



PLEASE REFER TO PAGE 8 FOR INSTRUCTIONS ON HOW TO MAKE A REFERRAL

SAFEGUARDING ADULTS' POLICY

In April 2015, primary legislation was introduced to put Safeguarding Adults on a statutory footing for the very first time, establishing a new framework for adult safeguarding. The Care Act 2014 superseded all previous guidance including "No Secrets" published by the Department of Health, which had originally set out the framework for safeguarding adults.

The introduction of the Care Act 2014 led not only to a change in the definition of adult abuse, but also to a change in the responsibilities of those who come in to contact with adults at risk of neglect and abuse.

CAUTION

It is a criminal offence under Section 20 of the Criminal Justice and Courts Act 2015 for a care or support worker to ill-treat or willfully neglect an individual in their care.

Willful neglect can include the conscious failure to act on and raise timely concerns relating to the welfare of a person in their care.

What is adult safeguarding?

Care and support statutory guidance define adult safeguarding as "protecting an adult's right to live in safety, free from abuse and neglect" (2016). Safeguarding focuses upon preventing and responding to concerns of abuse, harm and neglect of adults, and all staff should work together in partnership with adults so that they are:

1. Safe and able to protect themselves from abuse and neglect.
2. Treated fairly with dignity and respect.
3. Protected when they need to be.
4. Able to easily access the support, protection, and services that they need.

The aims of safeguarding?

- Stop abuse or neglect whenever and wherever possible.
- Prevent harm and reduce the risk of abuse and neglect to adults with care and support needs.
- Safeguard adults in a way that supports them in making choices and having control about how they want to live.
- Promote an approach that concentrates on improving life for the adults concerned.
- Raise public awareness so that communities, alongside professionals, play their part in preventing, identifying, and responding to abuse and neglect.
- Provide information and support in accessible ways to help adults understand the different types of abuse, how to stay safe and what to do to raise a concern about the safety or well-being of an adult and...
- Address what has caused the abuse.

Principles of adult safeguarding:

The following six key principles of adult safeguarding are set out in the Care and Support Statutory Guidance (2016) and apply to all sectors and setting including care and support services, further education colleges, commissioning, regulation, and provision of health and care services, social work, healthcare, welfare benefits, housing, wider local authority functions and the criminal justice system.

Empowerment:

People being supported and encouraged to make their own decisions, and informed consent.

"I am asked what I want as the outcome from the safeguarding process and these directly inform what happens."

Protection:

Support and representation of 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."

Accountability:

Accountability and transparency in delivering safeguarding.

"I understand the role of everyone involved in my life and so do they."

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 right result."

Prevention:

It is better to act before harm occurs.

"I receive clear and simple information about what abuse is, how to recognize the signs and what I can do to seek help."

Proportionality:

The least intrusive response appropriate to the risk prevented.

"I am sure that the professionals will work in my interest, as I see them, and they will only get involved as much as needed".

Safeguarding Duties:

In the context of the legislation, specific adult safeguarding duties apply to an adult who:

- Has care and support needs and
- Is experiencing, or at risk of, abuse or neglect and
- Is unable to protect themselves from abuse or neglect because of their care and support needs.

Safeguarding duties apply regardless of whether a person's care and support needs are being met by the local authority or anyone else. They also apply to people who pay for their own care and support services.

Adult safeguarding duties apply in whatever setting people live in, except for prisons and approved premises such as bail hostels. They apply regardless of whether someone can make specific decisions for themselves at specific times. There may be times when a person has care and support needs and is unable to protect themselves for a short, temporary period – for example: when they are in hospital under anesthetic.

People with care and support needs are not inherently vulnerable, but they may come to be at risk of abuse or neglect at any point due to:

- Physical or mental health
- Becoming disabled
- Getting older
- Not having support networks
- Inappropriate accommodation
- Financial circumstances or
- Being social isolated

Human Rights Act 1998

Everyone has the right to live their lives free from abuse and this right is underpinned by the duty on public agencies under the Human Rights Act (1998) to intervene proportionately to protect the rights of people.

