

General Safeguarding information and guidance

It is a legal requirement of all the Charity Commissions that **all u3as (and other charities) must have a safeguarding policy in place to protect their members.** Non-charity u3as in Scotland effectively govern as charities and must therefore also have a safeguarding policy in place. A template policy and procedure is provided in Section 2.

Should you come across a case such as those described below contact a member of the committee immediately.

SECTION 1: Safeguarding information and overview

1. What is safeguarding?

“Safeguarding” refers to measures designed to protect the health, wellbeing and human rights of individuals.

- All u3a members have a responsibility to report any safeguarding concerns to their committee.
- All u3a committee members have an obligation to follow their safeguarding policy and procedure if they suspect that a member is at risk of abuse.

2. What are some examples of where safeguarding procedures may be activated?

- A member controlling the finances of a visually impaired member.
- A member arriving at an outdoor-based group without appropriate clothing and seemingly confused.
- A member making advances towards another member with dementia.

3. What is the responsibility of members in safeguarding?

Safeguarding is everyone’s responsibility, and members must bring any safeguarding concerns they have to their committee (this can be via their group leader). Members should follow their code of conduct and not keep any concerns they have to themselves.

people who know an older person who may be suffering abuse. Available weekdays 9am - 5pm on freephone 0808 808 8141.

4. What are the signs and indicators of abuse and neglect?

Abuse may be inflicted by anyone that the member comes into contact with. There are many signs and indicators that may suggest abuse or neglect including:

- Unexplained bruises or injuries – or lack of medical attention for an injury
- Non attendance at interest groups without reason and no response to reminders from group leaders or other members.
- Significant loss or gain of weight and/or an unkempt appearance.
- A change in the behaviour or confidence of a member, where they become quiet and withdrawn, or lash out in anger.
- A member showing fear of a particular group or individual.

- A member who sends unwanted sexually explicit text messages to a vulnerable member
- Threats of physical harm and bullying, or intentional striking of another member.

Additionally, a member may report they are being abused – i.e., a disclosure.

5. How do you deal with a disclosed safeguarding concern?

If someone discloses a safeguarding concern to you:

Do:

- Stay calm and try not to show shock or disbelief.
- Listen carefully to what they are saying.
- Be sympathetic (“I’m sorry that this has happened to you”).
- Be aware of the possibility that medical evidence might be needed.
- Tell the person that:
 - They did the right thing to tell you.
 - You are treating the information seriously. It was not their fault.
 - You are going to inform the appropriate person.
 - You/ will take steps to protect and support them.
- Record and report the disclosure in line with your safeguarding policy and procedure.

Do not:

- Press the person for more details if they are not comfortable sharing.
- Stop someone who is freely recalling significant events (Don’t say ‘hold on, we’ll come back to that later’; they may not tell you or anybody else again).
- Promise to keep secrets; you have a duty of care to raise safeguarding concerns.
- Make promises you cannot keep such as “this will never happen to you again”.
- Contact the alleged abuser unless they are also a u3a member and it is necessary to do so to safeguard other members.
- Be judgemental.
- Pass on the information other than to those with a legitimate ‘need-to-know’ under your safeguarding policy and procedure.

6. How should you record a safeguarding concern?

- Note what people actually said, using their own words and phrases.
- Describe the circumstances in which the disclosure came about.
- Note the setting and anyone else who was there at the time of the disclosure.
- Separate factual information from your own and others’ opinions.
- Use pen or biro with black ink so that the report can be photocopied if needed.
- Be aware that your report may be required later as part of a legal action or disciplinary procedure.

7. Key Definitions

Adult at risk

Any person aged 18+ who has need for care and support, is experiencing, or is at risk of abuse or neglect, and as a result of those needs is unable to protect themselves against the abuse or neglect, or risk of it.

Abuse

is the “violation of a person’s human and civil rights by any other person(s). It may be a single or repeated act(s), physical verbal, psychological, sexual, institutional, discriminatory, or financial, an act of neglect or failure to act”.

Types of abuse

- **Physical abuse** e.g. assault, hitting, slapping, pushing.
- **Domestic violence** e.g. psychological, physical, sexual, financial, emotional.
- **Sexual abuse** – including inappropriate looking or touching, indecent exposure and sexual harassment.
- **Psychological abuse** e.g., threats of harm, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation.
- **Financial or material abuse** e.g., theft, fraud, internet scamming, coercion in an adult’s financial affairs/arrangements, including with wills, property, inheritance or finances, or the misuse/misappropriation of property, possessions or benefits.
- **Modern slavery** encompasses slavery, human trafficking, forced labour and domestic servitude.
- **Discriminatory abuse** including harassment, slurs, or similar treatment because of race, gender and gender identity, age, disability, sexual orientation or religion.
- **Organisational abuse** – including neglect in relation to care provided at home. This may be a one off incident or on-going ill-treatment, through neglect or poor professional practice.
- **Neglect and acts of omission** – including ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, withholding of medication, adequate nutrition and heating.

Self-neglect – this covers a wide range of behaviour neglecting to care for one’s personal hygiene, health or surroundings and includes behaviour such as hoarding.