

Safeguarding Vulnerable Persons at Risk of Abuse National Policy and Procedures

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Introduction

The safety and well-being of all children, pupils over 18 and adult service users is of paramount importance to Enable Ireland. Enable Ireland Sandymount School has reviewed and adopted the adult service Safeguarding Policy for use with the small number of pupils who reach the age of 18. The Board of Management of the School have availed of training for staff to ensure compliance. Enable Ireland Sandymount School is committed to this through the implementation of appropriate protection policies and the provision for all employees of training and awareness on these policies. This is in conjunction with stringent human resource practices to ensure Enable Ireland Sandymount School delivers on this commitment. In particular the implementation of:

- Protocol for the Safeguarding Vulnerable Persons at Risk of Abuse
- Protocol for the Protection and Welfare of Children
- Protocol for the Application of Trust in Care In Enable Ireland

An adult is defined as a person over 18 years for the purpose of this document.

Enable Ireland fully supports *the HSE Safeguarding Vulnerable Persons at Risk of Abuse, National Policy and Procedures 2014*.

Section 1: This policy is adopted by the Board of Enable Ireland for use across the organisation. Sandymount School as a member of the Enable Ireland family have adapted this policy. This policy is guided by the HSE Safeguarding Vulnerable Persons at Risk of Abuse, National Policy and Procedures 2014.

Section 2: Procedures has been adapted by Enable Ireland Sandymount School to make it specific to our setting and context. The broad principles of a 'No Tolerance' ethos and placing the welfare of the vulnerable person at the centre of our practice are fully supported.

We have only tailored the Procedures as they relate to our organisational structures to ensure consistent and clear implementation of the HSE Safeguarding Vulnerable Persons at Risk of Abuse policy and procedure across Enable Ireland.

1. Policy

Policy Statement

It is the policy of Enable Ireland Sandymount School to work in partnership with service users to develop individualised supports and opportunities which promote the dignity, respect, choices and contribution of each person. An integral part of this policy is the right to protection from any form of abuse or neglect and the provision of appropriate and effective supports to an individual.

In line with the Enable Ireland Protocol for the Protection and Welfare of Children, the Director of Services/National Manager is the identified Designated Officer in each service. Each service location will also have a number of named Designated Officer appointed.

Underlying Principles

- Safeguarding must be built on empowerment: on listening to the voices of individuals who are at risk, and those who have been harmed.
- All pupils over 18 have the right to be treated in a manner, which ensures their dignity and respect at all times

- All pupils over 18 have the right to privacy and confidentiality within the limits of safety;
- All pupils over 18 have the right to be listened to carefully to ensure that they are central to any initiatives taken as a result of this policy.

In the event that there are reasonable grounds to suspect that a criminal act has been committed, Enable Ireland is obliged to report such an allegation to An Garda Síochána.

For adults who use Enable Ireland respite and residential services, the organisation is obliged to report any concerns or allegations to the Health Information and Quality Authority (HIQA) within 3 working days. This is done by identifying the person with a pin code and not his/her name to protect confidentiality.

Definitions of Abuse

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.”

¹Health Information and Quality Authority (HIQA). The National Standards for Residential Services for Children and Adults with Disabilities. Dublin, 2013.

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 – see *Section 3 of HSE Safeguarding Vulnerable Persons at Risk of Abuse, National Policy and Procedures 2014*.

Although this abuse definition focuses on acts of abuse by individuals, abuse can also arise from inappropriate or inadequacy of care or programmes of care.

There are several forms of abuse, any or all of which may be perpetrated as the result of deliberate intent, negligence or lack of insight and ignorance. A person may experience more than one form of abuse at any one time. The following are the main categories/types of abuse.

Types of Abuse

- **Physical abuse** includes hitting, slapping, pushing, kicking, and misuse of medication, restraint or inappropriate sanctions.
- **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.
- **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.
- **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.
- **Neglect and acts of omission** includes ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life such as medication, adequate nutrition and heating.

- **Discriminatory abuse** includes ageism, racism, sexism, that based on a person's disability, and other forms of harassment, slurs or similar treatment.
- **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. (See Appendix 1: Signs and Symptoms of Abuse).

Who May Abuse?

Anyone who has contact with a vulnerable person may be abusive, including a member of his/her family, community or a friend, informal carer, healthcare/ social care or other worker.

- **Familial Abuse** - Abuse of a vulnerable person by a family member.
- **Professional Abuse** - Misuse of power and trust by professionals and a failure to act on suspected abuse, poor care practice or neglect.
- **Peer Abuse**- Abuse, for example, of one adult with a disability by another adult with a disability.
- **Stranger Abuse** - Abuse by someone unfamiliar to the vulnerable person.

2. Procedures

Enable Ireland adheres to the *HSE Safeguarding Vulnerable Persons at Risk of Abuse, National Policy and Procedures (Sections 9 to 15)*.

2.1 Responding to Concerns or allegations of Abuse of Vulnerable People

2.2 Introduction

Enable Ireland has adapted the following sections of the HSE Safeguarding Vulnerable Persons at Risk of Abuse, National Policy and Procedures to support implementation within our organisation.

Enable Ireland is fully committed to ensuring implementation of the HSE Safeguarding Vulnerable Persons at Risk of Abuse, National Policy and Procedures.

2.3 Organisational Arrangements to Support Procedural Objectives

Community Healthcare Organisation Safeguarding and Protection Team (Vulnerable Persons)

See HSE Safeguarding Vulnerable Persons at Risk of Abuse, National Policy and Procedures and the HSE personnel. www.hse.ie

Designated Officer

Enable Ireland has appointed a number of Designated Officers to support implementation of and compliance with the HSE Safeguarding Vulnerable Persons at Risk of Abuse policy and procedure, www.hse.ie. A full list of the Enable Ireland Designated Officers and Deputy Designated Officers can be found in Appendix 4.

Their responsibilities include:

- Informing the relevant Director of Service/National Manager of any reported concerns or allegations
- Receiving concerns or allegations of abuse regarding vulnerable person
- Ensuring the appropriate manager is informed and collaboratively ensure necessary actions are identified and implemented
- Ensuring reporting obligations are met
- Other responsibilities, such as conducting preliminary assessments and further investigations, may be assigned within a specific service.

All concerns/reports of abuse must be immediately notified to the Designated Officer and in the event of their unavailability to the relevant Enable Ireland Service Manager.

2.4 Data/Information

All information concerned with the reporting and subsequent assessment of concerns or allegations of alleged abuse is subject to the HSE policy on service user confidentiality. However, information regarding or allegations of abuse cannot be received with a promise of secrecy.

A person providing such information should, as deemed appropriate, be informed that disclosures of information to appropriate others can occur if:

- A vulnerable person is the subject of abuse and/or;

- The risk of further abuse exists and/or;
- There is a risk of abuse to another vulnerable person(s) and/or;
- There is reason to believe that the alleged person causing concern is a risk to themselves and/or;
- A legal obligation to report exists.

Failure to record, disclose and share information in accordance with this policy is a failure to discharge a duty of care. In making a report or referral, it is essential to be clear whether the vulnerable person is at immediate and serious risk of abuse and if this is the case, it is essential to outline the protective actions taken. The report/referral may also contain the views and wishes of the vulnerable person where these have been, or can be, ascertained. The role of an advocate or key worker may be important in this regard.

