

Saffron Acres

A Saffron Lane Neighbourhood Council Project
(Registered Charity No. 508230)



Safeguarding Adults



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Policy Review Details

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Nominated Designated Safeguarding Leads

Safeguarding Lead: Laura Gray (Project Manager)
Deputy: Lindsey Devey-Pavlik

Project Contact Number: 07393 035 999

Project Email: saffronacres@srcentre.org.uk

Correspondence Address: c/o 432 Saffron Lane, Leicester LE2 6SB

What is adult safeguarding?

Safeguarding means protecting an adult's right to live safely and free from abuse or neglect. It is also about people and organisations working together to prevent and stop abuse and neglect.

Who needs to be safeguarded?

People who need to be safeguarded:

- have care and support needs;
- are experiencing, or are at risk of, abuse or neglect; and
- are unable to protect themselves from either the risk of, or experiencing, abuse or neglect because of their care and support needs.

How should I respond?

If you are concerned an adult may be at risk of or experiencing abuse or neglect, you should discuss the situation with a manager or the safeguarding adults lead.

Local safeguarding adults board procedures should always be followed.

Links to local multi agency and Leicester based safeguarding boards can be found via <https://www.llradultsafeguarding.co.uk/>

Leicester
Safeguarding
Adults Board



Safeguarding
Adults Board
LEICESTERSHIRE & RUTLAND

1. ABOUT OUR SAFEGUARDING ADULTS POLICY

1.1 Policy Introduction

Saffron Lane Neighbourhood Council (SLNC) is committed to Safeguarding Adults across all of the projects run by the charity, in line with national legislation and relevant national and local guidelines. We are committed to providing a safe environment for everyone to participate in our organisation and its activities. We will safeguard adults by ensuring that our activities are delivered in a way which keeps adults safe. SLNC is committed to creating a culture zero-tolerance of harm to adults which necessitates: the recognition of adults who may be at risk and the circumstances which may increase risk; knowing how adult abuse, exploitation or neglect manifests itself; and being willing to report safeguarding concerns. This extends to recognising and reporting harm experienced anywhere, including within our activities, within other organised community or voluntary activities, in the community, in the person's own home and in any care setting. SLNC is committed to best safeguarding practice and to uphold the rights of all adults to live a life free from harm, from abuse, exploitation and neglect.

The procedures in this document must be followed in any circumstances where an adult is at risk of harm. These procedures detail the steps to be taken in responding to any concern that an adult involved in SLNC, or its activities, is at risk of or is experiencing harm.

1.2 Why a Policy is Needed

Feeling unsafe or excluded from an activity or access to a service is a significant barrier to getting involved or accessing support for some groups and individuals.

Participation in the activities and access to the services provided by SLNC can play an important role in helping people to live fulfilling lives.

'Accessible leisure facilities, safe town centre and community groups ... can reduce the social and physical isolation which may increase the risk of abuse or neglect'
14.12. The Care Act 2014.

The government policy is one of encouraging people to take part and develop a more active lifestyle, regardless of their age, background, or level of ability. This is reflected within the Saffron Acres Project (SAP) and across all of the projects run by the SLNC organisation. SLNC has a duty of care which includes 'safeguarding for children and people in a vulnerable situation'. The organisation needs to be informed enough to ensure that complaints/concerns about adults at risk are properly identified and acted upon. Organisations which fail to do this risk failing to meet their duty of care and leaving the individuals concerned at best disillusioned with our organisation or wider community, and at worst vulnerable to harm.

For this to be realised, SLNC has a duty to ensure that adults are able to take part fully, free from abuse and neglect. That includes working to prevent abuse from occurring, and responding proportionately if abuse or neglect has occurred.

Organisations also have a duty to respond if they feel that an adult is suffering or likely to suffer harm outside of the organisation. The Care Act 2014 put the safeguarding of adults onto a statutory footing. SLNC has regular contact with many people and so has a crucial role in the support, identification and reporting of adults who may be at risk of harm. Thus policies and procedures have a dual role – safeguarding of people when they are participating in SLNC activities or accessing its services, and responding to any signs of abuse that may indicate that abuse is occurring outside of the setting.

A safeguarding adults policy and procedures document sets out the best practice framework for an organisation to respond to safeguarding concerns and promotes the importance of safeguarding adults throughout the whole organisation. Safeguarding adults in our organisation is an important responsibility to take on to ensure wider participation and safe access for everyone. Organisations that demonstrate best practice in adult safeguarding, commit to both.

1.3 Policy Purpose

The purpose of this policy is to outline and demonstrate the commitment of SLNC to safeguarding adults and to ensure that staff, volunteers and everyone involved in SLNC is aware of cross-programme cohesion and how everyone across all projects run by SLNC work together to contribute to the prevention of abuse of vulnerable adults through raising awareness and providing a clear framework for action when abuse is suspected; specifically through knowledge of:

- The legislation, practice, policy and procedures for safeguarding adults.
- Their role and responsibility for safeguarding adults.
- What to do or who to speak to if they have a concern relating to the welfare or wellbeing of an adult within the organisation

This policy is aimed at protecting the vulnerable adult and the worker, recognising the risks involved in working in the various areas of the main centre, all satellite and location sites and in outreach working. The policy covers all staff, volunteers and areas of work. Failure to comply with the policy and related procedures will be addressed without delay and may ultimately result in dismissal/exclusion from the organisation. Implementation of this Policy is the responsibility of the Management Committee, in particular, the Chairperson and Vice-Chair. This Policy will be reviewed annually or earlier if necessary, as with all SLNC Policies.

1.4 Policy Scope

This safeguarding adult policy and associated procedures apply to all individuals involved in SLNC including Board members, Staff, Volunteers and individuals across all of the projects and programmes within the organisation, and to all concerns about the safety of adults whilst taking part in our organisation, its activities and in the wider community.

We expect our partner organisations and sister projects including for example, affiliated projects, suppliers and sponsors to adopt and demonstrate their commitment to the principles and practice as set out in this Safeguarding Adults Policy and associated procedures.

1.5 Policy Statement

SLNC is committed to protecting the welfare of every person as they participate in its services and/or activities.

SLNC believes everyone has the right to live free from abuse or neglect regardless of age, ability or disability, sex, race, religion, ethnic origin, sexual orientation, marital or gender status.

SLNC is committed to creating and maintaining a safe and positive environment and an open, listening culture where people feel able to share concerns without fear of retribution.

SLNC acknowledges that safeguarding is everybody's responsibility and is committed to prevent abuse and neglect through safeguarding the welfare of all adults involved.

SLNC recognises that the best protection for all people participating in our programmes is the vigilance and forethought of staff and volunteers in preventing circumstances where abuse of trust could occur.

SLNC recognises that health, well-being, ability, disability and need for care and support can affect a person's resilience. We recognise that some people experience barriers, for example, to communication in raising concerns or seeking help. We recognise that these factors can vary at different points in people's lives.

SLNC recognises that there is a legal framework within which projects need to work to safeguard adults who have needs for care and support and for protecting those who are unable to take action to protect themselves and will act in accordance with the relevant safeguarding adult legislation and with local statutory safeguarding procedures. SLNC understands its responsibility to comply with legislation and will constantly monitor developments in this field.

Actions taken by SLNC will be consistent with the principles of adult safeguarding ensuring that any action taken is prompt, proportionate and that it includes and respects the voice of the adult concerned. To that end, SLNC will strive to create a

safe and secure environment where clients, volunteers and staff can work together confidently in mutual respect.

1.6 Policy Commitments

In order to implement this policy SLNC will ensure that:

- Everyone involved with SLNC is aware of the safeguarding adult procedures and knows what to do and who to contact if they have a concern relating to the welfare or wellbeing of an adult.
- Any concern that an adult is not safe is taken seriously, responded to promptly, and followed up in line with SLNC's Safeguarding Adults Policy and Procedures.
- The well-being of those at risk of harm will be put first and the adult actively supported to communicate their views and the outcomes they want to achieve. Those views and wishes will be respected and supported unless there are overriding reasons not to (see the Safeguarding Adults Procedures).
- Any actions taken will respect the rights and dignity of all those involved and be proportionate to the risk of harm.
- Confidential, detailed and accurate records of all safeguarding concerns are maintained and securely stored in line with our Data Protection Policy and Procedures.
- SLNC acts in accordance with best practice advice, for example, from Local Safeguarding Boards, National Governing Bodies, NSPCC, Ann Craft Trust, in addition to organisations and bodies which projects run by SLNC hold membership to or are regulated, monitored and audited by, including the Financial Conduct Authority, Care Farm UK, and the charities commission.
- SLNC will cooperate with the Police and the relevant Local Authorities in taking action to safeguard an adult.
- All Board members, staff and volunteers understand their role and responsibility for safeguarding adults and have completed and are up to date with safeguarding adult training and learning opportunities appropriate for their role.
- SLNC uses safe recruitment practices and continually assesses the suitability of volunteers and staff to prevent the employment/deployment of unsuitable individuals in this organisation.
- SLNC shares information about anyone found to be a risk to adults with the appropriate bodies. For example: Disclosure and Barring Service, Police, Local

Authority/Social Services.

- When planning activities and events SLNC includes an assessment of, and risk to, the safety of all adults from abuse and neglect and designates a person who will be in attendance as a safeguarding lead for that event.
- Actions taken under this policy are reviewed by management and the Board on an annual basis.
- This policy, related policies (see below) and the Safeguarding Adults Procedures are reviewed no less than on a two yearly basis and whenever there are changes in relevant legislation and/or government guidance as required by the Local Safeguarding Board, and/or National Governing Bodies and SLNC or as a result of any other significant change or event.

1.7 Policy Implementation

SLNC is committed to developing and maintaining its capability to implement this policy and procedures.

In order to do so the following will be in place:

- A clear line of accountability within the organisation for the safety and welfare of all adults.
- Access to relevant legal and professional advice.
- Regular management reports to the Board detailing how risks to adult safeguarding are being addressed and how any reports have been addressed.
- Safeguarding adult procedures that deal effectively with any concerns of abuse or neglect, including those caused through poor practice.
- A Safeguarding Lead/ Welfare Officer (see Appendix 1).
- A delegated Safeguarding Lead/Welfare Officer for all events and projects run by SLNC.
- A standing Case Management/ Case Referral Group with an appointed Chair and clear Terms of Reference if needed, with guidance from LA Safeguarding Board.
- A process for forming a Case Management Group on a case by case basis within clear terms of reference with guidance from LA Safeguarding Board as necessary.
- Arrangements to work effectively with other relevant organisations to safeguard and promote the welfare of adults, including arrangements for sharing information.
- Codes of conduct for Board members, Staff, Volunteers, Members and other relevant individuals that specify zero tolerance of abuse in any form.
- Risk assessments that specifically include safeguarding of adults.
- Policies and procedures that address the following areas and which are consistent with this Safeguarding Adults policy; including:

- ✓ Safeguarding Children
- ✓ Bullying and harassment
- ✓ Social Media
- ✓ Equality, diversity and inclusion
- ✓ Safe activities risk assessments
- ✓ Code of Conducts and a process for breach of these - Staff, Volunteers, Participants/Members/Service Users, Carers/Personal Assistants
- ✓ Discipline and grievance
- ✓ Concerns, Complaints and Compliments
- ✓ Whistleblowing
- ✓ Safe recruitment and selection (staff and volunteers)
- ✓ Roles, Responsibilities and Contract compliance
- ✓ Information policy, data protection and information sharing

1.8 Safe Recruitment Process

This section includes information that forms a part of SLNC's Recruitment Policy and Procedures. Key information is included here for its relevance to Safeguarding Adults.