The rights contained in the Human Rights Act are:

- The right to life
- The right not to be tortured or treated in an inhuman or degrading way.
- The right to be free from slavery or forced labour.
- The right to liberty.
- To right to a fair trial.
- The right to no punishment without law.
- The right to respect, for private and family life, home, and correspondence.
- The right to freedom of thought, conscience, and religion.
- The right to freedom of expression.
- The right to freedom of assembly and association.
- The right to marry and found a family.
- The right not to be discriminated against in relation to any of the rights contained in the European Convention.
- The right to peaceful enjoyment of possessions.
- The right to education.
- The right to free elections.

What is the proper care and treatment of an adult at risk?

The care and treatment of a client must not be provided in a way that:

1. Includes discrimination against a client on grounds of age, disability, gender re-assignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex or sexual orientation.
2. Includes acts intended to control or restrain a client, that are not necessary to prevent, or not a proportionate response to, a risk of harm posed to the client or another individual if the client was not subject to control or restraint. Where it is necessary to agree a plan or restrictive intervention, a Restrictive Intervention Policy must be adhered to.
3. Is degrading to the client.
4. Significantly disregards the needs of the client for support or treatment.

Any incidents of the above must be reported to the relevant Local Authority, informing them that the client is at risk of, or is being abused or neglected. The local authority will decide whether the concerns will be addressed via their adult safeguarding procedures.

What is abuse?

Abuse is the discrimination of another person or the violation of a person's human and civil rights by another person or persons.

Abuse may be perpetrated because of deliberate intent, negligence, or ignorance. Abuse may consist of a single act or repeated acts. Incidents of abuse may be multiple, either to one person in a continuing relationship or service context, or to more than one person at a time.

Abuse can consist of:

1. Any behavior towards a client that is an offence under the Sexual Offences Act (2003)
2. Ill-treatment of a client, either physical or psychological in nature.
3. Theft, misuse or misappropriation of money or property belonging to a client or
4. Neglect or self-neglect of a client.

Abuse includes the inappropriate deprivation of liberty under the terms of the Mental Capacity Act (2005). Some instances of abuse will constitute a criminal offence.

Table 1 Examples of abuse?

Category of abuse	Examples of abuse	Indicators of abuse
Physical abuse	<ul style="list-style-type: none"> • Assault • Hitting • Slapping • Pushing • Misuse of medication • Restraint • Inappropriate physical sanctions 	<ul style="list-style-type: none"> • Injuries inconsistent with the explanation given for them. • Lack of explanation as to how the injuries occurred. • Injuries inconsistent with lifestyle of the victim. • Multiple bruising, particularly in well protected areas. • Injuries to the person which can be identified as non-accidental or unexplained. • Burns • Rope burns or marks on arms, legs, and torso. • Fractures • Unexplained loss of hair in clumps • Changes of behavior • Subdued personality • Malnutrition • Being left in wet clothing <p>The following can occur very easily in older people and therefore, may or may not be indicators of mistreatment and abuse.</p> <ul style="list-style-type: none"> • Bruising • Carpet burns • Excessive consumption of alcohol • Ulcers, pressure sores • Increasing immobility • Dehydration • Minor skin abrasions • Getting or taking the wrong dose of a prescribed medication
Domestic abuse	<ul style="list-style-type: none"> • Psychological • Physical • Sexual • Emotional • Controlling and coercive • So called "honour" based violence 	<ul style="list-style-type: none"> • Threats to hurt or individual, self, children • Destroy belongings. • Intimidating/invasive behaviour. • Not allowing privacy (texts/emails) • Harassment – following. • Hit, punch, shove, bite, burn. • Throwing things • Blame you for the abuse/arguments. • Isolate from family or friends. • Prevented from going to work. • Often accused of being unfaithful. • Being told what to wear, who to see, where to go and what to think. • Controlled money, restricting purchases. • Monitor social media profiles.
Sexual abuse	<ul style="list-style-type: none"> • Rape • Indecent exposure • Sexual harassment • Inappropriate looking or touching • Sexual teasing/inuendo's • Sexual photography 	<ul style="list-style-type: none"> • Individual at risk appears withdrawn. • Bruising and/or bleeding around vaginal or genital area. • Overt sexual behaviour/language. • Bruising on inner thigh area. • Disturbed sleep (also often associated with the ageing process) • Unexplained difficulties in walking/sitting. • Self-inflicted injuries