2.5 Records

All concerns or allegations need to be recorded on the Enable Ireland record sheet (Appendix 2).

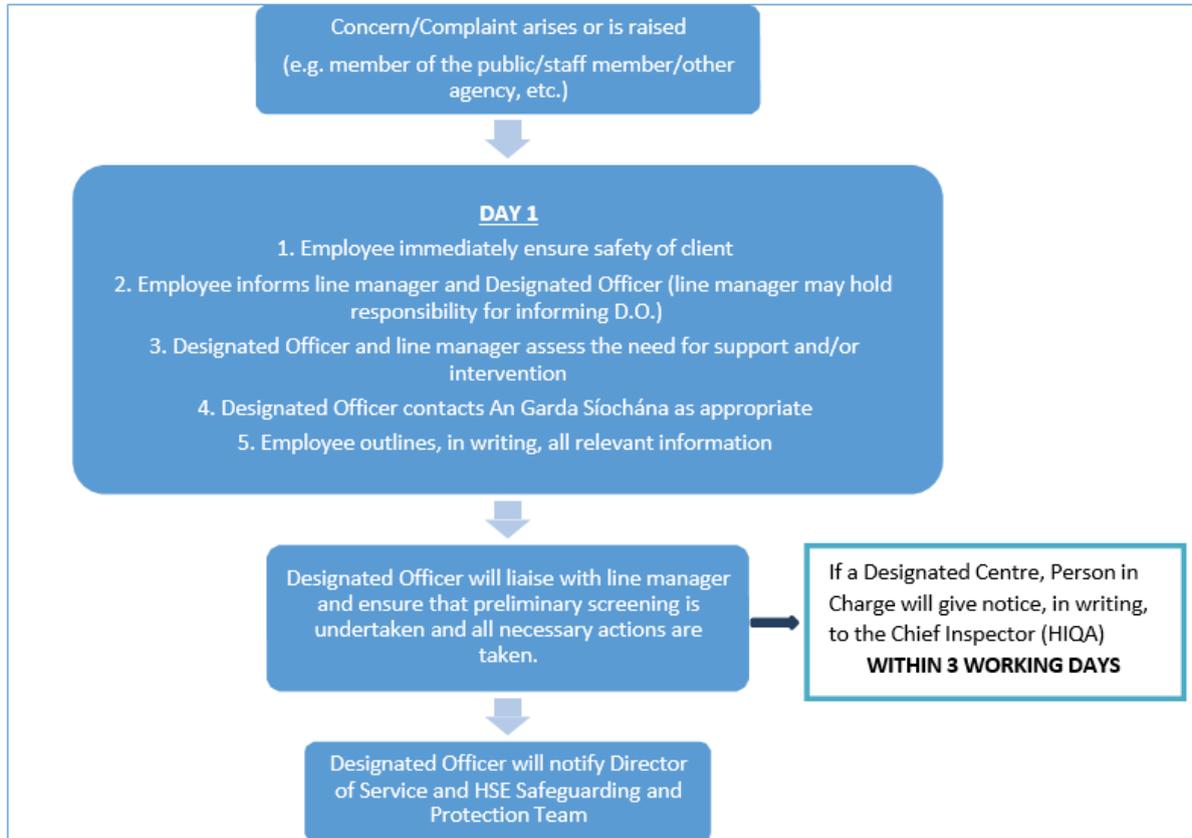
All reports, preliminary screening records and safeguarding plans will be done in conjunction with the local HSE Safe Guarding Team and will be recorded on HSE Templates (Appendix 3).

All records are to be kept securely in a separate file in line with the Enable Ireland Information Management Policy – see Section 4 of this Policy.

3. Stage 1: Responding to Concerns or Allegations of Abuse.

3.1 Stage 1-Concern Arises

Flow chart 1



Proceed to Stage 4 - Preliminary Screening

NOTE: At any stage in the procedure, if there are significant concerns in relation to a vulnerable person, the Chief Officer (CO) of the Community Healthcare Organisation must be notified immediately by the Enable Ireland Designated Officer through the relevant NSF Manager. The CO must immediately notify the Director of Social Care. Notification to, and advice from, the National Incident Management Team should be considered in such circumstances and consideration as to whether the concern should be investigated using the HSE Safety Incident Management Policy (2014).

A concern regarding concerns or allegations of abuse of a vulnerable person may come to light in one of a number of ways:

- Direct observation of an incident of abuse
- Disclosure by a vulnerable person
- Disclosure by a relative/friend of the vulnerable person

- Observation of signs or symptoms of abuse
- Reported anonymously
- Come to the attention as a complaint through the HSE or agency/organisation complaints process.

The alleged perpetrator may, for example, be a family member, a member of the public, an employee of Enable Ireland, the HSE or another organisation providing services. Abuse can take place anywhere - in an Enable Ireland service, a service operated by the HSE or in an organisation funded by the HSE. The concern/complaint may also arise in the person's own home or other community setting.

If unsure that an incident constitutes abuse or warrants actions, the employee must consult with his/her service manager, the Enable Ireland Designated Officer or, through the Enable Ireland Designated Officer, the HSE Safeguarding and Protection Team.

While respecting everyone's right to self-determination, situations can arise where information is suggestive of abuse and a vulnerable person does not wish to engage. If the risk is of concern, a conference may be appropriate to review and develop possible interventions. Legal advice may also be appropriate. Employees who encounter such situations should liaise with their service manager and the Enable Ireland Designated Officer (where appropriate).

The following are key responsibilities and actions for any employee or volunteer who has a concern in relation to the abuse or neglect of a vulnerable adult. These responsibilities must be addressed on the same day as the alert is raised.

Immediate Protection

Take any immediate actions to safeguard anyone at immediate risk of harm including seeking, for example, medical assistance or the assistance of An Garda Síochána, as appropriate.

Listen, Reassure and Support

If the vulnerable adult has made a direct disclosure of abuse or is upset and distressed about an abusive incident, listen to what he/she says and ensure he/she is given the support needed. Do not:

- Appear shocked or display negative emotions
- Press the individual for details
- Make judgments
- Promise to keep secrets
- Give sweeping reassurances

Detection and Prevention of Crime

Where there is a concern that a serious criminal offence may have taken place, or a crime may be about to be committed, discuss with the appropriate line manager and contact An Garda Síochána immediately. Ensure the Designated Officer is informed of all actions taken. In non-emergency situations the Designated Officer will inform An Garda Síochána when appropriate.

Record and Preserve Evidence

Preserve evidence through recording and take steps to preserve any physical evidence (if appropriate).

As soon as possible on the same day, make a detailed written record of what you have seen, been told or have concerns about and who you reported it to. Try to make sure anyone else who saw or heard anything relating to the concern of abuse also makes a written report.

The report will need to include:

- when the disclosure was made, or when you were told about/witnessed this incident/s
- who was involved and any other witnesses, including service users and other employees
- exactly what happened or what you were told, using the person's own words, keeping it actual and not interpreting what you saw or were told
- any other relevant information, e.g. previous incidents that have caused you concern.