Safer recruitment is designed to help our organisation to develop the best practice for recruiting and vetting individuals working and volunteering with adults at risk.

Legally, anyone undertaking a role that involves contact with, or responsibility for, children or other vulnerable groups should be taken through a safer recruitment process. Adults at risk would be classed under the term 'vulnerable group'. Some individuals may not be suitable to work with adults at risk due to gaps in their understanding, skills or knowledge or due to previous concerns about conduct.

Organisations are only as good as the people who work and volunteer there. They should create a setting that makes everyone feel welcomed and safe. Respect for equality and diversity should be embedded within the culture of the organisation, which is promoted and underpinned in codes of conduct and policies and procedures across all projects run and managed by SLNC

There is also moral and social obligation for SLNC to demonstrate best practice, ensuring that it is the responsibility of staff/volunteers and participants to treat one another with dignity, respect, sensitivity and fairness, ensure that any discriminatory, offensive and violent behaviour is unacceptable and that complaints will be acted upon. This can only be undertaken by ensuring that people are recruited as safely as possible.

It is therefore essential that we have effective recruitment and selection procedures for both paid staff and volunteers. These will help to screen out and discourage those who are not suitable from joining SLNC.

Good recruitment practice includes the following considerations:

- The DBS disclosure and check against the barred list, if appropriate to the role, is only one part of a safe recruitment process. In all cases regarding the vetting of paid and voluntary staff working in this sector, standard best practice dictates a thorough checking of a person's qualifications and training attended.
- Detailed application forms, self-disclosure, robust interviews that include safeguarding, equality and diversity knowledge and skills (if appropriate to the role), checking references and thorough induction processes, verification of qualifications and experience, risk assessment of concerning information all form the basis of safe recruitment and best practice when recruiting individuals to work with adults at risk.
- When people are in post there is a probationary period and review and regular safeguarding training that includes safeguarding adults at risk.

DBS checks are just one 'check' that can be carried out but should not be solely relied upon in isolation. The Disclosure and Barring Service was created in 2012 when the Criminal Records Bureau (CRB) and Independent Safeguarding Authority (ISA) were merged. A Disclosure and Barring Service (DBS) check is a means of supplying organisations with the information they legally need to enable them to make correct recruitment and placement decisions, especially with regard to positions involving children & vulnerable groups. DBS checks are only one part of the recruitment process. Eligibility to apply for a DBS check depends on the specific role a person will perform whilst conducting their duties within an organisation.

There are three types of DBS checks:

- Standard - Shows filtered convictions, cautions, warnings and reprimands that are held on the police national computer.
- Enhanced - Shows everything that the standard check does plus additional discretionary information
- Enhanced with barred list check - Shows everything that the Enhanced check does plus an additional check of the appropriate 'barred list' for the work being done.

The legal duties for an organisation are:

1. Not knowingly allow a barred person to work in 'Regulated Activity';
2. Must inform the DBS if an individual is removed from 'Regulated Activity' because they have harmed or because they pose a risk of harm to vulnerable groups (including children).

After recruitment, all staff are provided with a Staff Handbook which must be read, understood and agreed to in writing (signed and dated) before commencing paid work. The Handbook includes copies of all current organisational policies and procedures and details of relevant inductions, training, supervision, probation periods and other relevant documents.

Projects and services run by and managed by SLNC (such as debt and benefits advice, befriending people with poor mental health, providing meaningful activities for people with disabilities, and more, for example) could create the opportunity for

adults at risk to build a relationship with a person of trust. Therefore, it is important to be aware of safer recruitment and subsequent policies and procedures across the organisation as one method of reducing risk and how it assists with our Safeguarding Adults Policies and Procedures.

2. SUPPORTING INFORMATION

2.1 Key Points

- There is a **legal duty on Local Authorities** to provide support to 'adults at risk'.
- **Adults at risk** are defined in legislation and the criteria applied differs between each home nation. The Care Act 2014 provides a definition for England, which can be found in the "Definition of an Adult at Risk" section in this document.
- The safeguarding legislation applies to **all forms of abuse** that harm a person's well-being.
- The law provides a framework for good practice in safeguarding that makes the overall **well-being** of the adult at risk a priority of any intervention.
- The law in all four home nations emphasises the importance of **person-centred safeguarding**. This is referred to as '**Making Safeguarding Personal**' in England.
- The law provides a framework for making decisions on behalf of adults who can't make decisions for themselves (**Mental Capacity**).
- The law provides a framework for organisations to **share concerns** they have about adults at risk with the local authority.
- The law provides a framework for all organisations to **share information and cooperate** to protect adults at risk.

2.2 Safeguarding Adults Legislation

Safeguarding Adults in all home nations is compliant with United Nations directives on the rights of disabled people and commitments to the rights of older people. It is covered by:

- The Human Rights Act 1998
- The Data Protection Act 2018
- General Data Protection Regulations 2018

The practices and procedures within this policy are based on the relevant legislation and government guidance.

England - The Care Act 2014

Care and Support Statutory Guidance (especially chapter 14) 2014

Many other pieces of UK and home nation legislation also affect adult safeguarding. These include legislation about different forms of abuse and those that govern information sharing. For example, legislation dealing with:

- Murder/attempted murder
- Physical Assault
- Sexual Offences
- Domestic Abuse/Coercive control
- Forced Marriage
- Female Genital Mutilation
- Theft and Fraud
- Modern slavery and Human exploitation
- Hate crime
- Harassment
- Listing and Barring of those unsuitable to work with adults with care and support needs

Each home nation also has legislation about the circumstances in which decisions can be made on behalf of an adult who is unable to make decisions for themselves. In England and Wales, this forms part of the Mental Capacity Act 2005. There are specific offences applying to the mistreatment of and sexual offences against adults who do not have Mental Capacity and specific offences where mistreatment is carried out by a person who is employed as a carer: e.g. wilful neglect and wilful mistreatment.

2.3 Definition of an Adult at Risk

The Safeguarding Adults legislation creates specific responsibilities on Local Authorities, Health, and the Police to provide additional protection from abuse and neglect to Adults at Risk.

When a Local Authority has reason to believe there is an adult at risk, they have a responsibility to find out more about the situation and decide what actions need to be taken to support the adult. The actions that need to be taken might be by the Local Authority (usually social services) and/or by other agencies, for example the Police and Health. An organisation may need to take action as part of safeguarding an adult, for example, to use the disciplinary procedures in relation to a member of staff or member who has been reported to be harming a participant. The Local Authority role includes having multi-agency procedures which coordinate the actions taken by different organisations.

England, (Care Act 2014)

An **adult at risk** is an individual aged 18 years and over who:

- (a) has needs for care and support (whether or not the local authority is meeting any of those needs) AND;
- (b) is experiencing, or at risk of, abuse or neglect, AND;

as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect

2.4 The Care Act 2014

“Adult safeguarding” is working with adults with care and support needs to keep them safe from abuse or neglect. It is an important part of what many public services do, and a key responsibility of local authorities.’ Care Act 2014

The Care Act 2014 made key changes to adult social care with a new general duty to “Promote individual well-being”. Alongside this, it put the safeguarding of adults on a statutory footing for the first time. Previously ‘No Secrets’ offered only guidance to Local Authorities and organisations regarding best practice in safeguarding adults. The Care Act applies to all people aged over 18 even when they may be receiving what may be thought of as a “children” or “young people’s” service, for example a 21 year old training with an under 18’s sports team.

Within the Act there has been a marked shift away from using the term ‘vulnerable’ to describe adults potentially ‘at risk’ from harm or abuse. The definition of “vulnerable adult” originated in the 1997 Consultation Document “Who Decides?”

'No Secrets' was then published as government guidance for developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse. Introduced in 2000 it encouraged organisations to work together to protect vulnerable adults from abuse. Now we have moved away from the terminology of 'vulnerable adults' towards 'adults at risk of harm', usually shortened to 'adults at risk' in policies and procedures. There may also be reference to an 'adult with a care and support need'. Any policy and procedures that organisations implement should reflect this and include the current definition of adults at risk rather than that of vulnerable adults. This shift in language can be confusing. Some organisations had found it helpful to refer to specific categories of people who may be at increased risk of harm, for example adults with a physical or learning disability or older people; The Care Act 2014, however, makes it clear that abuse of adults links to circumstances rather than the characteristics of the people experiencing the harm. Labelling groups of people as inherently 'vulnerable' is seen to be disempowering. Definitions from the Care Act 2014 should replace any older definitions (e.g. from No Secrets) that will have been used in many older safeguarding vulnerable adults policy and procedures.

2.5 The Need for Different Policies and Procedures for Safeguarding Adults and Children

Many organisations support both children and adults and it may seem easier to have one safeguarding policy and procedures. However, there are a number of valid reasons why this is not recommended:

- The issues for children and adults are not the same
- The definitions and terms used differ
- Procedures for reporting abuse and handling cases are not the same
- There is different legislation and policy
- Having one policy and procedure can in fact complicate matters

Having separate policies and procedures will enable everyone within SLNC organisation to be clear about how to effectively safeguard both children and adults. Adding safeguarding adults at risk to a safeguarding children policy and procedures often dilutes the message about adults, particularly when organisations base the policy and procedures on those originally written for children.

One important difference between safeguarding adults and safeguarding children is an adult's right to self-determination. Adults may choose not to act at all to protect themselves and only in extreme circumstances will the law intervene - often when an adult is assessed to lack capacity in that area, or where the concerns may extend to children (e.g. living in the same household). This can make safeguarding adults more complex because it is not solely focused on creating an appropriate process and system to safeguard; but also needs to take into account the importance of creating a culture which embraces the adults themselves and informs and consults them on all decisions about them.

2.6 Who might have care and support needs?

People who have care and support needs could include almost anyone at some time in their life but as a guide the person may:

- Be elderly and frail due to ill health, physical disability or cognitive impairment;
- Have a learning disability;
- Have a physical disability and or sensory impairment;
- Have a mental health need including dementia or a personality disorder;
- Have a long-term illness or condition;
- Misuse substances or alcohol.

'Care and support' is the term used to describe the help some adults need to live as fully as possible with any illness or disability they may have.

It can include help with things like:

- getting out of bed
- washing
- dressing
- getting to work
- cooking meals
- eating
- seeing friends
- caring for families
- being part of the community

It might also include emotional support at a time of difficulty and stress, helping people who are caring for an adult family member or friend or even giving others a lift to a social event.

Care and support includes the help given by family and friends, as well as any provided by the local authority or other organisations.

2.7 Abuse, Neglect and Types of Harm

Abuse is a violation of an individual's human and civil rights by another person or persons. It can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it. Any or all of the following types of abuse may be perpetrated as the result of deliberate intent, negligence, omission or ignorance.

There are different types and patterns of abuse and neglect and different circumstances in which they may take place.

Safeguarding legislation in each home nation lists categories of abuse differently however, they all include the following types of abuse:

- Physical
- Sexual / Sexual Violence
- Emotional
- Psychological
- Mental
- Neglect and acts of Omission
- Self-neglect
- Financial
- Material / Access to Resources
- Discriminatory
- Organisational / Institutional
- Domestic (including coercive control)
- Exploitation

Abuse can take place in any relationship and there are many contexts in which abuse might take place; e.g.

- Institutional settings,
- Domestic settings,
- Forced Marriage,
- Human Trafficking,
- Modern Slavery,
- Sexual Exploitation,
- County Lines,
- Radicalisation,
- Hate Crime,
- Mate Crime,
- Cyber bullying,
- Scams.