	<ul style="list-style-type: none"> • Subjection to pornography or witnessing sexual acts. • Sexual acts to which the adult has not consented or was pressured into consenting. 	<ul style="list-style-type: none"> • Reluctance of person to be alone with an individual known to them. • Unexplained behaviour change. • Urinary infections. • Stained or bloody clothing. • Love bites. • Fear of people offering help with undressing. • Sexually transmitted disease.
Psychological abuse	<ul style="list-style-type: none"> • Emotional abuse • Threats of harm or abandonment • Deprivation of contact • Humiliation • Blaming • Controlling • Intimidation • Coercion • Harassment • Verbal abuse • Cyber bullying • Isolation • Unreasonable and unjustified withdrawal of services or supportive networks 	<ul style="list-style-type: none"> • Air of silence when the alleged perpetrator is present. • General lack of consideration for the needs of the individual at risk • Individual at risk not allowed to express his/her opinion. • Privacy denied in relation to care, feelings of other aspects of life. • Denial of access to the adult at risk especially when this person is in need of assistance which he/she will consequently not receive. • Denial of freedom of movement e.g.: locking the individual at risk, in a room, tying him/her to a chair. • Alternation in the adult's psychological state.
Financial or material abuse	<ul style="list-style-type: none"> • Theft • Fraud • Internet scamming • Coercion in relation to an adults financial affairs or arrangements, including a connection with wills, property, inheritance or financial transactions. 	<ul style="list-style-type: none"> • Sudden lack of money, especially after receiving benefits/pension. • Unexplained withdrawals from accounts. • Sudden inability to pay bills. • Disparity between assets and satisfactory living conditions. • Not wanting to spend (note natural thrift) • Extraordinary interest in the individual at risk assets by family, carer's, friends, staff or others in contact • Block signing of benefit book.
Modern slavery	<ul style="list-style-type: none"> • Slavery • Human trafficking • Forced labour and domestic servitude. 	<p>A person is in modern slavery if they are:</p> <ul style="list-style-type: none"> • Forced to work - through coercion, or material, or physical threat. • Owner of controlled by an "employer" through mental or physical abuse or the threat of abuse. • Dehumanised, treated as a commodity or bought and sold as "property". • Physically constrained or have restrictions placed on their freedom of movement. <p>Forms of modern slavery are:</p> <ul style="list-style-type: none"> • Forced labour - any work of services which people are forced to do against their will under the threat of some form of punishment. • Debt bondage or bonded labour – the worlds most widespread form of slavery, when people borrow money they cannot afford to repay and are required to work to pay off the debt. • Human trafficking – involved transporting, recruiting or harbouring people for the purpose of exploitation, using violence, threats or coercion.
Neglect and acts of omission	<ul style="list-style-type: none"> • Ignoring medical, emotional, or physical care needs • Failure to provide access to appropriate health, care and support or educational services. • The withholding of the necessities of life such as 	<ul style="list-style-type: none"> • A dirty or unhygienic environment. • Poor personal hygiene. • Inadequate clothing. • Injuries or medical problems untreated, pressure sores or ulcers, or malnutrition or unexplained weight loss. • Lacking contact with medical or social care organisations. • Build-up of untaken medication.

	medication, adequate nutrition, and heating.	
Discriminatory abuse	<ul style="list-style-type: none"> • Harassment • Slurs or similar treatment because of: <ul style="list-style-type: none"> • Race • Gender or gender identity • Age • Disability • Sexual orientation • Religion 	<ul style="list-style-type: none"> • The person appears withdrawn and isolated. • Expressions of anger, frustration, fear or anxiety. • The support or offer does not take account of the person's individual needs in terms of a protected characteristic.
Organisational abuse	Including neglect and poor support practices within an institution or specific care setting including a client's own home. They may range from one-off incidents to 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.	Institutional abuse occurs when services develop ways of working that meet the needs of the staff and the organisation rather than the individual client. These practices can become abusive if they deny or limit the choices, dignity or privacy of clients.
Degrading treatment	<ul style="list-style-type: none"> • Not providing necessary help and aids • Leaving clients in soiled clothing, sheets, or surroundings. • Making clients carry out demeaning tasks or social activities. • Ridiculing clients. 	<ul style="list-style-type: none"> • Clients complaining about particular staff members or visitors. • Clients not wanting to undertake particular tasks. • Clients being resentful of certain people.
Self-neglect	This covers a wide range of behaviour: Neglecting personal hygiene, health or surroundings and includes hoarding. A decision on whether a response is required under safeguarding will depend on the adult's ability to protect themselves by controlling their own behaviour. There may come a point when they are no longer able to do this, without external support.	<ul style="list-style-type: none"> • Very poor personal hygiene. • Unkempt appearance. • Lack of essential food, clothing or shelter. • Malnutrition / dehydration. • Living in squalid or unsanitary conditions. • Neglecting household maintenance. • Hoarding. • Collecting many animals in inappropriate conditions.