Remember to:

- include as much detail as possible
- make sure the written report is legible and of a quality that can be photocopied
- make sure you have printed your name on the report and that it is signed and dated
- keep the report/s confidential, storing them in a safe and secure place until needed.

Report & Inform

Report to Designated Officer/Service Manager as soon as possible (see Appendix 2). This must be reported on the same day as the concern is raised. The Service Manager must liaise with the Designated Officer to ensure the care, safety and protection of the victim and any other potential victims, where appropriate. He/she must check with the person reporting the concern as to what steps have been taken (as above) and instigate any other appropriate steps, including ensuring the Designated Officer is informed. Out of hours, the on-call Service Manager must be contacted without delay.

The following must be done by the Designated Officer/Service Manager

The Designated Officer/Service Manager must report the concern to the HSE Safeguarding and Protection Team (Vulnerable Persons) within three working days after he/she has been informed of the concern (see Appendix 3).

If the concern relates to a designated centre, the Designated Officer must liaise with the Person in Charge to ensure information is shared appropriately. The Person in Charge must notify HIQA in writing within three working days on the appropriate form.

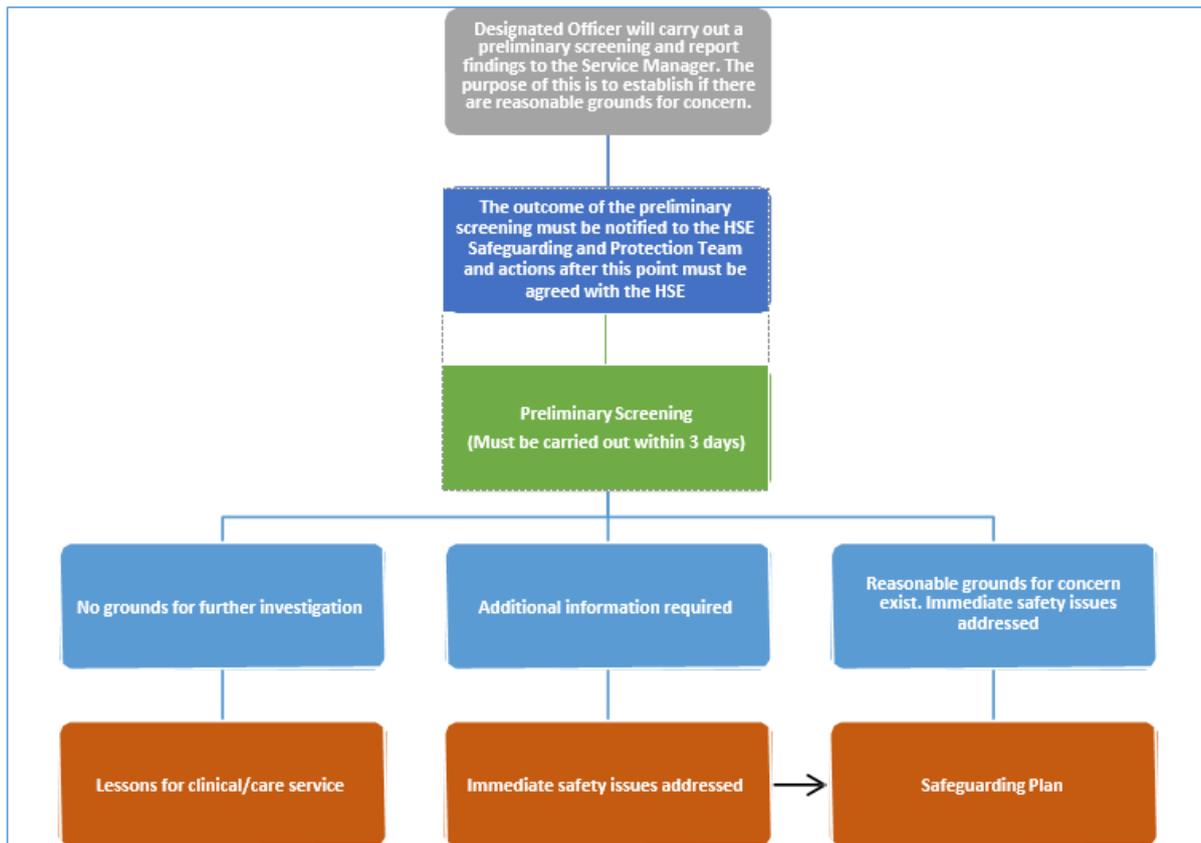
The Service Manager/Designated Officer or Person in Charge (as appropriated) must also notify Túsla immediately if there are concerns in relation to children.

Nothing should be done to compromise the statutory responsibilities of An Garda Síochána. If it is considered that a criminal act may have occurred, agreement on engagement with the person who is the subject of the complaint should be discussed with An Garda Síochána.

4. Stage 2 – Preliminary Screening

Note: At any point in the process, it may be appropriate to consult with the HSE Safeguarding and Protection Team (Vulnerable Persons) or An Garda Síochána. In such instances, a written note must be kept of any such consultation.

Flow Chart 2



The outcome of any assessment/inquiry following preliminary screening must be reviewed with the HSE Safeguarding and Protection Team (Vulnerable Persons) and a plan to address necessary actions approved.

4.1 Stages of Preliminary Screening

The Enable Ireland Director of Service/National Manager is responsible for ensuring that the Preliminary Screening takes place. The Preliminary Screening will take account of all relevant information which is readily available in order to establish:

- If an abusive act could have occurred and
- If there are reasonable grounds for concern.

This process should be led by the Designated Officer or other person as determined by the Enable Ireland Director of Service/National Manager and completed, if possible, within 3 working days following the report. Additional expertise may be added as appropriate.

4.2 Ensuring Immediate Safety and Support

On receipt of the report of suspected or actual abuse, the Designated Officer/Service Manager will establish and document the following:

- What is the concern?
- Who is making the report?
- Who is involved, how they are involved and are there risks to others? What actions have been taken to date?
- Biographical information of those involved, including the alleged perpetrator where appropriate, e.g. name, gender, DOB, address, GP details, details of other professionals involved, an overview of health and care needs (and needs relating to faith, race, disability, age, and sexual orientation as appropriate)
- What is known of their mental capacity and of their wishes in relation to the abuse/neglect?
- Any immediate risks identified, or actions already taken, to address immediate risks
- Establish the current safety status of the victim. Arrange medical treatment if required
- Establish if An Garda Síochána have been notified
- Ensure referral to Túsla where a child is identified as being at risk of harm.

4.3 Information Gathering

The Designated Officer or an appropriate employee nominated by the Enable Ireland Director of Service/National Manager will be appointed to manage the intra and/or inter-agency safeguarding procedure and processes, including co-ordinating assessments.

The person referred should be contacted at the earliest appropriate time. Consent to share or seek information should be addressed at this stage.

It is important to remember that in the process of gathering information, no actions should be taken which may put the person/s referred or others at further risk of harm or that would contaminate evidence.