These categories of abuse that may be experienced by adults include the following further descriptions and examples;

Cyber Bullying

Cyberbullying occurs when someone repeatedly makes fun of another person online or repeatedly picks on another person through emails or text messages, or uses online forums with the intention of harming, damaging, humiliating or isolating another person. It can be used to carry out many different types of bullying (such as racist bullying, homophobic bullying, or bullying related to special educational needs and disabilities) but instead of the perpetrator carrying out the bullying face-to-face, they use technology as a means to do it.

Discriminatory

Discrimination is abuse which centres on a difference or perceived difference particularly with respect to race, gender or disability or any of the protected characteristics of the Equality Act. It includes forms of harassment, slurs, favouritism, and other derogatory behaviour and acts.

Domestic Abuse / Domestic Violence

This includes psychological, physical, sexual, financial and emotional abuse perpetrated by anyone within a person's family. It also includes so called 'honour' based violence.

Emotional or psychological

This includes threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks.

Exploitation

Including sexual and/or criminal exploitation.

Financial or material

This includes theft, fraud, internet scamming, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

Forced marriage

This is a term used to describe a marriage in which one or both of the parties are married without their consent or against their will. A forced marriage differs from an arranged marriage, in which both parties consent to the assistance of a third party in identifying a spouse. The Anti-social Behaviour, Crime and Policing Act 2014 make it a criminal offence to force someone to marry.

Mate Crime

A 'mate crime' is when vulnerable people are befriended by members of the community who go on to exploit and take advantage of them (Safety Network Project, ARC). It may not be an illegal act but still has a negative effect on the individual. Mate Crime is carried out by someone the adult knows and often happens in private. In recent years there have been a number of Serious Case

Reviews relating to people with a learning disability who were murdered or seriously harmed by people who purported to be their friend.

Modern Slavery

This encompasses slavery, human trafficking, forced labour and domestic servitude.

Neglect / Acts of omission

This includes ignoring medical, emotional or physical care needs, failing 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.

Organisational

This includes neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one off incidents to long term or on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

Psychological abuse

Including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.

Physical

This includes hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions.

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.

Sexual

This includes rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.

Radicalisation

The aim of radicalisation is to attract people to their reasoning, inspire new recruits and embed their extreme views and persuade vulnerable individuals of the legitimacy of their cause. This may be direct through a relationship, or through social media.

2.8 PREVENT Duty

PREVENT Duty 2015 - Radicalisation to Terrorism:

The Government through its PREVENT programme has highlighted how some adults may be vulnerable to exploitation and radicalisation and involvement in terrorism. Signs and indicators of radicalisation may include:

- Being in contact with extremist recruiters.
- Articulating support for violent extremist causes or leaders.
- Accessing violent extremist websites, especially those with a social networking element.
- Possessing violent extremist literature.
- Using extremist narratives to explain personal disadvantage.
- Justifying the use of violence to solve societal issues.
- Joining extremist organisations.
- Significant changes to appearance and/or behaviour.

Terrorism and extremism in the UK is real and severe. Early identification and appropriate intervention is key to stopping people becoming or supporting terrorists. Some concerns may carry a security risk due to the violent nature of groups involved in terrorism, extremism radicalisation, so it is important that everyone understands PREVENT strategy.

Definitions:

Radicalisation is defined as the process by which people come to support terrorism and extremism and, in some cases, to then participate in terrorist groups.

Extremism is vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas (HM Government Prevent Strategy 2011).

PREVENT is a key part of the Government's strategy to stop people becoming terrorists or supporting terrorism. Early intervention is at the heart of PREVENT in diverting people away from being drawn into terrorist activity. PREVENT happens before any criminal activity takes place. It is about recognising, supporting and protecting people who might be susceptible to radicalisation. The PREVENT strategy objectives are:

Ideology: respond to the ideological challenge of terrorism and the threat we face from those who promote it.

Individuals: prevent people from being drawn into terrorism and ensure that they are given appropriate advice and support

Institutions: work with sectors and institutions where there are risks of radicalisation which we need to address.

Vulnerability/Risk indicators

There is no such thing as a 'typical extremist' and those involved in extremism come from a range of backgrounds and experiences. The following indicators may help to identify factors that suggest someone may be vulnerable to radicalisation or involved with extremism:-

- Identity crisis - Distance from cultural/religious heritage and uncomfortable with their place in the society around them;
- Personal crisis - Family tensions; sense of isolation; adolescence; low self esteem; disassociating from existing friendship group and becoming involved with a new and different group of friends; searching for answers to questions about identity, faith and belonging;
- Personal circumstances - Migration; local community tensions; events affecting country or region of origin; alienation from UK values; having a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy;
- Unmet aspirations - Perceptions of injustice; feeling of failure; rejection of civic life;
- Criminality - Experiences of imprisonment; poor resettlement/reintegration, previous involvement with criminal groups;
- Access to extremist influences - Associates with those known to be involved in extremism; Possession or distribution of extremist literature/other media material likely to incite racial/religious hatred or acts of violence; Use of closed network groups via electronic media for the purpose of extremist activity;
- Experiences, Behaviours and Influences - Experience of peer, social, family or faith group rejection; International events in areas of conflict and civil unrest had a personal impact on the person resulting in a noticeable change in behaviour; Verbal or written support of terrorist attacks; First-hand experience of racial or religious hate crime; Extended periods of travel to international locations known to be associated with extremism; Evidence of fraudulent identity/use of documents to support this; Experience of disadvantage, discrimination or social exclusion; History of criminal activity; Pending a decision on their immigration/national status.
- More critical risk factors include - Being in contact with extremist recruiters; Articulating support for extremist causes or leaders; Accessing extremist websites, especially those with a social networking element; Possessing extremist literature; Justifying the use of violence to solve societal issues; Joining extremist organisations; Significant changes to appearance/behaviour.

Referral and intervention process

Any identified concerns resulting from observed behaviour or reported conversations which suggest that a participant supports terrorism and /or extremism MUST be reported to the named designated safeguarding lead (ie Neil Hodgkin). In addition to following Safeguarding procedures to protect the individual concerned, it is highly likely that there may be a police investigation due to the wider security issues involved in counter terrorism. The Designated Safeguarding Lead must seek advice

from the PREVENT officer for Leicester, and follow their guidance, which can be found on their website [<https://www.leicesterprevent.co.uk/>] or by contacting prevent@stphilipscentre.co.uk or call 0116 273 3459, or seek direct support from Leicestershire Police Prevent team at preventengagement.team@leicestershire.pnn.police.uk or call 0116 248 6726.

2.9 Scales and Patterns of Abuse

Incidents of abuse may be **one-off** or **multiple**, and **affect one person or more**.

Professionals and other people who may be aware of adult abuse need to be aware that there may be patterns and themes emerging and they should not treat incidents as one-offs, and look beyond the single incident. Repeated incidents of poor care may also result in safeguarding measures being enacted therefore agencies need to be mindful about how they capture and record such information.

Patterns of abuse vary and include:

- **Serial abusing**
 - in which the perpetrator seeks out and 'grooms' individuals. Sexual abuse sometimes falls into this pattern as do some forms of financial abuse for example;
- **Long-term abuse**
 - for example in the context of an ongoing family relationship such as domestic violence between spouses or generations or persistent psychological abuse;
- **Opportunistic abuse**
 - such as theft occurring because money or jewellery has been left lying around.

Abuse can be carried out by an individual or more than one person, either 'working together' or 'turning a blind eye' and facilitating or allowing abuse to occur.

It is important not to limit views of what constitutes abuse or neglect as it can take many forms.

2.10 Who Might Abuse Adults?

Abuse and neglect may be carried out by anyone in contact with adults.

Abuse can take place within multiple contexts within an organisation, and the person causing harm might be any other person. For example: a member of staff, a volunteer, or a participant.

This is not an exhaustive list but some examples of abuse include:

- Harassment of a participant because of their (perceived) disability or other protected characteristics.

- Not meeting the needs of the participant e.g. carrying out a task without a necessary break.
- A support worker intentionally striking a service user.
- One participant controlling another participant with threats.
- A member of staff who sends unwanted sexually explicit text messages to a participant with learning disabilities.
- A participant threatens another participant with physical harm and persistently blames them for poor performance.
- A service user being groomed for sexual abuse by his or her inclusion worker.
- An activity participant with learning disabilities being financially exploited by another participant.
- A young woman confiding in her activity leader about a forthcoming holiday where she believes she will be married against her will.
- A worker insisting on receiving a parental consent form from an adult with learning disabilities who is able to make the decision themselves before allowing them to participate in an activity.
- An activity leader who regularly neglects the individual needs of disabled participants when providing training or leading an activity.
- A volunteer noticing that another individual seems scared of the support worker who brings her to an activity session.
- A project worker noticing that the husband of a service user with dementia is shouting at and pushing her,

Abuse or neglect could also be carried out by:

- A spouse, partner or family member
- Neighbours or residents
- Friends, acquaintances or strangers
- People who deliberately exploit adults they perceive as vulnerable
- Paid staff, professionals or volunteers providing care and support
- Strangers

Often the perpetrator is known to the adult and may be in a position of trust and/or power, but not always.

Is there a Person in a Position of Trust Involved?

In any instance of safeguarding, consideration must be given as to whether an allegation has been made against a person in a position of trust (PiPoT) and who may be a risk to others. This can be anyone from a formal employee or volunteer, to an informal carer. It may be necessary to anonymously receive advice from Leicester Safeguarding Board or refer to SLNCs Whistleblowing Policy.

2.11 Signs and Indicators of Abuse and Neglect

An adult may confide to a member of staff, volunteer or another participant that they are experiencing abuse inside or outside of the organisation's setting. Similarly, others may suspect that this is the case.

There are many signs and indicators that may suggest someone is being abused or neglected. There may be other explanations, but they should not be ignored. The signs and symptoms include but are not limited to:

- Unexplained bruises or injuries – or lack of medical attention when an injury is present.
- Person has belongings or money going missing.
- Person is not attending / no longer enjoying their sessions. You may notice that a participant has been missing from sessions and is not responding to reminders from other members or staff.
- Someone losing or gaining weight / an unkempt appearance. This could be a participant whose appearance becomes unkempt, does not wear suitable clothing and there is a deterioration in hygiene.
- A change in the behaviour or confidence of a person. For example, a participant may be looking quiet and withdrawn when their brother comes to collect them from sessions in contrast to their personal assistant whom they greet with a smile.
- Self-harm.
- A fear of a particular group of people or individual.
- A parent/carer always speaks for the person and doesn't allow them to make their own choices
- They may tell you / another person they are being abused – i.e. a disclosure

2.12 Wellbeing Principle

The concept of 'well-being' is threaded throughout UK legislation and is part of the Law about how health and social care is provided. Our well-being includes our mental and physical health, our relationships, our connection with our communities and our contribution to society.

Being able to live free from abuse and neglect is a key element of well-being.

The legislation recognises that statutory agencies have sometimes acted disproportionately in the past. For example, removing an adult at risk from their own home when there were other ways of preventing harm. In the words of Justice Mumby 'What good is it making someone safe when we merely make them miserable?' *What Price Dignity?* (2010)

For that reason any actions taken to safeguard an adult must take their whole well-being into account and be proportionate to the risk of harm.

