



Safeguarding Policy For children and vulnerable adults

We are committed to safeguarding children and vulnerable adults. Our team accepts and recognises our responsibilities to develop an awareness of the issues which may cause children and vulnerable adult's harm.

We endeavour to safeguard children and vulnerable adults by:

- An awareness of and adopting safeguarding guidelines through our practice procedures and policies.
- A code of conduct for the team.
- Making staff and teachers aware that we take child and vulnerable adult protection seriously and respond to all concerns.
- Sharing information about concerns with agencies that need to know and involving parents and children appropriately.
- Following carefully the procedures for staff recruitment and selection and, where appropriate, requesting enhanced criminal records checks and ISA Adult First checks.
- Providing effective management for staff by ensuring access to supervision, support and training.

This policy is underpinned by the following principles:

- Patients have access to information and knowledge to ensure that they can make an informed choice.
- Patients are given the opportunity to consider the various treatment options available to them. They are encouraged to participate fully in their care at the practice.
- Patients are supported to make their own decisions and to give or withhold consent to treatment.
- Unless provided for otherwise by law, no-one can give or withhold consent on behalf of another adult.
- Information about patients held by the practice is managed appropriately and all members of the team understand the need for confidentiality.
- The individual needs of each patient are respected.
- The background and culture of all patients are respected.
- Practice procedures ensure the safety of patients at all times.
- Recruitment and selection procedures at the practice are followed routinely and ensure that all required checks are carried out.

Other practice policies relevant to this safeguarding policy include:

- Confidentiality policy
- Consent policy
- Equal opportunities policy
- Equality and diversity policy
- Patient safety policy

- Recruitment policy

Within our team, the Charity Coordinator is our safeguarding champion, responsible for ensuring our procedures for safeguarding children and vulnerable adults are kept up to date and is our point of contact for raising concerns.

We are committed to reviewing our policy and good practice standards at regular intervals.

Supporting guidance

Patients should be kept safe from harm and danger. All members of the team should know what to do to keep patients safe and what action to take if they think that someone is being harmed.

Definitions

- A child is anyone who has not yet reached their 18th birthday.
- A vulnerable adult is a person aged 18 years or over who is, or may be, in need of community care services or is resident in a continuing care facility by reason of mental or other disability, age or illness or who is, or may be, unable to take care of him or herself or unable to protect him or herself against significant harm or exploitation.

Signs of abuse

Members of the team may observe the signs of abuse or neglect or hear something that causes them concern about a child or vulnerable adult. They are not responsible for making a diagnosis of child abuse or neglect, just for sharing concerns appropriately. Each team member should be aware of the local procedures for child protection.

Abuse or neglect may present to the dental team in a number of different ways:

- through a direct allegation (sometimes termed a 'disclosure') made by the child, vulnerable adult, a parent or some other person,
- through signs and symptoms which are suggestive of physical abuse or neglect,
- or through observations of child behaviour or parent-child interaction; or observation of the vulnerable adult and the relationship they have with their carer.

If abuse or neglect is suspected

It is uncommon for dentists to see patients with signs of abuse but where you have concerns about a patient who may have been abused and there is no satisfactory explanation, prompt action is important.

- Discuss your concerns with a colleague or the Charity Coordinator.
- If you remain concerned, seek informal advice from the local social services department without disclosing the child's name to help you decide whether a formal referral is needed.
- Seek permission from the patient to refer – unless doing so would put the patient at greater risk, the parents or carers are being abusive or violent and discussion would put others at risk, or sexual abuse by a family member is suspected.
- To make a formal referral please contact social services and speak to the duty care manager for further instruction.

Where there is serious physical injury arising from suspected abuse:

- Refer the individual to the nearest hospital A&E department, with the consent of the person having parental responsibility or care of the child.
- Advise the A&E department in advance that the patient is being sent.

Records

Records of the incident should be maintained and be restricted to:

- The nature of the injury
- Facts to support the possibility that the injuries are suspicious.

Date reviewed:

Date to review again:

Signed