The types of information to be gathered will be dependent on the individual circumstances of the report. Accordingly, information sources will vary depending on the nature of the referrals but some examples include:

- Gaining the views of the individual referred;
- Checking of electronic/paper files to establish known history of person;
- Checking if there are services already in place and liaison with those services;
- Verifying referral information and gaining further information from the referral source;
- Considering consultation with An Garda Síochána to see if they have any information relating to the person/s referred or alleged perpetrator.

In general, through the information gathering process, the following information should be available:

- Name of person/s referred
- Biographical details and address/living situation
- As much detail as possible of the abuse and/or neglect that is alleged to have taken place/is taking place/at risk of taking place (including how it came to light, the impact on the individual, and details of any witnesses)

- The views of the person/s referred and their capacity to make decisions
- Details of any immediate actions that have taken place (including use of emergency or medical services)
- An overview of the person/s health and care needs (including communication needs, access needs, support and advocacy needs)
- An overview of the persons needs
- GP details and other health services/professionals
- Details of other services/professionals involved
- Name of main carer (where applicable) or name and contact details of organisation providing support
- Checks made to ensure that the referral is not a duplicate referral
- Checks made for possible aliases
- Checks made if other services, teams or allocated workers are involved with the person/s referred or alleged perpetrator/s
- Checks made for previous concerns of abuse and/or neglect with regards to person/s referred
- Check for previous concerns of abuse and/or neglect with regards to the alleged perpetrator.

4.4 Involvement of Employees:

In situations where the allegation of abuse arises in respect of an employee of Enable Ireland, then the Enable Ireland Protocol for the Application of Trust in Care Policy 2016 will also be followed, in addition to this policy.

4.5 Involvement of a service user:

In the event that the concerns or allegations of abuse identifies a service user, the safeguarding plan must ensure that relevant professional advice on the appropriate actions is sought which may include, for example, a behavioural support programme.

The rights of all parties must receive individual consideration, with the welfare of the vulnerable person being paramount.

4.6 Outcome of Preliminary Screening

A report on the Preliminary Screening will be submitted to the Enable Ireland Director of Service/National Manager with a recommendation regarding proposed/required actions.

The report on the Preliminary Screening will be assessed by the Enable Ireland Director of Service/National Manager who will decide on appropriate actions and prepare a written plan for each action.

The report on the Preliminary Screening and the associated safeguarding plan will be copied to the HSE Safeguarding and Protection Team (Vulnerable Persons) who may advise on other appropriate actions.

Based on the information gathered, an assessment should be made which addresses the following:

- Does the person/s referred or group of individuals affected fall under the definition of Vulnerable Adult (as defined above)?
- Do the concerns referred constitute a possible issue of abuse and/or neglect?
- Where it is appropriate to do so, has the informed consent of the individual been obtained?

If consent has been refused and the person has the mental capacity to make this decision, is there a compelling reason to continue without consent? Have the risks and possible consequences been made known to the client?

The outcome of the Preliminary Screening may be:

- A. No grounds for reasonable concerns exist;
- B. Additional information required (this should be specified);
- C. Reasonable grounds for concern exist.

4.7 No grounds for reasonable concern

An outcome that there are not reasonable grounds for concern that abuse has occurred does not exclude an assessment that lessons may be learned and that, for example, clinical and care issues need to be addressed within the normal management arrangements. For example, there may have been breaches of the Code of Behaviour or there may be a need for risk assessment based on the incident.

4.8 Additional information required

A plan to secure the relevant information and the deployment of resources to achieve this within a specified time will be developed by the Enable Ireland Director of Service/National Manager. This may involve the appointment of a small team with relevant expertise. All immediate safety and protective issues must also be specified.

4.9 Reasonable Grounds for Concern Exists

A safeguarding plan must be developed to address the concerns.

The plan may include:

- Local informal process
- Internal Inquiry
- An Independent Inquiry
- Assessment and management by Safeguarding and Protection Team (Vulnerable Persons).

The outcome of the preliminary screening must be notified to the HSE Safeguarding and Protection Team (Vulnerable Persons) and actions after this point must be agreed with the HSE Safeguarding and Protection Team (Vulnerable Persons)

An Garda Síochána should be notified if the complaint/concern could be criminal in nature or if the inquiry could interfere with the statutory responsibilities of An Garda Síochána.

An investigation by An Garda Síochána should not necessarily prevent the inquiry. Where possible agreement should be reached with An Garda Síochána regarding the conduct of the inquiry and the issuing of a report. If necessary advice should be obtained in this regard.

5. The Safeguarding Plan

If the preliminary screening determines that reasonable grounds for concern exist a safeguarding plan must be developed. Responsibility to ensure a safeguarding plan is developed rests with the Enable Ireland Director of Service/National Manager. Please use Appendix 3.

Prior to the processes outlined in Section 6 Stage 3, Reasonable Grounds for Concern of this policy, a safeguarding plan must be developed, even if this can only be preliminary in nature. The safeguarding plan will need to be informed and amended by the process determined Section 6 Stage 3 below.

The Safeguarding Plan will outline the planned actions that have been identified to address the needs and minimise the risk to individuals or groups of individuals.

The Safeguarding Plan will be further developed in line with further assessments, i.e., when the appropriate assessments/investigations have been carried out to establish levels of risk and whether the abuse or neglect occurred. The Safeguarding Plan will be formulated in partnership with all relevant stakeholder parties.

A Safeguarding Plan will be informed by the Preliminary Screening and developed in all cases where reasonable grounds for concern exist.

5.1 Safeguarding Plan Co-ordinator

One lead person must be appointed to act as a co-ordinator of information and intervention. The Safeguarding Plan Co-ordinator will arrange a full review at agreed intervals. The responsibility for appointment of a Safeguarding Plan Co-ordinator will be with the Director of Service/National Manager.

If the vulnerable person has capacity and agrees to intervention, a Safeguarding Plan will be developed, as far as possible, in accordance with his/her wishes.

If the person has capacity and refuses services, every effort should be made to negotiate with the person. Time is taken to develop and build up rapport and trust. It is important to continue to monitor the person's wellbeing.

If the person lacks capacity, legal advice may be required to inform the decision making process. Decisions must be made in the best interests of the person and, if possible, based on his/her wishes and values. It is not appropriate to take a paternalistic view which removes the autonomy of the vulnerable person.

5.2 Timescale

The Safeguarding Plan should be formulated, even in a preliminary form, and implemented within three weeks of the Preliminary Screening being completed. A Safeguarding Plan Review should be undertaken at appropriate intervals and must be undertaken within six months of the Safeguarding Plan commencing and, at a minimum, at six monthly intervals thereafter or on case closure.

5.3 Formulating the Safeguarding Plan

The Safeguarding Plan should include, relevant to the individual situation:

- Positive actions to safeguard the person/s at risk from further abuse/neglect and to promote recovery

- Positive actions to prevent identified perpetrators from abusing or neglecting in the future.

The Safeguarding Plan should also include consideration of what triggers or circumstances would indicate increasing levels of risk of abuse or neglect for individual/s and how this should be dealt with.

5.4 Support for Vulnerable Adults

Support measures for vulnerable adults who have experienced abuse or who are at risk of abuse should be carefully considered when formulating the Safeguarding Plan. Mainstream support service provision, e.g., victim support services, should be considered as well as specialist support services, e.g., specialist psychology services, mediation, etc. The role of An Garda Síochána and related support measures should be considered where a vulnerable adult may be going through the criminal justice process, including use of intermediaries, independent advocates, etc.