2.13 Making Safeguarding Personal / Person Centred Safeguarding

Alongside the increased need to recognise the importance of safeguarding adults as well as children, there has also been a cultural shift towards Making Safeguarding Personal within the safeguarding process. This is a shift from prioritising outcomes demanded by bureaucratic systems (i.e. to know what happened; who did what to whom) to outcomes being defined by the person at the centre of the safeguarding process. There is a much stronger emphasis placed on the importance of the process by which satisfactory outcomes are achieved which take into account the individual choices and requirements of everyone involved.

“What good is it making someone safer if it merely makes them miserable?” Lord Justice Munby asks in ‘What Price Dignity?’ (2010). What this means in practice is that adults should be more involved in the safeguarding process with their views, wishes, feelings and beliefs taken into account when decisions are made.

In 1998, Valerie Billingham summed up the importance of patient inclusion in care within the NHS and medical field with the phrase, “Nothing about me without me.” Today, this concept is recognised as being important within a much wider context. Making Safeguarding Personal is as relevant in SLNC as it is in health and social care.

The Care Act 2014 builds on the concept stating that ‘We all have different preferences, histories, circumstance and life-styles so it is unhelpful to prescribe a process that must be followed whenever a concern is raised’.

However the Act is also clear that there are key issues that should be taken into account when abuse or neglect are suspected and that there should be clear guidelines regarding this.

The legislation also recognises that adults make choices that may mean that one part of our well-being suffers at the expense of another – for example we move away from friends and family to take a better job. Similarly, adults can choose to risk their personal safety; for example, to provide care to a partner with dementia who becomes abusive when they are disorientated and anxious.

None of us can make these choices for another adult. If we are supporting someone to make choices about their own safety we need to understand ‘What matters’ to them and what outcomes they want to achieve from any actions agencies take to help them to protect themselves.

The concept of 'Making Safeguarding Personal' / 'Person Centred Safeguarding' means;

- Engaging the person in a conversation about how best to respond to their situation in a way that enhances their involvement, choice and control, as well as improving their quality of life, well-being and safety
- Organisations work to support adults to achieve the outcomes they want for themselves.
- The adult's views, wishes, feelings and beliefs must be taken into account when decisions are made about how to support them to be safe.
- There may be many different ways to prevent further harm.
- Working with the person will mean that actions taken help them to find the solution that is right for them.
- Treating people with respect, enhancing their dignity and supporting their ability to make decisions also helps promote people's sense of self-worth and supports recovery from abuse.

If someone has difficulty making their views and wishes known, then they can be supported or represented by an advocate. This might be a safe family member or friend of their choice or a professional advocate (usually from a third sector organisation).

2.14 The Six Principles of Adult Safeguarding

The Principles of Adult Safeguarding in England (Care Act 2014)

The Act's principles are:

- **Empowerment** - People being supported and encouraged to make their own decisions and informed consent.
"I am asked what I want as the outcomes from the safeguarding process and these directly inform what happens."
- **Prevention** - It is better to take action before harm occurs.
"I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help."
- **Proportionality** - The least intrusive response appropriate to the risk presented.
"I am sure that the professionals will work in my interest and they will only get involved as much as needed."
- **Protection** - Support and representation for those in greatest need.
"I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want."
- **Partnership** - Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.
"I know that staff treat any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me."
- **Accountability** - Accountability and transparency in delivering safeguarding.
"I understand the role of everyone involved in my life and so do they."

The principles of Safeguarding are different in other home nations. It can be useful to be aware of them as part of general safeguarding knowledge. For example;

Wales (Social Services and Well Being Act 2014)

The Act's principles are:

- **Responsibility** - Safeguarding is everyone's responsibility.
- **Well-being** - Any actions taken must safeguard the person's well-being.
- **Person-centred approach** - Understand what outcomes the adult wishes to achieve and what matters to them.
- **Voice and control** - Expect people to know what is best for them and support them to be involved in decision making about their lives.
- **Language** - Make an active offer of use of the Welsh language and use professional interpreters where other languages are needed.
- **Prevention** - It is better to take action before harm occurs.

Scotland (Adult Support and Protection Act 2007)

The Act's principles are:

The overarching principle underlying Part 1 of the Act is that any intervention in an individual's affairs should provide benefit to the individual and should be the least restrictive option of those that are available which will meet the purpose of the intervention.

This is supported by a set of guiding principles which, together with the overarching principle, must be taken account of when performing functions under Part 1 of the Act. These are:

- The wishes and feelings of the adult at risk (past and present);
- The views of other significant individuals, such as the adult's nearest relative; their primary carer, guardian, or attorney; or any other person with an interest in the adult's well-being or property;
- The importance of the adult taking an active part in the performance of the function under the Act;
- Providing the adult with the relevant information and support to enable them to participate as fully as possible;
- The importance of ensuring that the adult is not treated less favourably than another adult in a comparable situation; and
- The adult's abilities, background and characteristics (including their age, sex, sexual orientation, gender, religious persuasion, racial origin, ethnic group and cultural and linguistic heritage).

Northern Ireland (Adult Safeguarding Prevention and Protection in Partnership 2015)

The Act's principles are:

- **A Rights-Based Approach** – To promote and respect an adult's right to be safe and secure; to freedom from harm and coercion; to equality of treatment; to the protection of the law; to privacy; to confidentiality; and freedom from discrimination.

- **An Empowering Approach** – To empower adults to make informed choices about their lives, to maximise their opportunities to participate in wider society, to keep themselves safe and free from harm and enabled to manage their own decisions in respect of exposure to risk.
- **A Person-Centred Approach** – To promote and facilitate full participation of adults in all decisions affecting their lives taking full account of their views, wishes and feelings and, where appropriate, the views of others who have an interest in safety and well-being.
- **A Consent-Driven Approach** – To make a presumption that the adult has the ability to give or withhold consent; to make informed choices; to help inform choice through the provision of information, and the identification of options and alternatives; to have particular regard to the needs of individuals who require support with communication, advocacy or who lack the capacity to consent; and intervening in the life of an adult against his or her wishes only in particular circumstances, for very specific purposes and always in accordance with the law.
- **A Collaborative Approach** – To acknowledge that adult safeguarding will be most effective when it has the full support of the wider public and of safeguarding partners across the statutory, voluntary, community, independent and faith sectors working together and is delivered in a way where roles, responsibilities and lines of accountability are clearly defined and understood. Working in partnership and a person-centred approach will work hand-in-hand.

2.15 Mental Capacity and Decision Making

The Mental Capacity Act 2005 (MCA) states that every individual has the right to make their own decisions and provides the framework for this to happen.

The MCA is about making sure that people over the age of 16 have the support they need to make as many decisions as possible.

The MCA also protects people who need family, friends or paid support staff to make decisions for them because they lack capacity to make specific decision.

We make many decisions every day, often without realizing, and may take this for granted. UK Law assumes that all people over the age of 16 have the ability to make their own decisions, unless it has been proved that they can't. It also gives us the right to make any decision that we need to make and gives us the right to make our own decisions even if others consider them to be unwise.

We make so many decisions that it is easy to take this ability for granted. The Law says that to make a decision we need to:

- Understand information
- Remember it for long enough
- Think about the information
- Communicate our decision

A person's ability to do this may be affected by things such as learning disability, dementia, mental health needs, acquired brain injury and physical ill health.

Most adults are able to make every decision about their own lives, all of the time, independently. Others adults have the ability to make their own decisions given the right support, however some adults with care and support needs have the experience of other people making decisions about them and for them.

Some people can only make simple decisions like which colour T-shirt to wear or can only make decisions if a lot of time is spent supporting them to understand the options. If someone has a disability that means they need support to understand or make a decision this must be provided. A small number of people cannot make any decisions. Being unable to make a decision is called "lacking mental capacity".

Mental capacity refers to the ability to make a decision at the time that decision is needed. A person's mental capacity and ability to make decisions can change and fluctuate. If it is safe/possible wait until they are able to be involved in decision making or to make the decision themselves.

The timing of a question can affect the response.

For example:

- A person with epilepsy may not be able to make a decision following a seizure.
- Someone who is anxious may not be able to make a decision at that point.
- A person may not be able to respond as quickly if they have just taken some medication that causes fatigue.

These examples all demonstrate the situation where it may appear as though the person cannot make a decision but later in the day, presented with the same decision, they may be able to or at least be involved.

The MCA recognises that capacity is decision specific so no one will be labelled as lacking capacity per se. The MCA also recognises that decisions can be about big life changing events such as where to live but equally about small events such as what to wear to a gardening club on a cold day.

By being aware of the principles of the MCA you will be aware of the importance of people making their own decisions, being involved, having control and taking part in the decision making process.

Mental Capacity is important for safeguarding for several reasons.

Not being allowed to make decisions one is capable of making is abuse. For example, a disabled adult may want to take part in an activity but their parent who is their carer won't allow them to and will not provide the support they would need. Conversely the adult may not seem to be benefiting from an activity other people are insisting they do.

Another situation is where an adult is being abused and they are scared of the consequences of going against the views of the person abusing them. It is recognised in the law as coercion and a person can be seen not to have mental capacity because they cannot make 'free and informed decisions'.

Mental Capacity must also be considered when we believe abuse or neglect might be taking place. It is important to make sure an 'adult at risk' has choices in the actions taken to safeguard them, including whether or not they want other people informed about what has happened, however, in some situations the adult may not have the mental capacity to understand the choice or to tell you their views.

Each home nation has legislation that describes when and how we can make decisions for people who are unable to make decisions for themselves. The principles are the same.

- We can only make decisions for other people if they cannot do that for themselves at the time the decision is needed.
- If the decision can wait, wait – e.g. to get help to help the person make their decision or until they can make it themselves.
- If we have to make a decision for someone else then we must make the decision in their best interests (for their benefit) and take into account what we know about their preferences and wishes.
- If the action we are taking to keep people safe will restrict them then we must think of the way to do that which restricts their freedom and rights as little as possible.

Many potential difficulties with making decisions can be overcome with preparation. A person needing support to help them make decisions whilst taking part in an organisation's activities will ordinarily be accompanied by someone e.g. a family member or formal carer whose role includes supporting them to make decisions.

It is good practice to get as much information about the person as possible. Some people with care and support needs will have a 'One page profile' or a 'This is me' document that describes important things about them. Some of those things will be about how to support the person, their routines, food and drink choices etc. but will also include things they like and don't like doing. It's also important to have an agreement with the person who has enrolled the adult in the activity about how different types of decisions will be made on a day to day basis.

A person attending an activity, session or accessing services at SLNC may well have made many decisions before they arrive or the decision may have been made for them in their best interests. For example, you may see someone not dressed appropriately for taking part in a therapeutic gardening activity but whose decision was it?

This could include:

- Do they want to attend the event?
- How are they going to get there?
- Do they need support?
- What equipment do they need to take part in the event?
- Is this particular activity, task or session safe for them to take part in?

By understanding the MCA you will be able to understand how you may be part of the decision making process for the person. This could be simply taking more time to explain the rules of a game, or noticing that the carer who attends with the participant takes over the decision making, or you could be asked for your opinion of what might be in their best interests.

If a person who has a lot of difficulty making their own decisions is thought to be being abused or neglected you will need to refer the situation to the Local Authority,

and this should result in health or social care professionals making an assessment of mental capacity and/or getting the person the support they need to make decisions.

There may be times when an organisation needs to make decisions on behalf of an individual in an emergency. Decisions taken in order to safeguard an adult who cannot make the decision for themselves could include:

- Sharing information about safeguarding concerns with people that can help protect them.
- Stopping them being in contact with the person causing harm.