Forced Marriage:

Forced marriage is when someone faces physical pressure to marry (e.g., threats, physical or sexual violence) or emotional and psychological pressures. Forced marriage is illegal in England and Wales. This includes:

- Taking someone overseas to force them to marry (whether or not the forced marriage takes place).
- Marrying someone who lacks the mental capacity to consent to the marriage (whether they are pressured or not).

Forcing someone to marry can result in a sentence of up to 7 years in prison.

Radicalisation:

When an individual or group adopts increasingly extreme political, religious or social views or ideals that reject the status quo, or reject or undermine the usual ideas and expressions of choice. Signs could include:

Being overly secretive about their online viewing – this being one of the core ways in which groups are known to communicate.

Displaying feelings of isolation or expressions of an “us and them” mentality – a sign of the sense of social isolation.

Becoming more argumentative or domineering in their viewpoints, being quick to condemn those who disagree and ignoring views that contradict their own.

Questioning their faith or identity.

Downloading or promoting extremist content.

Social isolation – losing interest in activities they used to enjoy, distancing themselves from friends and social groups.

Altered appearance – change in style or dress and/or personal appearance.

Female Genital Mutilation:

Procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons. The practice is illegal in the UK.

An estimated 137,000 women in the UK are affected.

The girls may be taken to their country of origin so that FGM can be carried out during the summer holidays, allowing them time to “heal” before they return to school. There are also worries that some girls may have FGM performed in the UK.

Safeguarding Process Flow:

PLEASE REFER TO THE BRIDGE CASE MANAGEMENT SAFEGUARDING REFERRAL PATHWAY.

What should you do if you are concerned an adult is at risk of being abused?

1. If you feel someone is in danger or at risk of immediate harm, dial 999 and seek emergency assistance, and then follow the steps set out in the flow chart.
2. If you are concerned that a client is experiencing, or is at risk of experiencing abuse or neglect, regardless of intent, you must report your concerns immediately. You must:
 - a. If from a Case Manager, alert your Line Manager and the Safeguarding Lead within 2 hours of learning of the incident or concern (unless there is a good reason for being unable to do so, in which case, contact must be made by the end of the working day).
 - b. 1) Update our internal safeguarding form and inform the Safeguarding Lead by the end of that working day. 2) Ensure the safeguarding referral is sent to the local authority, using their safeguarding referral form, by COP that day. 3. Update Bridge Case Managements Case Manager system with the following statement: *Safeguarding referral made by XXXX on XXXX, please refer to our safeguarding register for full information.*
 - c. If outside of office hours, please notify either the Clinical Directors and/or the Safeguarding Lead by phone and complete our internal safeguarding form – Please remember that you should NEVER sleep on a concern.
3. It is your responsibility to report your concerns in a timely manner, in line with the timescales set out in this policy.
4. If a client discloses to you that they are suffering from harm through the deliberate intent, negligence, or lack of understanding or another, you must share your concern with the Case Manager, Clinical Directors and/or the Safeguarding Lead immediately. Where safe and appropriate to do so, ensure the client is aware of what you are going to do and reassure them of the timescales of action. Your concerns must be reported within the same working day.
5. It is the responsibility of the Case Manager and the Safeguarding Lead to consider the client's immediate safety and risks. The Case Manager must be satisfied that a sufficient plan is in place to safeguard the client from any immediate risks, and co-ordinate the implementation of any such plans.
6. The Case Manager, where appropriate, refers the concern to the local authority governing the area in which the client lives. The Case Manager must work in line with the local authority's safeguarding process, guided by the Safeguarding Lead.
7. The Case Manager will keep you informed, where appropriate, and agree with you, a clear plan for keeping the adult at risk safe until appropriate action can be taken.
8. The Safeguarding Lead will ensure the safeguarding register is kept fully up to date with the actions and final outcome of the investigation by Bridge Case Management and the local authority (LADO).