Where there is a potential for criminal prosecution, it is important to ensure that support is provided to the vulnerable adult.

5.5 Updating the Safeguarding Plan

Updating and review of the Safeguarding Plan will be informed by all stages of the process. Discussions/meetings on the Safeguarding Plan will be arranged by the Safeguarding Plan Co-ordinator and should address the following:

- Feedback and evaluation of the evidence and outcomes from the assessments including making a multi-agency (where appropriate) judgement of whether the abuse/neglect has occurred, has not occurred, or whether this is still not known;
- A review of the initial Safeguarding Plan;
- An assessment of current and future risk of abuse/neglect to the individual, group of individuals, or others;
- To evaluate the need for further assessment and investigation;
- Where abuse/neglect has taken place, or an ongoing risk of abuse/neglect is identified, Safeguarding Plan should be agreed with proactive steps to prevent/decrease the risk of further abuse or neglect;
- Agreeing an ongoing communication plan, including the level of information that should be fed back to the person who raised the concerns (the referrer), other involved individuals or agencies, and who will be responsible for doing this; to set an agreed timescale for further review of the Safeguarding Plan.

5.6 The Safeguarding Plan Review

The Safeguarding Plan Review refers to the planned process of reviewing the actions and safeguards put in place through the Safeguarding Plan. If new or heightened concerns arise prior to the planned Review, these should be addressed in the Safeguarding Plan.

5.7 Aims of the Safeguarding Plan Review

The Safeguarding Plan Review should:

- Establish any changes in circumstances or further concerns which may affect the Safeguarding Plan;

- Evaluate the effectiveness of the Safeguarding Plan;
- Evaluate, through appropriate risk assessment, whether there remains a risk of abuse or neglect to the individuals or group of individuals;
- Make required changes to the Safeguarding Plan and set a further review date.

5.8 Evaluating the Safeguarding Process

The Safeguarding Plan Review process should also be used as an opportunity to evaluate the intervention in general terms, e.g., what worked well, what caused difficulties, how effectively did people and agencies work together?

This level of information should be fed back through the HSE Safeguarding and Protection Team (Vulnerable Persons) and disseminated to other employees/agencies as appropriate. Experiences from practice, positive and negative, can be used to facilitate learning arising from specific situations to enable services to develop and be in a better position to safeguard individuals at risk from abuse and neglect.

5.9 Closing the Safeguarding Plan

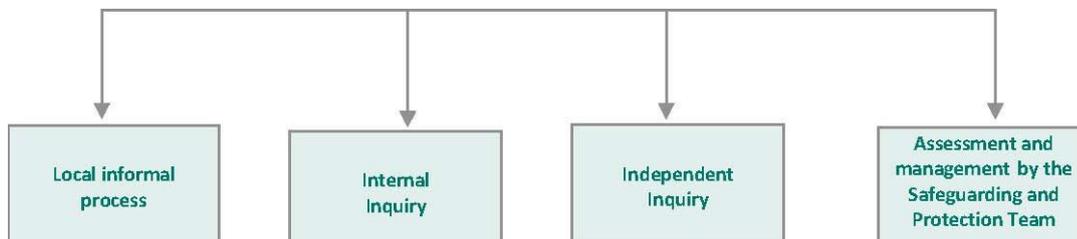
The updated risk assessment arising from a Safeguarding Plan Review may provide evidence that the risk of abuse or neglect has been removed, or through changed circumstances, be no longer appropriate to be managed through this procedure.

When this occurs, decisions should be taken with multi-agency agreement, where appropriate. Reasons and rationale for closing the procedure must be recorded in full. The client and/or referrer may be formally notified of closure where appropriate.

6. Outcome of Preliminary Screening

6.1 Reasonable Grounds for Concern have been established.

Flow Chart 3



If it is determined that abuse of a vulnerable person may have occurred, the responsibilities towards all relevant parties must be considered and addressed. These may include:

- The vulnerable person.
- The family of the vulnerable person.
- Other vulnerable persons, where appropriate.
- The perpetrator, particularly if a service user.
- Employees.

The needs of the vulnerable person is the paramount consideration and a formal Safeguarding Plan must be developed which addresses the therapeutic and support needs arising from the experience and the protective interventions aimed at preventing further abuse.

6.2 Local Informal Process

If it is established that, for example, a single incident has occurred which is not of a serious nature, the manager may decide to deal with the matter locally and informally. This would usually include training. This approach must be agreed with the vulnerable person. This should be notified to the HSE Safeguarding and Protection Team (Vulnerable Persons).

Inquiry – Internal or Independent

In establishing any form of inquiry, relevant Enable Ireland and HSE Policies must be considered. In considering the specific form of Inquiry, issues to be considered include;

- The nature of the concerns
- If the matters relate to an identifiable person, or incident, or to system issues
- The impact on confidence in the service
- The views of the vulnerable persons and/or his/her family

The Director of Service/National Manager/Senior Management Team will commission the inquiry. The commissioner of an inquiry must develop specific terms of reference and, where appropriate, ensure the appointment of a Chair and members with the suitable experience and expertise, both in services for vulnerable persons and in the application of fair procedures. The terms of reference should be

informed by appropriate professional advice. Arrangements for the provision of expert advice to the enquiry should also be outlined.

An Inquiry Report will usually contain certain conclusions and recommendations and it is the responsibility of the commissioner to receive the report and to determine the necessary actions.

[Assessment and Management by Safeguarding and Protection Team \(Vulnerable Persons\)](#)

In certain circumstances, the HSE Head of Social Care in each Community Healthcare Organisation may decide that the matter should be assessed and managed by the HSE Safeguarding and Protection Team (Vulnerable Persons).

The Head of Social Care in each Community Healthcare Organisation may also determine that another process, appropriate to the particular issues arising, is required and may arrange such a process. This may include the arranging of a comprehensive professional assessment.

[Management of an Allegation of Abuse against an Employee](#)

In situations where the allegation of abuse arises in respect of an employee of Enable Ireland, then the Enable Ireland Protocol for the Application of Trust in Care Policy 2016 will be followed.

The safety of the service user is paramount, and all protective measures proportionate to the assessed risk must be taken to safeguard the welfare of the service user.

Nothing should be done to compromise the statutory responsibilities of An Garda Síochána. If it is considered that a criminal act may have occurred, agreement on engagement with the person who is the subject of the complaint should be discussed in the first instance with An Garda Síochána.

7. Roles and Responsibilities

7.1 Role of Frontline Personnel in Enable Ireland

- Promote the welfare of vulnerable person in all interactions;
- Be aware of the services policy and any local procedures, protocols and guidance documents;
- Comply with the policy and procedure to ensure the safeguarding of vulnerable persons from all forms of abuse;
- Support an environment in which vulnerable persons are safeguarded from abuse or abusive practices through the implementation of preventative measures and strategies;
- Avail of any relevant training and educational programmes;
- Be aware of the signs and indicators of abuse;
- Support vulnerable persons to report any type of abuse or abusive practice;
- Ensure that any concerns or allegations of abuse are reported in accordance with the policy.