When a person needs help to make a specific decision the following should be considered before a decision could be made in their best interests.

- The individual needs all the relevant information to make the decision
- If there is a choice of options, has information been provided on the alternatives?
- The communication needs of the individual have been taken into account and the information presented in a way that makes sense for them
- Different communication methods have been explored, including obtaining professional or carer advice and support
- The risks and benefits have been considered of any decision

It is important that we do not discriminate or make assumptions about someone's ability to make decisions or pre-empt a best interest's decision merely on the basis of the person's age or appearance, condition or any aspect of their behaviour. It is equally important to be aware of how we can create a supportive environment by considering how:

- You could be involved in a minor way or asked for more detail which could lead to change for the better for a participant;
- You could influence participants' enjoyment and support their future attendance, for example by adapting the way that you provide information so they can make a decision, or by just being aware of the MCA;
- You may notice that a person is receiving support that is not in line with the MCA and want to address this.

To support you in understanding the MCA there are 5 key messages:

1. Assume that people are able to make decisions, unless it is shown that they are not - if you have concerns about a person's level of understanding attending one of your events you should check this with them and if applicable people supporting them.
2. Give people as much support as they need to make decisions - you may be involved in this, you might need to think about the way you communicate or provide information, you may be asked your opinion.
3. The right to make unwise decisions as long as you understand the implications - a person may want to take part in a gardening task that requires manual labour, physical exertion and coordination on rough, muddy, uneven ground, even though they are unsteady on their feet. If they understand the implications then consider how risks can be minimised so they do not miss out, for example by providing adapted tools or alternative locations for carrying out the task with more stable ground.
4. Best interests - If someone is not able to make a decision, then the people helping them must only make decisions in their 'best interests'. This means that the decision must be what is best for the person, not for anyone else. If someone was making a decision on your behalf, you would want it to reflect the decision you would make if you were able to.
5. Find the least restrictive way of doing what needs to be done.

2.16 Medication & Personal Possessions at Saffron Acres & Saffron Heath

Only medication required should be brought onto site by anyone, including staff, volunteers, service users and other visitors. Staff must ensure all medication is kept securely in the designated area. Guardians or carers accompanying a service user's carer must ensure their necessary medication is stored appropriately. Parents or guardians of unaccompanied service users who attend independently should keep staff fully informed of any changes to medication. Due to the nature of the Saffron Acres and Saffron Heath sites, medication needs must be fully discussed with the Volunteer Coordinator or Project Manager, and the relevant support staff informed on the day. Saffron Acres staff will always do our best to accommodate the varying needs of participants, however we cannot be responsible for supervising, prompting or administering medication and personal care. Careful consideration needs to be made regarding whether lifesaving medication is required to remain upon the individual or carer, and steps taken to ensure this is done appropriately and safely (e.g. an epipen or inhaler), and whether medication needs to be stored in certain conditions (e.g. in a fridge in a locked room). The site is over 12 acres in size and for example walking from the furthestmost part of the project site to the main charity office is a good 15 minute walk over uneven terrain or over a 20 minute walk by main path/road; even walking between the designated Saffron Acres & Saffron Heath site offices can take 10 minutes by foot, so it is an important factor to be planned for. All medication brought onto site and kept on the person/carer or left in a secure dedicated space with the permission of the project manager must be clearly labelled with the person's name and must be taken home when leaving the project at the end of each session. All medication left in the secure designated space must be signed in and out, and may only be placed and removed from the storage by a member of Saffron Acres Staff. Medication must not be kept in the field first aid kits, either in the site offices or the portable kits carried by a designated staff group leader.

If there are any concerns over someone potentially abusing medication, (either theirs or someone else's, prescribed or over the counter), or a carer or guardian inappropriately medicating an individual, this must be reported to the Designated Safeguarding Lead immediately.

Concerns could include:

- Medication bottles with someone else's name on
- A guardian describing the need for a different dose to that prescribed on the label
- An individual requesting their medication more frequently than packaging indicates
- Someone missing doses, either intentionally or forgetfully
- Blister packs being tampered with
- Medication looking different to that indicated on the packaging
- Medication is contaminated, dirty, or appears unsafe
- Medication not provided appropriately (e.g. a container that an individual cannot open due to their specific needs)

- Individuals not wanting to take their medication (this could be due to a number of reasons)
- Someone appears to react strangely after taking / not taking their medication, especially if this is dismissed by a carer or guardian (e.g. a carer who doesn't want to take a service user to the toilet frequently and giving a reduced dose of a diuretic, or someone appearing 'sleepy' if a guardian is encouraging overmedication to help their service user become more compliant, for example)
- Someone offering medication to others
- Someone stating they are misusing their medication or someone else's
- Secretive behaviour, changes in attitude and behaviour, and anxiety over their medication

The emergency services must always be contacted in any medical emergency.

Saffron Acres operates a no alcohol or drugs policy. No such substances are allowed on site, including the consumption or use of substances on site or arriving under the influence of them.

Personal possessions of value must not be brought onto site unless this is unavoidable – in this case it must be discussed with the volunteer coordinator or project manager and a procedure for storage or use agreed in advance.

Any safeguarding concerns over misuse of personal possessions, either by the owner of the property/item or someone else, should be reported to the Designated Safeguarding Lead.

For example;

- Someone inappropriately "borrowing" a service user's coat
- Someone not asking to use something belonging to someone else, such as an adapted gardening aid that someone has brought to the project that enables them to participate in an activity
- Someone taking something that doesn't belong to them due to a compulsion, kleptomania, hoarding tendency, or other behaviour
- Someone hiding something that belongs to someone else, either for amusement or with the intent to cause emotional or physical harm
- Someone misusing PPE – e.g. sharing equipment meant for sole use, or reusing single use equipment
- Someone tampering with or carrying out unauthorised adaptations or repairs to any items or equipment
- Someone 'persuading' someone else to give them their belongings
- Theft
- Someone using their own belongings inappropriately (e.g. threatening to use an item as a weapon such as a walking stick or throwing an item)
- Someone using a belonging according to its intended use but which is not appropriate for use at the project (e.g. a personal camp stove)
- Weapons (e.g. a pocket knife)

- Possessions that are inappropriate due to insensitive or abusive use of protected characteristics of the Equality Act e.g. a clothing with explicit language or literature with violent pictures etc) or are insensitive to current or historical events either locally or globally, or are in other ways inappropriate (e.g. relating to sexual innuendo or topics that are insulting or deliberately promoting an illegal substance for example)

2.17 Recording, Information Sharing & Confidentiality

All organisations must comply with the Data Protection Act (DPA) and the General Data Protection Regulations (GDPR).

Information about concerns of abuse includes personal data. It is therefore important to be clear as to the grounds for processing and sharing information about concerns of abuse.

Processing information includes record keeping. Records relating to safeguarding concerns must be accurate and relevant. They must be stored confidentially with access only to those with a need to know.

Early sharing of information is the key to providing an effective response where there are emerging concerns. To ensure effective safeguarding arrangements, no one should assume that someone else will do it. Sharing information, with the right people, is central to good practice in safeguarding adults. However, information sharing must only ever be with those with a 'need to know'.

This does **NOT** automatically include the persons spouse, partner, adult, child, unpaid or paid carer. Information should only be shared with family and friends and/or carers with the consent of the adult or if the adult does not have capacity to make that decision and family/ friends/ carers need to know in order to help keep the person safe.

The purpose of Data Protection legislation is not to prevent information sharing but to ensure personal information is only shared appropriately. Data protection legislation allows information sharing within an organisation. For example:

- Anyone who has a concern about harm can make a report to an appropriate person within the same organisation
- Case management meetings can take place to agree to co-ordinate actions by the organisation

There are also many situations in which it is perfectly legal to share information about adult safeguarding concerns outside the organisation. Importantly personal information can be shared with the consent of the adult concerned. However, the adult may not always want information to be shared. This may be because they fear repercussions from the person causing harm or are scared that they will lose control of their situation to statutory bodies or because they feel stupid or embarrassed. Their wishes should be respected unless there are over-riding reasons for sharing

information.

The circumstances when we need to share information without the adult's consent include those where:

- it is not safe to contact the adult to gain their consent – i.e. it might put them or the person making contact at further risk.
- you believe they or someone else is at risk, including children.
- you believe the adult is being coerced or is under duress.
- it is necessary to contact the police to prevent a crime, or to report that a serious crime has been committed.
- the adult does not have mental capacity to consent to information being shared about them.
- the person causing harm has care and support needs.
- the concerns are about an adult at risk living in Wales or Northern Ireland (where there is a duty to report to the Local Authority).

When information is shared without the consent of the adult this must be explained to them, when it is safe to do so, and any further actions should still fully include them.

If you are in doubt as to whether to share information, seek advice e.g. seek legal advice and/or contact the Local Authority and explain the situation without giving personal details about the person at risk or the person causing harm.

Any decision to share or not to share information with an external person or organisation must be recorded together with the reasons to share or not share information.

It is important to consider how records are 'catalogued' by the record keeper. For example, how easy it is for a 'small' incident or concern that has been noted might be linked to a previous event or allow patterns of risk and abuse to be identified. Many situations of abuse and neglect arise from a range of incidents over a period of time, and many abusers start with smaller acts of abuse in multiple settings which could be considered insignificant on its own – this highlights why it is important to record all incidents accurately, so that organisations can work together effectively.

Leicester and the Leicestershire & Rutland Safeguarding Adults Boards provide detailed information on how to accurately record information, and should be consulted if necessary. A list of Good Record Keeping Practice for Safeguarding Adults can be found on their website

[<https://www.llradultsafeguarding.co.uk/record-keeping/>]

2.18 Multi-Agency Working

Safeguarding adults' legislation gives the lead role for adult safeguarding to the Local Authority. However, it is recognised that safeguarding can involve a wide range of organisations, in addition to the organisation's designated Safeguarding Lead.

Organisations may need to cooperate with the Local Authority and the Police including to:

- Provide more information about the concern you have raised.
- Provide a safe venue for the adult to meet with other professionals e.g. Police/Social Workers/Advocates.
- Attend safeguarding meetings.
- Coordinate internal investigations (e.g. complaints, disciplinary) with investigations by the police or other agencies.
- Share information about the outcomes of internal investigations.
- Provide a safe environment for the adult to continue attending their activity/ their role in the organisation.

3. REPORTING CONCERNS

3.1 Reporting Concerns About Yourself

If you are experiencing harm within SLNC contact Neil Hodgkin (Safeguarding Lead) on 0116 283 7212.

If you are in immediate danger or need immediate medical assistance contact the emergency services 999.

Please contact the Safeguarding Lead (Neil Hodgkin). If you would prefer, please contact another member of staff who will help you raise the issue to the Safeguarding Lead.

If the Safeguarding Lead or Welfare Officer is implicated or you think has a conflict of interest, then report to the SLNC Management Chair, Dee Dixon.

You can also contact the Police, Social Services, your doctor or other organisations that can provide information and give help and support (see Appendices).

SLNC will follow the procedure in this document. If you do not think your concerns are being addressed in the way that they should be please contact the SLNC Board.

At all stages you are welcome to have someone who you trust support you and help you to explain what happened and what you want to happen.

It is of utmost importance to SLNC that you can take part in our activities safely and we will take every step to support you to do that.

3.2 Reporting Concerns About Others

You may be concerned about harm to another person because of something you have seen or heard, information you have been told by others or because someone has confided in you about things that are happening or have happened to them.

