can support the individual. Our procedures will point staff towards a proportionate response, as per the guidelines included below:

Proportionate actions

Category of incident	Description	Action recommended
Emergency incidents	A life-threatening situation	<ul style="list-style-type: none"> • contact the emergency services • make the situation safe if possible • check how others are responding
Protection concerns	A person unable to protect themselves from, or is at current risk of, abuse or harm	<ul style="list-style-type: none"> • call the police if person is in immediate danger • otherwise contact the relevant local authority within 24hrs
Allegations concerning staff or trustees	Allegations of abuse or harm against a staff member or a trustee	<ul style="list-style-type: none"> • identify and apply the relevant MMHS policies which may include HR policies • notify Charity Commission if applicable
Welfare concerns	No physical harm but concerns over the person's health, wellbeing or safety if they don't get help	<ul style="list-style-type: none"> • attempt to speak to the person within 7 days • if appropriate, with consent speak to family members or carers • signpost person or their family to relevant services or information • if appropriate, contact support professionals
Concerns about other organisations	Concern about another organisation, their staff and/or volunteers	<ul style="list-style-type: none"> • within 24hrs make contact at a senior level/the safeguarding officer of the organisation • follow up if necessary and contact the authorities if the person remains at risk
Historic concerns	Report from an adult relating to historical abuse	<ul style="list-style-type: none"> • signpost the person who experienced the abuse to relevant support groups and authorities • notify authorities of any current risks disclosed

The primary concern is the best interests of the person who is at risk of harm, and any third-party reporting safeguarding concerns on their behalf.

CONFIDENTIALITY, CONSENT AND INFORMATION SHARING

Timely information sharing is key to keeping people safe, as is responding appropriately and swiftly to concerns about welfare and potential harms.

There may be circumstances, when an adult is at risk, where the charity needs to decide whether or not to share information with a third party (e.g. the relevant local authority).

MMHS will maintain confidentiality and act in accordance with the UK General Data Protection Regulations (GDPR) 2018 and Data Protection Act 2018.

Where possible information will only be shared with a third party if the individual has given explicit consent. In the event of consent being refused or withdrawn, information will only be shared if that person is at serious risk of harm or abuse (including self-harm), or if the person lacks mental capacity to take decisions, or if the law requires it.

If MMHS decides to share information with third parties, without getting an individual's consent, we will follow our safeguarding procedures which include:

(a) first seeking advice from the relevant local authority or police or a professional advisor, without disclosing personal details of the ministerial resident; and

(b) if we decide to proceed:

- informing the individual that we are taking this step (unless doing so would increase the risk of harm to the individual);
- basing this decision on the safety and wellbeing of the individual;
- only disclosing such information as is necessary, proportionate, relevant and accurate, and such disclosure should be on a secure basis; and
- keeping a record of the justification for making any disclosure.

RECORD KEEPING

Our safeguarding procedures include templates for record keeping to ensure that these are structured, consistent and proportionate. Records of safeguarding concerns, actions taken and follow up measures until the case is considered closed, will be kept in a designated location with restricted access and document retention policies will be applied.

TRAINING AND AWARENESS

MMHS staff are required to become familiar with the Policy and with its procedural requirements. They will be expected to follow the set procedures on discovering a safeguarding matter whether by phone/email/letter or during a site visit to a resident's home.

Issues covered in the training will include learning the definitions of abuse and harm, recognising signs of abuse, who the Safeguarding Officer is, and how to respond to reports or allegations.

The Safeguarding Lead Officer will be offered further training where necessary to ensure a high a level of competence is maintained.

Training will also be provided to trustees and the Designated Safeguarding Lead Trustee.

Residents will be made aware of our Policy through a Safeguarding Statement on our website and in one to one conversations as necessary.

REVIEWING POLICY

The Policy will be reviewed by the trustees every two years and following any safeguarding events or serious incidents (see below).

MONITORING AND REPORTING

The Safeguarding Lead Officer will be responsible for monitoring ongoing safeguarding concerns until the case can be considered closed in line with MMHS's safeguarding procedures. Safeguarding is a standing item on the board agenda and appropriate detail will be provided, being mindful of confidentiality issues.

MMHS procedures include reporting to the appropriate authorities including the Charity Commission if necessary (see below).

SERIOUS INCIDENT REPORTING

We recognise that a safeguarding event could be deemed a serious incident which necessitates reporting to the Charity Commission.

A serious incident is an adverse event, whether actual or alleged, which results in or risks significant:

- harm to the charity's beneficiaries, staff, volunteers or others who come into contact with the charity through its work
- loss of the charity's money or assets
- damage to the charity's property
- harm to the charity's work or reputation.