7.2 Role of Enable Ireland Director of Service/National Manager/Service Managers in Enable Ireland

- Ensure all procedures are carried out appropriately
- Promote a culture of zero tolerance for any type of abuse or abusive practice.
- Ensure that the policy and procedures is made available to all employees and volunteers and to all persons accessing services and their advocates/families in an accessible format
- Maintain a record of all employees and volunteers “sign off” on policies/procedures/guidelines pertaining to the safeguarding of vulnerable persons
- Ensure that all employees/volunteers receive the appropriate training with regard to the implementation of this policy
- Ensure safeguarding is part of the Induction Programme for everyone involved in the service
- Ensure that any concerns or allegations of abuse are managed in accordance with the policy
- Review Preliminary Screening and appoint a Safeguarding Co-ordinator as appropriate.
- Sign off on Safeguarding Plan and report to HSE/HIQA as appropriate.

7.3 Role of the HSE Head of Social Care

- Ensure that local policies and procedures developed by HSE services and service providers are compliant with national policy
- Ensure that service providers have in place arrangements to support the implementation of policy as specified in the Service Agreement/Contract
- Provide guidance and support to service providers
- Review on a quarterly basis all concerns or allegations of abuse and their current status
- Manage the Safeguarding and Protection Team (Vulnerable Persons).

7.4 Role of the HSE Safeguarding and Protection Team (Vulnerable Persons)

In each HSE CHO, a Safeguarding and Protection Team (Vulnerable Persons) is being developed to support the objectives of this Policy.

The Safeguarding and Protection Team will:

- Receive reports of concerns and complaints regarding the abuse of vulnerable persons

- Support services and professionals to assess and investigate the concern(s)/complaint(s) and develop intervention approaches and protection plans
- Directly assess particularly complex complaints and co-ordinate service responses
- Support, through training and information, the development of a culture which promotes the welfare of vulnerable persons, and the development of practices which respond appropriately to concerns or allegations of abuse of vulnerable persons
- Maintain appropriate records.

7.5 Role of Designated Officer

Each service will appoint a Designated Officer. In Enable Ireland this appointment is the responsibility of the Director of Service/National Manager. The Designated Officer shall receive specific training for this role.

The Designated Officer will be responsible for:

- Receiving concerns or allegations of abuse regarding vulnerable persons
- Carrying out preliminary screening if requested
- Collating basic relevant information
- Ensuring the appropriate manager is informed and collaboratively ensuring necessary actions are identified
- Ensuring all reporting obligations are met (internally to the service and externally to the statutory authorities)
- Supporting the manager and other personnel in addressing the issues arising.
- Maintaining appropriate records.

Note: These functions are those relevant to receiving and responding to concerns and complaints of abuse.

8. Notification

8.1 An Garda Síochána

An Garda Síochána must be informed if it is suspected that the concern or complaint of abuse may be criminal in nature; this may become apparent at the time of disclosure or following the outcome of the preliminary assessment.

8.2 HIQA

In designated centres, there is a requirement for the person in charge of a designated centre to report in writing to the Chief Inspector (HIQA) within 3 working days any adverse incident when the injury is deemed to be a consequence of an alleged, suspected or confirmed incident of abuse.

9. Enable Ireland Policy and Procedure Document Protected Disclosures Policy (March 2015)

This policy is in place for employees who wish to make a protected disclosure. Enable Ireland will provide support and advice where necessary to the employee who reports genuine concerns of fraud or malpractice in the organisation.

Good faith reports made to the Information Officer will be referred to the relevant HSE officer for investigation. The Information Officer will not disclose the identity of the employee making the good faith report where the employee so instructs.

In general, employees' identities will not be disclosed without prior consent. Where concerns cannot be resolved without revealing the identity of the employee raising the concern the HSE will enter into a dialogue with the employee concerned as to whether and how it can proceed. (Good Faith Reporting Policy, 2009).

10. Protected Disclosures

Section 103 of the Health Act 2007 and the Protected Disclosures Act 2014 provide for the making of protected disclosures by health service employees. If an employee reports a workplace concern in good faith and on reasonable grounds in accordance with the procedures outlined in the legislation it will be treated as a 'protected disclosure'. This means that if an employee believes that he/she has been subjected to detrimental treatment in relation to any aspect of his/her employment as a result of reporting their concern he/she may seek redress. In addition, employees are not liable for damages as a consequence of making a protected disclosure. The exception is where an employee has made a report which he/she could reasonably have known to be false.

11. Procedure for making a Protected Disclosure

The HSE has appointed an 'Authorised Person' to whom protected disclosures may be made. Employees are required to set out the details of the subject matter of the disclosure in writing on the Protected Disclosures of Information Form and submit it to the Authorised Person at the following address:

HSE Authorised Person
Box 11571 Dublin 2
Tel: 01-6626984

The Authorised Person will investigate the subject matter of the disclosure.

Confidentiality will be maintained in relation to the disclosure insofar as is reasonably practicable. However, it is important to note that it may be necessary to disclose the identity of the employee who has made the protected disclosure in order to ensure that the investigation is carried out in accordance with the rules of natural justice.

In certain limited circumstances, an employee may make a protected disclosure to a scheduled body or a professional regulatory body.

Appendix 1 - Signs and Symptoms of Abuse and Examples of Abusive Behaviour in Organisations

Physical Abuse

- Fractures
- Bruising
- Burns
- Pain
- Marks
- Not wanting to be touched

Sexual Abuse

- Genital itching, soreness or having a sexually transmitted disease
- Not wanting to be touched
- Behaving in a sexually inappropriate way
- Changes in appearance

Psychological Abuse

- Being withdrawn
- Too eager to do everything they are asked.
- Showing compulsive behaviour
- Not being able to do things they used to
- Not being able to concentrate or focus

Neglect

- Having pain or discomfort
- Being very hungry, thirsty or untidy
- Failing health

Material or Financial Abuse

- Having unusual difficulty with finances
- Not having enough money
- Being too protective of money and things they own
- Not paying bills
- Not having normal home comforts
- Persons money being used by others

Examples of Abusive Behaviour in Organisations

The following is a non-exhaustive list of behaviours and attitudes towards Service Users that are considered to constitute “institutional abuse”.