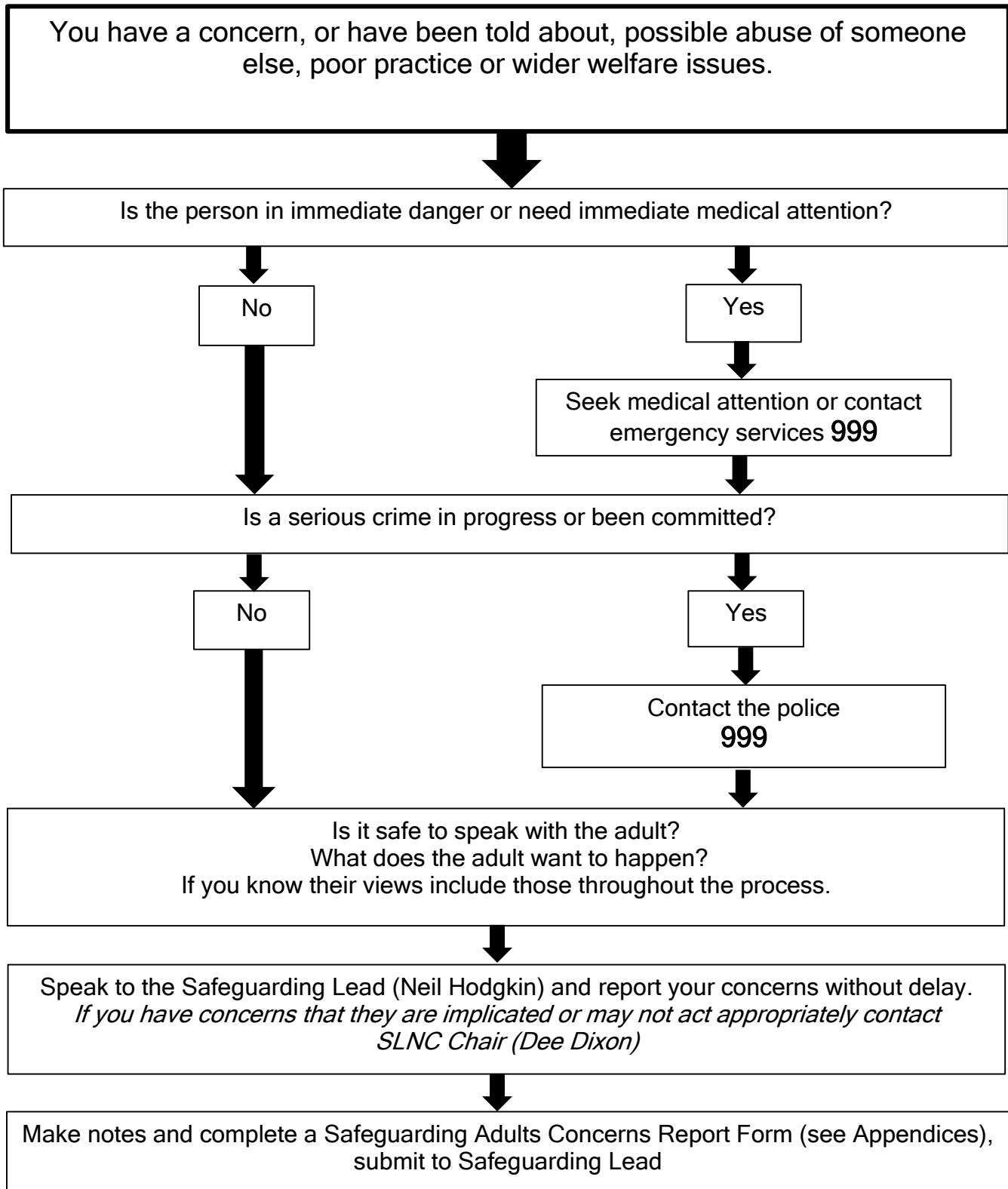
You should not keep safeguarding concerns to yourself. If you have concerns and/or you are told about possible or alleged abuse, poor practice or wider welfare issues you must contact the SLNC Safeguarding Lead as soon as you can on 0116 283 7212.

If the Safeguarding Lead is implicated or you think has a conflict of interest, then report to the SLNC Chair.

If you are concerned about harm being caused to **someone else**, please follow the guidance below.

- It is not your responsibility to prove or decide whether an adult has been harmed or abused. It is however, everyone's responsibility to respond to and report concerns they have.
- If someone has a need for **immediate medical attention** call an ambulance on 999.
- If you are concerned someone is in **immediate danger** or a **serious crime** is being committed contact the police on 999 straight away. Where you suspect that a crime is being committed, you must involve the police.
- Remember to be **person centred/make safeguarding personal**. If it will not put them or you at further risk, discuss your safeguarding concerns with the adult and ask them what they would like to happen next. Inform them that you have to pass on your concerns to your Safeguarding Lead. **Do not** contact the adult before talking to your Safeguarding Lead or Welfare Officer if the person allegedly causing the harm is likely to find out.

Remember not to confront the person thought to be causing the harm.



3.3 Responding to a Direct Disclosure

If an adult indicates that they are being harmed or abused, or information is received which gives rise to concern, the person receiving the information should:

- Take it seriously.
- Stay calm.
- Listen carefully to what is said, allowing the adult to continue at their own pace.
- Be sensitive.
- Keep questions to a minimum, only ask questions if you need to identify/ clarify what the person is telling you.
- Reassure the person that they have done the right thing in revealing the information.
- Ask them what they would like to happen next.
- Explain what you would like to do next.
- Explain that you will have to share the information with the SLNC Safeguarding Lead.
- Ask for their consent for the information to be shared outside the organisation.
- Make an arrangement as to how you/the Safeguarding Lead can contact them safely.
- Help them to contact other organisations for advice and support (e.g. Police, Domestic Abuse helpline, Victim Support -see Appendices).
- Act swiftly to report and carry out any relevant actions.
- Record in writing what was said using the adult's own words as soon as possible using the Safeguarding Adults Report Form (see Appendices).

It is important **not** to:

- Dismiss or ignore the concern.
- Panic or allow shock or distaste to show.
- Make negative comments about the alleged perpetrator.
- Make assumptions or speculate.
- Come to your own conclusions.
- Probe for more information than is offered.
- Promise to keep the information secret.
- Make promises that cannot be kept.
- Conduct an investigation of the case.
- Confront the person thought to be causing harm.
- Take sole responsibility.
- Tell everyone.

3.4 Record Keeping

- Complete a Safeguarding Adults Report Form (see Appendices) and submit to the SLNC Safeguarding Lead without delay.
- Describe the circumstances in which the concern came about and what action you took/ advice you gave.
- It is important to distinguish between things that are facts, things that have been observed or over-heard, and opinions, in order to ensure that information is as accurate as possible.
- If someone has told you about the harm or abuse, use the words the person themselves used. If someone has written to you (including by email, message) include a copy with the form.

Be mindful of the need to be confidential at all times.

This information must only be shared with your Safeguarding Lead and others that have a need to know –e.g. to keep the person safe whilst waiting for action to be taken.

Accurate comprehensive records must be kept at all stages of the safeguarding adults process, either (preferably) typed or handwritten legibly, signed and dated by the person making the record, with their name clearly printed by their signature. Any handwriting must be clear and legible, and all documentation must be readable when scanned or photocopied.

Information should be recorded in chronological order and with times noted as close to actual time of occurrence as possible.

As well as being accurate, records must be unambiguous with clear meanings. Records should not include unnecessary abbreviations, jargon, meaningless terminology or phrases, code expressions or humorous descriptions.

Records must not be altered or destroyed without proper authorisation to do so, even to correct a 'mistake' e.g. a date or time initially recorded inaccurately. Any such alterations must be clearly noted as such, with previous versions of information still clearly auditable in a way that the original documentation is preserved and auditable.

Records must never be falsified.

Section 4 Organisational Response

4.1 Procedure for Safeguarding Lead

Once a concern has been passed to the SLNC Safeguarding Lead, they will coordinate the next steps in the Safeguarding Adults Procedure (see Flowchart below).

The Safeguarding Lead will keep clear records of decision making, actions taken, and the outcomes achieved. They will also collect feedback from the adult.

The Safeguarding Lead, where appropriate, in consultation with the Case Management Group, will take the following actions:
(sections 4.2 Immediate Response and 4.3 Taking Action are not to be taken by individuals other than the designated appointed person – in most cases this will be the Safeguarding Lead unless they are implicated etc)

4.2 Immediate Response by SLNC

The Safeguarding Lead will:

1. Ensure any **immediate actions** necessary to safeguard anyone at risk have been taken.

If the risk is said to be due to the behaviour of an employee or other person involved in the organisation/activities use the relevant procedures (e.g. breach of code of conduct, breach of contract, disciplinary or grievance procedures) to prevent that person making contact with the adult being harmed.

2. If sent a **Safeguarding Adults Report Form**, check that what is written can be understood and that all the necessary parts have been completed.

If being contacted directly by a member of staff or a volunteer, request that they complete a Safeguarding Adults Report Form if they have not already done so (see Appendices) as soon as possible.

If the report is being made by the adult themselves or a member of the public, fill in the safeguarding report form, gaining the details with the person who made contact.

3. Inform, reassure, and advise the **person making the report** e.g. what to do/what not to do. Explain what will happen next. Reinforce the need for confidentiality.

4. Consider what is known about the situation, what the risks are, what is known of **the views of the adult**, whether they have given their consent to the report being made and whether they might be considered to be an 'adult at risk'.

Find out whether the person making the report believes the adult has the mental capacity to make decisions about what safeguarding actions they want to be taken (they are not expected to assess this, only provide their opinion).

5. Decide if there is a need to **contact the adult** to get more information, determine their wishes, or explain what actions need to be taken.
6. Ensure that the **adult has been given information** about the process and what will happen next. Ensure that they have been provided with information about other organisations that can support them (see Appendices).

ONLY do this if SLNC has a known safe way of contacting them.

4.3 Taking Action

In all situations we will ensure those within SLNC who can act (within their remit) to prevent further harm have the information to do so. This includes supporting the person at risk. Depending on the situation we may need to pass information to, and work together with, other organisations such as the Police and the Local Authority safeguarding team.

The Safeguarding Lead will:

7. Consult and Decide

If necessary, consult with Management Chair and with the Local Authority/the Police and decide which of the following actions need to be taken.

8. Contact the police (where the crime took place)

If:

- a serious crime has been committed.
- a crime has been committed against someone without the mental capacity to contact the police themselves.
- the adult has asked you to make a report to the Police on their behalf because they are unable to themselves.

9. Make a referral/report to the Local Authority Safeguarding Adults Team or Multi-Agency Safeguarding Hub (MASH) (where the adult lives) if you believe they may be an **adult at risk**

AND

- the adult appears not to have the mental capacity to make decisions about their own safety and well-being.

- the risk is from a person employed or volunteering in work with adults with care and support needs (including within similar organisations to SLNC).
- there are other 'adults at risk' (e.g. another family member, another activity participant or other people using a service).
- the adult at risk lives in Wales or Northern Ireland (no consent required).
- the adult at risk lives in England or Scotland and they have asked you to make a report or have given their informed consent to you making it.

If a child is at risk you must also make a child safeguarding referral to the Local Authority. This includes all situations where there is domestic abuse within the household where the child lives.

If you are unsure whether or not to make a referral/report you can ask for advice by contacting the Local Authority Safeguarding Adults Team/Multi-agency Safeguarding Hub and discuss the situation with them without disclosing the identity of the adult or the person who may be causing harm.

10. Use policy and procedures to stop harm within the organisation

If the person who may be causing harm is a person involved in SLNC in whatever capacity inform the CEO/HR/Volunteer Lead.

Decide what policy and procedures the organisation will use to decide which actions will be taken e.g. breach of code of conduct, disciplinary procedures, breach of contract.

Agree what short term arrangements can be put in place to enable the adult, who may be being harmed, to be able to continue participating in the organisation's activities.

The arrangements made must respect the rights of the person who may be causing harm and must be consistent with the relevant policy and procedures.

11. If statutory agencies are involved **work together with them to agree the next steps. E.g. the Police may need to interview an employee before a disciplinary investigation is conducted.**

Attend and contribute to any safeguarding adults strategy or case meetings that are called by the Local Authority.

If statutory agencies say that they will not be taking any action in relation to a referral this should not stop SLNC taking internal steps to safeguard the adult. E.g. the Police may decide not to pursue a criminal investigation where there is an allegation against an employee, but the organisation should still follow its disciplinary procedure.

- 12.** Decide who in the organisation will **maintain contact with the adult** to consult with them, keep them informed and make sure they are receiving the support they need.

Unless advised not to by the Police or Local Authority, and only if there is a safe way to do so, contact the adult to let them know about the actions you have taken and the outcomes so far. Find out if the actions taken are working, what matters to them, what they would like to happen next and what outcomes they want to achieve.

- 13.** Convene a **Case Management Group meeting** to coordinate actions internally to your organisation:
- share information about what has happened with those within SLNC who have a role in safeguarding the adult.
 - share the views of the adult.
 - share any actions being taken by the Police/Local Authority.
 - agree who will coordinate between SLNC and other agencies.
 - decide what actions SLNC will take.
 - coordinate action by SLNC.

These actions can include:

- Use of internal procedures such as breach of code of conduct/disciplinary procedures to address any behaviour that may have caused harm.
- Reporting any employee or volunteer found to have caused harm to the Disclosure and Barring Service.
- Communication with the adult about the safeguarding process, offering support to the adult and making any arrangements needed for them to continue their involvement with the organisation.
- Offering support to staff, volunteers and members affected by the circumstances.
- Ensuring senior managers are updated as needed.

- 14.** Case Management Group (CMG) meeting must be **recorded** so that decision making is transparent, and actions agreed are followed. **Follow up meetings** should be held as necessary until the actions needed are complete. CMGs can inform future policy revisions and make recommendations to be considered for updating procedures.

- 15.** Ensure **records are complete and stored securely**. Collate monitoring information, including feedback from the person who was at risk of harm and **report to senior management team/ the Board as requested**.

The above information is summarised in the following charts.

Steps 1-5 **Initial response** (as soon as the Safeguarding referral is received)

Step 1: Is someone at immediate risk of harm/ danger or in need of immediate medical attention?

NO

YES

Call
emergency
services
999/112

If harm is occurring within the
organisation
use relevant procedures e.g. breach
of code of conduct to prevent further
harm.

Step 2 - Safeguarding Report Details

If you have been sent a Safeguarding Adults Report Form check that you can understand what is written and that all the necessary parts have been completed.
If you are being contacted directly request a completed Safeguarding Adults Report Form (staff and volunteers) or fill in the form with the person making the report (public/adult themselves)

Step 3- Person Making the Report

Inform, reassure and advise the person making the report e.g. what to do/what not to do. Explain what will happen next. Reinforce the need for confidentiality.

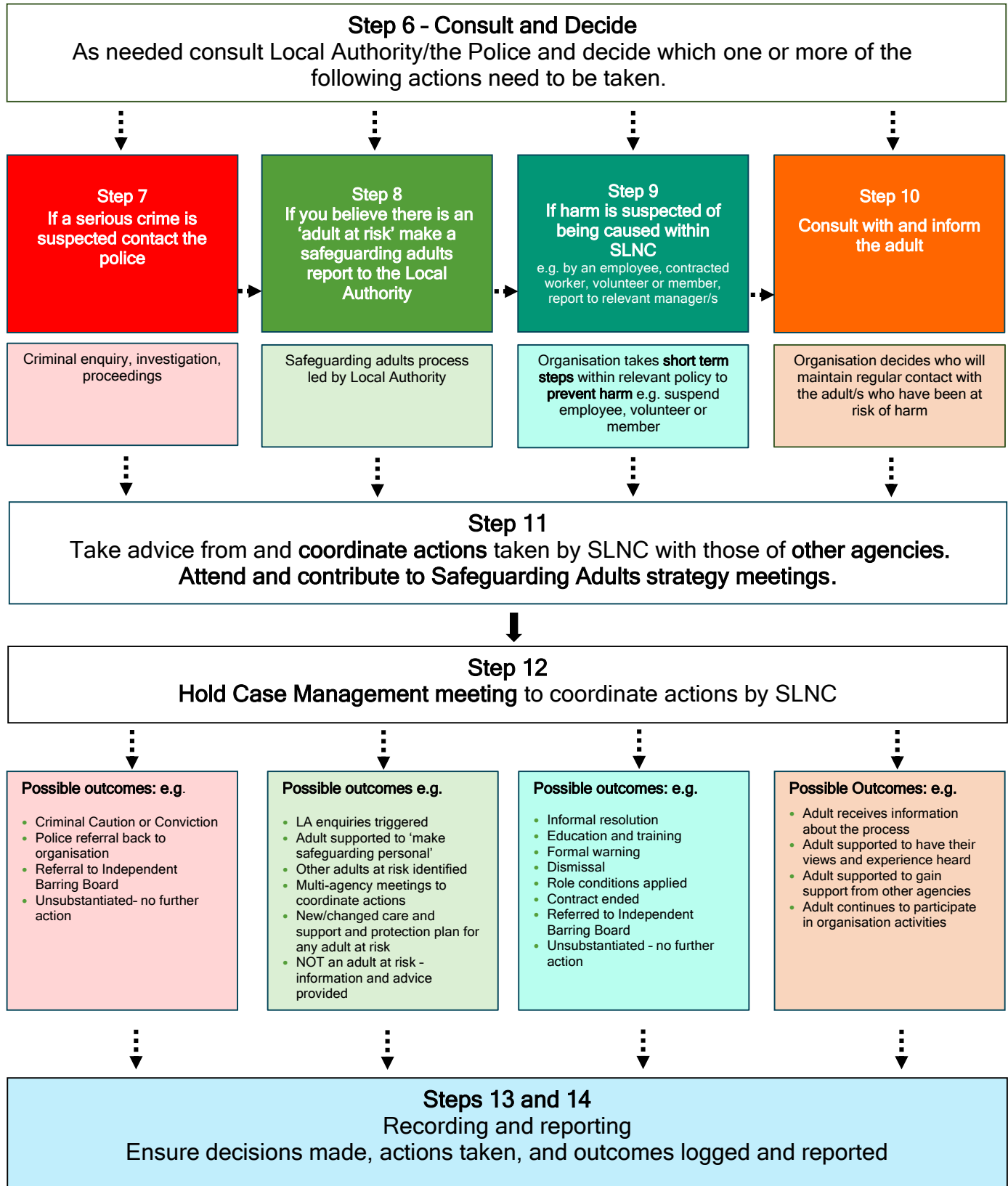
Step 4- Person at Risk

What are the risks? What are the views of the adult? Are they an adult at risk? Do they need support to make decisions about their safety?
Do you need to contact the adult directly? Is it safe for you to do so?

Step 5 - Person at Risk

If it is safe to do so - ensure the person at risk has information about what will happen next. Make sure they have been given information about other organisations that can support them (see Appendices).

Steps 6- 14 Taking Action



4.4 Allegations Against Staff

All organisations that work or come in to contact with adults at risk of harm need to be aware of the possibility that allegations may be made against members of their staff or volunteers.

It may be difficult to accept that abuse could occur in your organisation or that the person being named could be responsible, but **all allegations must be brought to the attention of the Designated Safeguarding Lead (DSL) immediately**. In cases where the allegation is against the DSL, the complaint must be taken to a more senior member of the organisation or you must take the following action yourself:

- Make sure that the adult is safe and away from the person alleged to have abused them
- Contact the Leicester Safeguarding Adults Board
- Irrespective of any investigation by the Leicester Safeguarding Adults Board or the police, you should follow the appropriate disciplinary procedures.
- Common practice is for the alleged abuser to be suspended from attending the organisation or workplace until the outcome of any investigation is known.
- Consider whether the alleged abuser has access to adults at risk of harm anywhere else and whether those organisations or groups need to be informed.
- Act upon the decisions made in any strategy decision.

All incidents will be investigated internally, after any external investigation has finished, to review practice and put in place any additional measures to prevent a similar scenario happening again.

SLNC will develop and encourage an environment where people feel safe to express their concerns about the practice of others. If a staff member, volunteer or participant has concerns they should not be victimised in any way for expressing them.

It is also important we have support systems for the person who faces an allegation. As well as providing immediate support, advice will be given on accessing appropriate outside help such as counselling or legal services.

Glossary

Adult	A person over the age of 18
Adult at risk	Definition used in legislation (different in each home nation) for adults who the Local Authority has a responsibility to support to prevent them from experiencing (further) harm caused by abuse and neglect.
Abuse	A violation of a person's physical, emotional or mental integrity by any other person.
Case Management Group	A group created by an organisation to ensure the organisation carries out its role/s in individual cases of abuse or neglect AND to maintain an overview of the implementation of the organisation's safeguarding functions.
Harm	Damage done to a person's well-being.
MASH	Multi-Agency Safeguarding Hubs are used as a one point of contact/safeguarding referrals in some areas. Where they exist a referral to MASH benefits from the information held by and the expertise of various agencies e.g. Local Authority, Police and Health.
Mental Capacity	The ability to consider relevant information, make and communicate a decision.
Safeguarding	Work to prevent and to stop abuse and neglect.
Safeguarding Adult Team	A team set up to manage the safeguarding of adults at risk within an organisation or more commonly across a Local Authority district.
Safeguarding Adults Board (SAB) (England and Wales)	A statutory body set up in line with national legislation. Statutory membership includes the

Safeguarding Adult Partnership (Northern Ireland)	Local Authority, Police and NHS. Representatives from the voluntary sector and of 'citizens' e.g. a representative from a disabled people's forum are often also included. Their role is to coordinate safeguarding work across the Local Authority district.
Adult Protection Committee (Scotland)	

Acronyms and Terminology Common in Safeguarding

ACT – Ann Craft Trust

ADASS – Association of Directors of Adult Social Services

CQC – Care Quality Commission

CSP – Community Safety Partnership

DBS – Disclosure and Barring Service

DoLS – Deprivation of Liberty Safeguards

FGM – Female Genital Mutilation

FMU – Forced Marriage Unit

LA – Local Authority

LPA – Lasting Power of Attorney

LSAB – Local Safeguarding Adults Board

MAPP – Multi Agency Policies and Procedures

MAPPA – Multi Agency Public Protection Arrangements

MASH – Multi Agency Safeguarding Hubs

MCA – Mental Capacity Act 2005

MSP – Making Safeguarding Personal

IMCA – Independent Mental Capacity Advocate

IMHA – Independent Mental Health Advocate

OPG – Office of the Public Guardian

PALS – Patient Advice and Liaison Service

PoT – Position of Trust

SAAR – Safeguarding Adults at Risk

SAR – Safeguarding Adult Review

SIRI – Serious Incident Requiring Investigation

Terminology for Relevant Organisations

Adult Safeguarding Contact Point – The place where safeguarding concerns are raised within the local area. This could be a local authority single point of access, the relevant social work or mental health team, or a safeguarding hub.