- Threatening to hurt the person.
- Using looks, actions or gestures to create fear or an environment of fear.
- Using any form of physical punishment.
- Excessively or inappropriately using restraint procedures.
- Enforcing a negative reinforcement programme or any behaviour programme the service user does not consent to, unless required to ensure the safety of the individual concerned or those around them.
- Using medication to sedate the service user for agency convenience.
- Destroying property.
- Withholding basic support and rights as punishment.
- Leaving the service user unattended or in conditions of discomfort, for example, in wet clothes for a period of time.
- Punishing or ridiculing.
- Constantly criticising a service user.
- Making sarcastic or belittling remarks about the service user.
- Refusing to speak and ignoring requests.
- Ridiculing a service user's culture, traditions, religion or personal taste.
- Discriminating against a service user on the basis of race.
- Causing emotional or psychological harm including acts of harassment, sexual harassment, threats, denigration, humiliation, or derisory comments.
- Withdrawing care to immobilise the service user.
- Withdrawing food or meals including supper or dessert as punishment.
- Ignoring equipment safety requirements.
- Refusing to use communication devices or systems.
- Treating the service user as a child or servant.
- Always making unilateral decisions for the service user.
- Providing care in a way that accentuates the service user's dependence or vulnerability.
- Being inattentive when providing intimate care to the service user.
- Giving an opinion as if it were the opinion of the service user.
- Denying the right to privacy.
- Ignoring, discouraging, or prohibiting the exercise of full capabilities.
- Reading service users' mail without their permission or deciding for them to whom they can write letters.
- Withdrawing opportunities to engage in social activities on a regular basis. If there is occasion to withdraw or restrict access to social activities, this should be documented and discussed and agreed in consultation with the service user.
- Engaging in socially inappropriate routines such as having pupils over 18 ready for bed in their pyjamas immediately after the evening meal, or getting people up too early just for the sake of the system.
- Discouraging contact with an advocate.
- Denying or making light of abuse.
- Justifying rules that limit autonomy, dignity and relationships for the programme's operational efficiency.
- Excusing abuse as behaviour management or caregiver stress.
- Blaming the disability of the service user for abuse.

- Using the service user's property or money for employee benefit or for the benefit of the service or other service users.
- Using the service user's own property or money as a reward or punishment in a behaviour programme.
- Limiting access to financial information and resources resulting in unnecessary impoverishment.
- Ignoring health and safety requirements.

Appendix 2 - Enable Ireland: Report of Concerns, Suspicions or Allegations of Abuse Form

Enable Ireland Report of Concerns, Suspicions or Allegations of Abuse

Name of pupil over
18

D.O.B.

Address:

Date reported to Designated Officer/Service Manager

Date first became aware of incident/suspicion/concern:

Whose suspicion:

Reason for concern (include dates, times, specific incidents and all other known relevant information) Please attach a continuation sheet if necessary

Describe which of the following categories to which you believe the suspected abuse belong:

- | | |
|--------------|-------------------------|
| 1. Physical | 4. Neglect |
| 2. Sexual | 5. Material & financial |
| 3. Emotional | 6. Institutional |

Reasons

Has the pupils over 18 user said anything to you in relation to this?

Yes

No

If yes, what was said? (Try to avoid paraphrasing)

Have family members of the service user or other service users said anything to you in relation to this?

Yes

No

If yes what was said and by whom?

Is anyone else aware of this concern?

Yes

No

If yes record details

Signature: _____

Date: _____

(This form should be completed, signed and dated by the person expressing the concern)

Admin Only:

Date:

Given to Designated Officer

Appendix 3



SAFEGUARDING VULNERABLE PERSONS AT RISK OF ABUSE NATIONAL POLICY & PROCEDURES PRELIMINARY SCREENING FORM (PSF1)

Please indicate as appropriate: Community setting: Service setting:

1. Details of Vulnerable person:

Name:

Home Address:

Current Phone No:

Date of Birth: / / Male Female

Location of vulnerable person if not above address

Service Organisation (if applicable):

Service Type:

Residential Care Day Care Home care Respite Therapy intervention

Other (please specify)

Designated Officer (DO) Name:

Community Health Organisation (CHO) Area:

2. Details of concern / allegation:

a) Pen picture of vulnerable person:

b) Details of concern / allegation including time frame:

c) Was an abusive incident observed and details of any witnesses:

d) Relevant contextual information:

e) Have any signs or indicators of abuse been observed and reported to the designated officer?
Please specify?

f) Details of investigation/ assessment to date?

g) Is it deemed at this point that there is an ongoing risk? If so please specify?

h) Include any incident report or internal alert details if completed(as attachment):

i) Details of any internal risk escalation:

3. Relevant information regarding concern / allegation:

Date that concern or allegations were notified to the Designated Officer:

Who has raised this concern or allegation?

Self Family Service Provider Healthcare staff Gardaí Other (*please specify*)

Type of concern or category of suspected abuse:

Physical Abuse Sexual Abuse Psychological Abuse Financial / Material Abuse
Neglect / Acts of Omission Extreme Self-neglect Discrimination Institutional

Setting / Location of concern or suspected abuse:

Own Home Relatives Home Residential Care Day Care Other (*please specify*)

Is this concern/allegation linked to another preliminary screening? If so please give reference

Are there any concerns re: decision making capacity? **Yes** **No**

Are you aware of any formal assessment of capacity being undertaken?

Yes No

Outcome:

Is the Vulnerable person aware that this concern has been raised? **Yes** **No**

What is known of the vulnerable person's wishes in relation to the concern / allegation?

Are other agencies involved in service provision with this vulnerable person that you are aware of?

Yes No

If yes, Details:

4. Details of the first point of contact:

Name:

Address:

Phone:

Nature of relationship to vulnerable person (i.e. family member/ advocate etc):

Is this person aware that this concern has been reported to the Designated Officer?

Yes No Not know

If no – why not?

If yes – date by whom?

Has an Enduring Power of Attorney been registered in relation to this Vulnerable Person?

Yes No Not know

Contact details for Registered Attorney(s):

Is this Vulnerable Person a Ward of Court? Yes No

Contact details for Committee of the Ward:

Has any other relevant person been informed of this preliminary screening? Details?

5. Details of the first point of contact:

Name: Address:

Date of Birth (if know)

Gender: Male Female

Relationship to Vulnerable person:

Parent

Son Daughter Neighbor/Spouse Staff Other

Service User / Peer

Stranger

Other

(please specify)

6. Details of Person completing preliminary screening:

Name: Phone:

Address:

Job Title:

Are you the Designated Officer:

Email:

Date

Preliminary Screening Outcome Sheet (PSF2)

Name of vulnerable person

- a) No grounds for further investigation
(If necessary attach any lessons to be learned as per policy)
- b) Additional information required (Immediate safety issues addressed and interim safeguarding plan developed)
- c) Reasonable grounds for concern exist (Immediate safety issues addressed and interim safeguarding plan developed)
Additional actions undertaken:

- | | | | |
|-----------------------|-----|----|-----|
| d) Medical assessment | Yes | No | N/A |
| e) Medical treatment | Yes | No | N/A |
| f) Gardai notified | Yes | No | N/A |

An Garda Síochána should be notified if the complaint / concern could be criminal in nature or if the inquiry could interfere with the statutory responsibilities of An Garda Síochána

- | | | | |
|----------------------|-----|----|-----|
| g) Referred to TUSLA | Yes | No | N/A |
|----------------------|-----|----|-----|
- h) Other relevant details including any immediate risks identified:

(Attach any interim safeguarding plan on appendix 1 template as required)

If the preliminary screening has taken longer than three working days to submit please give reasons:

Name of Designated Officer/ Service Manager:

Signature:

Date sent to Safeguarding and Protection Team:

Preliminary Screening Review Update Sheet from Designated Officer/ Service - Manager (PSF4)

(Only for completion if requested by Safeguarding and Protection Team)

Name of vulnerable person

Unique Safeguarding ID generated

Date returned to SPT:

Name of Designated Officer/Service
Manager

Signature:

Reply with details on any clarifications, additional information or follow up actions requested:

Date received by SPT:

Date reviewed by SPT:

Preliminary screening agreed by
safeguarding and protection team:

Yes

No

Name of SPT member reviewing
form:

Signature:

If not in agreement with outcome at this point give outline of reasons and planned process to address outstanding issues in preliminary screening:

Interim Safeguarding Plan. Please include follow up actions and any safety and supports measures for the Vulnerable Person:

What are you trying to achieve	What specific follow up or safeguarding actions are you taking to achieve this	Who is going to do this	When will this be completed	Review date for actions	Review Status/Update

Name of Designated Officer/ Service Manager:

Date of Interim safeguarding plan:

SOCIAL CARE DIVISION

**SAFEGUARDING VULNERABLE PERSONS AT RISK OF ABUSE NATIONAL POLICY & PROCEDURES
FORMAL SAFEGUARDING PLAN (FSP1)**

Please indicate as appropriate: Community setting: Service setting:

1. Details of Vulnerable person:

Name:

Home Address:

Current Phone No:

Date of Birth: / / Male Female

Location of vulnerable person if not above address

Service Organisation (if applicable):

Service Type:

Residential Care Day Care Home care Respite Therapy intervention

Other (please specify)

Designated Officer (DO) Name:

Community Health Organisation (CHO) Area:

2. Details of safeguarding report:

- a) Summary of the reasonable grounds for concerns that have been established (Give a summary of investigation/assessment process and an analysis of allegation/concern :
- b) What are the needs and risks identified including any triggers or circumstances that may indicate increased level of risk for the vulnerable person? (Indicate on-going supports/services to be put in place as a result of devising a formal safeguarding plan)
- c) Is the Vulnerable person aware that a safeguarding plan has been devised? Yes No
What is known of the vulnerable person's wishes in relation to the safeguarding plan?
- d) Detail and outcome of any Strategy Meeting or Case Conference if held:

e) Detail of Formal Safeguarding Plan to address current and/or any anticipated future safeguarding risks for the Vulnerable Person:

What are you trying to achieve	What specific safeguarding actions are you taking to achieve this	Who is going to do this	When will this be completed	Review date	Review Status/Update -Initial review of planned actions must be within six months	R A G

Name of Safeguarding Co-ordinator: Date of Initial Safeguarding Plan: Date of Review of Safeguarding plan:

RAG: Red –unable to complete action/significant delay.
 Amber- Action delayed or difficulty achieving.
 Green- Action complete or will be complete within timescale.

f) Category of concern(s)/suspected abuse where reasonable grounds have been established and formal safeguarding plan has being formulated:

Physical Abuse Sexual Abuse Psychological Abuse Financial / Material Abuse
Neglect / Acts of Omission Extreme Self Discrim

g) Additional information:

If it is deemed at this point that a level of risk remains please give reasons why it is not possible to fully ensure safety?

Does vulnerable adult need support if seeking justice/redress?

Is this concern/allegation linked to another preliminary screening or safeguarding plan? If so please give details:

Were other agencies notified as part of formulating this safeguarding plan i.e. Gardai or HIQA?
Yes / No

If yes, Details:

Where reasonable grounds have been established indicate potential stage three outcomes:

Are other agencies involved in service provision with this vulnerable person that have are relevant or have a role in the safeguarding plan? **Yes** **No**

If yes, Details:

h) Details of Safeguarding Plan Co-ordinator:

Name:

Tel:

Address:

Job Title:

Are you the Designated Officer:

Email:

Date:

i) Details of Person completing Safeguarding Plan if different from above:

Name:

Tel:

Address:

Job Title:

Are you the Designated Officer:

Email:

Date:

Preliminary Screening Review Update Sheet from Designated Officer/ Service - Manager (PSF4)

Name of vulnerable person:

Unique ID:

Name of Safeguarding Plan co-ordinator:

If the safeguarding plan has taken longer than three weeks to formulate and implement please give reasons:

Signature:

Date sent to Safeguarding and Protection Team:

Safeguarding and Protection Team overview of Plan

Date received by SPT:

Date reviewed by SPT:

Name of SPT member reviewing form:

Signature:

Preliminary screening agreed by safeguarding and protection team:

Yes

No

If not in agreement with outcome at this point give outline of reasons and planned process to address outstanding issues in preliminary screening:

Commentary on areas in form needing clarity or further information:

Any other relevant feedback including any follow up actions requested:

Name:

Signature:

Date review form returned to Safeguarding Plan co-ordinator:

Formal Safeguarding Plan Update Sheet from Safeguarding Plan Co-ordinator (FSP3):

(Only for completion if requested by Safeguarding and Protection Team)

Name of vulnerable person:

Unique Safeguarding ID:

Date returned to SPT:

Name of Safeguarding Plan co-ordinator:

Signature:

Reply with details on any clarifications, additional information or follow up actions requested:

Date received by SPT:

Date reviewed by SPT:

Safeguarding Plan agreed by Safeguarding and Protection Team

Appendix 4

DESIGNATED OFFICERS ENABLE IRELAND ADULT SERVICES

DUBLIN ADULT SERVICES		
Enable reland Dublin Adult Services Sandymount Dublin 4	Mary Fox Denise Cooney Marie Vaughan Michele White	087 9783477 086 8521288 087 6647074 087 9066762
MEATH		
Enable Ireland Meath Adult Services Unit 13, Mullaghboy Ind. Est Navan Co. Meath	Mary Fox Denise Cooney Marie Vaughan Michele White	087 9783477 086 8521288 087 6647074 087 9066762
KILKENNY		
Enable Ireland O'Neill Centre St. Joseph's Road Kilkenny	Paula Rudkins	087 9907232
CORK – Harbour Lights		
Enable Ireland Harbour Lights Castleroad Blackrock Cork	Terry Datson Olivia Wilkinson	087 2578902 021 4358075
CORK – Ard na Mara		
Enable Ireland Ard na Mara Ballyhimikin Ladysbridge Co Cork	Terry Datson Claire Nash	087 2578902 087 9404739
CORK – Adult Services		
Enable Ireland Unit 5- 7 Eastgate Drive Eastgate Business Park Little Island Co Cork	Terry Datson Claire Nash	087 2578902 087 9404739
KERRY – Adult Services		
Enable Ireland Edward Street	Terry Datson Paula Henry	087 2578902 087 9938193

Tralee Co Kerry		
MID-WEST - Limerick		
Enable Ireland Blackberry Park Ballykeefe Limerick	Tony Murphy Dolores Ryan Nancy Geary	087 2861460 087 1255747 087 1410261
MID-WEST - Clare		
Enable Ireland Lifford Road Ennis Co Clare	Tony Murphy Barbara Curley (on mat leave)	087 2861460 086 8285688
MID-WEST – North Tipperary		
Enable Ireland Family Support & Respite 2 Cudville Nenagh Co Tipperary	Tony Murphy Debbie Finn	087 2861460 087 9669880
GALWAY		
Enable Ireland Seamus Quirke Road Newcastle Galway	Clare Lenehan Dave Travis	087 9684284 087 6809877
MAYO		
Enable Ireland Unit 12A N5 Business Park Moneen Castlebar Co Mayo	Clare Lenehan Maura Prendergast	087 9684284 087 2711575