Court of Protection – Legal entity who make decisions on financial or welfare matters for people who can't make decisions at the time they need to be made (they 'lack mental capacity'). The Midlands Regional Hub can be contacted on 0121 250 6395.

Forced Marriage Unit - protect, advise and support victims of forced marriage.
Telephone: +44 (0) 20 7008 0151 Email: fm@fcdo.gov.uk

Local Authority – Adult Social Care, Adult Safeguarding Leads

Police – may be referred to as Community Safety Units or Vulnerable Adults Unit

Summary of Relevant Legislation & Key Government Initiatives

Sexual Offences Act 2003

The Sexual Offences Act introduced a number of new offences concerning adults at risk and children. [Sexual Offences Act 2003 \(legislation.gov.uk\)](#)

Mental Capacity Act 2005

Its general principle is that everybody has capacity unless it is proved otherwise, that they should be supported to make their own decisions, that anything done for or on behalf of people without capacity must be in their best interests and should be the least restrictive intervention. [Mental Capacity Act 2005 \(legislation.gov.uk\)](#)

Safeguarding Vulnerable Groups Act 2006

Introduced the new Vetting and Barring Scheme and the role of the Independent Safeguarding Authority. The Act places a statutory duty on all those working with vulnerable groups to register and undergo an advanced vetting process with criminal sanctions for non-compliance. [Safeguarding Vulnerable Groups Act 2006 \(legislation.gov.uk\)](#)

Deprivation of Liberty Safeguards

Introduced into the Mental Capacity Act 2005 and came into force in April 2009. Designed to provide appropriate safeguards for vulnerable people who have a mental disorder and lack the capacity to consent to the arrangements made for their care or treatment, and who may be deprived of their liberty in their best interests in order to protect them from harm. [Deprivation of Liberty Safeguards \(DoLS\) | SCIE](#)

Disclosure & Barring Service 2013

Criminal record checks: guidance for employers - How employers or organisations can request criminal records checks on potential employees from the Disclosure and Barring Service (DBS). [About us - Disclosure and Barring Service - GOV.UK \(www.gov.uk\)](#)

The Care Act 2014 – statutory guidance

The Care Act introduces new responsibilities for local authorities. It also has major implications for adult care and support providers, people who use services, carers and advocates. It replaces No Secrets and puts adult safeguarding on a statutory footing. [Care Act 2014 \(legislation.gov.uk\)](#)

Making Safeguarding Personal Guide 2014

This guide is intended to support councils and their partners to develop outcome-focused, person-centred safeguarding practice. [Making Safeguarding Personal - Guide 2014.pdf \(local.gov.uk\)](#)

5. APPENDICES

Appendix 1 - Role Description of Designated Safeguarding Lead

The designated person within SLNC has primary responsibility for putting into place procedures to safeguard adults at risk, supporting the organisation, county and regional welfare/safeguarding leads, where relevant and for managing concerns about adults at risk.

Duties and responsibilities include:

- Working with others within the organisation to create a positive inclusive environment within SLNC and across all projects run by SLNC.
- Play a lead role in developing and establishing the organisation's approach to safeguarding adults and in maintaining and reviewing the organisation's implementation plan for safeguarding adults in line with current legislation and best practice.
- Coordinate the dissemination of the safeguarding adult policy, procedures and resources throughout the organisation.
- Contribute to ensuring other policies and procedures are consistent with the organisation's commitment to safeguarding adults.
- Advise on the organisation's training needs and the development of its training strategy.
- Receive reports of and manage cases of poor practice and abuse reported to the organisation – including an appropriate recording system.
- Support the chair to co-ordinate the case management process.
- Manage liaison with, and referrals to, external agencies for example adult social-care services and the police.
- Create a central point of contact for internal and external individuals and agencies concerned about the safety of adults within the organisation.
- Represent the organisation at external meetings related to safeguarding.

Appendix 2 Contacts within the Organisation

SLNC Designated Safeguarding Lead

Neil Hodgkin neil.hodgkin@srcentre.org.uk 0116 283 7212

SLNC Management Chair & Safeguarding Deputy Lead

Dee Dixon info@goldhilladventureplayground.org 0116 283 6350

Saffron Acres Project

Laura Gray saffronacres@srcentre.org.uk 0116 283 1765

Saffron Resource Centre

Carol Price info@srcentre.org.uk 0116 283 7212

APPENDIX 3: LOCAL CONTACTS & INFORMATION

Leicester Safeguarding Adult Boards

Leicester Safeguarding Adults Board (LSAB) members work in partnership to provide strategic leadership to ensure that there are coordinated, effective working arrangements to safeguard adults with needs for care and support across Leicester.

- Telephone: 0116 454 1004 (operational 24 hours a day, 7 days a week)
- Visit: Customer Service Centre, 91 Granby Street, LE1 6FB.

[<https://www.leicester.gov.uk/health-and-social-care/adult-social-care/what-support-do-you-need/safeguarding-adults-board>]

Leicestershire & Rutland Safeguarding Adults Boards

Leicestershire & Rutland Safeguarding Board provides current guidance and information regarding safeguarding adults, along with resources for the voluntary and independent sectors.

- <https://lrsb.org.uk/adultreport> (supports online reporting for city & county)

[<https://lrsb.org.uk/adults>]

Multi Agency Policies & Procedures (MAPP) for Leicester, Leicestershire & Rutland (LLR) Safeguarding Adults Boards (SABs)

Safeguarding concerns and information on Multi Agency Partnership Procedures for the county, as well as the Safeguarding Matters newsletter.

- Leicester: 0116 454 6270 / Leicestershire and Rutland: 0116 305 7130

[<https://www.llradultsafeguarding.co.uk/>]

Local Leicester Police: 0116 222 2222

999 In an emergency

(National Non-emergency 101)

UAVA

United Against Violence and Abuse - services for anyone affected by Domestic Abuse and Sexual Violence in Leicester, Leicestershire and Rutland.

Helpline: 0808 80 200 28

Email: info@uava.org.uk

Text support: 07715 994 962

Appendix 4 – National sources of Information and Support

Action on Elder Abuse

A national organisation based in London. It aims to prevent the abuse of older people by raising awareness, encouraging education, promoting research and collecting and disseminating information.

Tel: 020 8765 7000

Email: enquiries@elderabuse.org.uk

www.elderabuse.org.uk

Ann Craft Trust (ACT)

A national organisation providing information and advice about adult safeguarding. ACT have a specialist Safeguarding Adults in Sport and Activity team to support the sector

Tel: 0115 951 5400

Email: Ann-Craft-Trust@nottingham.ac.uk

www.anncrafttrust.org

Hourglass

Work to protect, and prevent the abuse of, vulnerable older adults and by doing so also protect other adults at risk of abuse.

Email: helpline@wearehourglass.org

24/7 helpline: 0808 808 8141

Men's Advice Line

For male domestic abuse survivors

Tel: 0808 801 0327

National LGBT+ Domestic Abuse Helpline

Tel: 0800 999 5428

National 24Hour Freephone Domestic Abuse Helplines

Tel: 0808 2000 247

www.nationaldahelpline.org.uk/Contact-us

Rape Crisis Federation of England and Wales

Rape Crisis was launched in 1996 and exists to provide a range of facilities and resources to enable the continuance and development of Rape Crisis Groups throughout Wales and England.

Email: info@rapecrisis.co.uk

www.rapecrisis.co.uk

Respond

Respond provides a range of services to victims and perpetrators of sexual abuse who have learning disabilities, and training and support to those working with them.

Tel: 020 7383 0700 or

0808 808 0700 (Helpline)
Email: services@respond.org.uk
www.respond.org.uk

Stop Hate Crime

Works to challenge all forms of Hate Crime and discrimination, based on any aspect of an individual's identity. Stop Hate UK provides independent, confidential and accessible reporting and support for victims, witnesses and third parties.

24 hours service:

Telephone: 0800 138 1625

Web Chat: www.stophateuk.org/talk-to-us/

E mail: talk@stophateuk.org

Text: 07717 989 025

Text relay: 18001 0800 138 1625

By post: PO Box 851, Leeds LS1 9QS

Susy Lamplugh Trust

The Trust is a leading authority on personal safety. Its role is to minimise the damage caused to individuals and to society by aggression in all its forms – physical, verbal and psychological.

Tel: 020 83921839

Fax: 020 8392 1830

Email: info@suzylamplugh.org

www.suzylamplugh.org

Victim Support

Provides practical advice and help, emotional support and reassurance to those who have suffered the effects of a crime.

Tel: 0808 168 9111

www.victimsupport.com

Women's Aid Federation of England and Wales

Women's Aid is a national domestic violence charity. It also runs a domestic violence online help service.

www.womensaid.org.uk/information-support

Appendix 5 - Safeguarding Adults Report Form

To be completed as fully as possible if you have concerns regarding an adult. If it is safe to do so, it is important to inform the adult about your concerns and that you have a duty to pass the information onto the safeguarding lead. The Safeguarding Lead will then look at the information and start to plan a course of action.

Section 1 – Details of adult (you have concerns about)	
Name of adult	
Address	
Date of Birth/ Age	
Contact number	
Emergency contact if known	
Consent to share information with emergency contact?	
Section 2 – Details of the person completing this form/ Your details	
Name	
Contact phone number(s)	
Email address	
Line manager or alternative contact	
Name of organisation / project	
Your Role in organisation	
Section 3 – Details of concern	
Please explain why you are concerned. Please give details about what you have seen/been told/other that makes you believe the adult is at risk of harm or is being abused or neglected (include dates/times/evidence from records/photos etc.)	

Date/ Time	What happened
Section 5 – Details of the person thought to be causing harm (if known)	
Name	
Address	
Date of Birth/Age	
Relationship/connection to adult	
Role in organisation	
Do they have contact with other adults at risk in another capacity? E.g. in their work/family/as a volunteer	
Section 6 - Have you discussed your concerns with the adult? What are their views,	

What have they stated about what they want to happen and what outcomes they want?

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Section 6A – Reasons for not discussing with the adult

Discussion would put the adult or others at risk. Please explain:

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Adult appears to lack mental capacity. Please explain:

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Adult unable to communicate their views. Please explain:

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Section 7 – Risk to others

Are any other adults at risk Yes/No/Not known – delete as appropriate

If yes please fill in another form answering questions 1-6

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Are any children at risk Yes/No/Not known Delete as appropriate

If yes please fill in a safeguarding children referral form and attach to this.

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Section 8 – What action have you taken if any /agreed with the adult to reduce the risks?

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Actions by organisation: e.g. person causing harm suspended, session times changed.	
Section 9: Other agencies contacted	Who contacted/reference number/contact details/advice gained/action being taken
Police	
Ambulance	
Other – please state who and why:	
Section 10: Contact with staff /others within the project	
Who else has been informed of this issue? – and what was the reason for information sharing	
Consultation with Safeguarding Lead	Dates and times
Completed Form copied to Safeguarding Lead; Date and time	
Signed:	
Date:	

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Section 11 – Sharing the concerns (To be completed by Safeguarding Lead)

Details of your contact with the adult at risk of harm. Have they consented to information being shared outside of SLNC?

Details of contact with the Local Authority Safeguarding Team/MASH where the adult at risk of harm lives – advice can be still sought without giving personal details if you do not have consent for a referral.

Details of any other agencies contacted:

Details of the outcome of this concern: