

SAFEGUARDING ADULTS POLICY

Updated: August 2020

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Introduction

I am delighted to introduce and commend this revised and updated adult safeguarding policy and procedures to you. We have continued to enhance and strengthen our approaches to safeguarding children and adults as a key priority across all of our services and this updated policy ensures that our practice is in line with current developments and legislation. We value our work with adults with enormously and the quality of that work is consistently recognised by external statutory inspections. This means that we have a strong platform upon which to strengthen both direct practice and our awareness and understanding of their needs.

Whilst this policy focuses on adults it should be read and understood in conjunction with the policy for safeguarding children. Similarly, Local Safeguarding Adults Board procedures should be referred to, to enable you to understand the local framework, specific arrangements and contact details of relevant agencies. Uniquely for a charity, we work with children and parents as well as adults with care needs in their own right. Often of course, parents can themselves have care and support needs. All practitioners that work with families, whether from a predominantly adult or a child focus, work within a statutory framework that ensures that children's needs are paramount. In recognition of this, I would like to take this opportunity to remind staff of the priority we must give to the needs of children even when the main focus of the work is with a parent/adult. Please remember:

- ☒ Children are dependent upon adults for their safety and wellbeing
- ☒ Adults, particularly adults with care needs, need support to be able to parent well
- ☒ Child focussed practitioners should seek to identify if a parent is an adult with care needs
- ☒ Adult focussed practitioners should always identify if there are children living with or dependant on their client. (A 'child' is defined in the Children Act 1989 as anyone under the age of 18 years)
- ☒ All practitioners should be alert to signs which may suggest children are being placed at risk of significant harm by the actions, inactions or behaviour of an adult
- ☒ All practitioners should know how to respond to concerns that a child may be suffering significant harm and to make an appropriate referral
- ☒ Children's outcomes are more likely to be met and risk is reduced when information is shared effectively across and within agencies and when multi-agency and multi-disciplinary working is effective
- ☒ It is better to pick up the phone than to live with the regret of not having done so (*Serious Case Review, Baby Peter 2009*)

Director of Services and Innovation
August 2019

SAFEGUARDING ADULTS POLICY

1. Introduction

Effective protection of adults is achieved through a multi-disciplinary approach with consultation and the sharing of information. Each local authority area will, together with their local Adult Safeguarding Board, have agreed Adult with care needs Protection Procedures. This policy and procedural guidance should be used in conjunction with those locally agreed policies and procedures.

Family Action believes that every individual who accesses our services has a right to a life free from fear, to be treated with dignity and respect, to have their choice respected and not to be forced to do anything against their will. Family Action believes that everyone has the right to protection from abuse, regardless of their age, culture, disability, gender, racial origin, language, religious belief or sexual orientation.

Where a person, having been appropriately assessed, is deemed to lack capacity under the terms of the Mental Capacity Act 2005, any decisions which are made to protect them from abuse will be made in their best interests and after discussion with senior Managers, other agencies as appropriate, and if necessary, with the help of an Independent Mental Capacity Advocate (IMCA).

POLICY STATEMENT

Family Action recognises the importance of its support services to families, children, young people and adults and its particular responsibilities to safeguard and promote the welfare of those who have care needs or are at risk.

This requires us to:

- * Listen to, value, encourage and support those we work with.
- * Provide clear internal procedures for identifying and dealing with concerns about possible abuse, and ensure their implementation.
- * Provide effective management for staff, students and volunteers through supervision, support and training.
- * Adopt and promote a code of conduct for staff.
- * Include continuous risk assessment within our work with service users.
- * Recruit safely, ensuring all necessary checks are made.
- * Share information about adult protection and good practice with service users, staff, students and volunteers.
- * Develop and maintain effective information sharing with statutory services and other agencies, involving service users as appropriate.
- * Work collaboratively with Local Adult Safeguarding Boards.

This policy applies to those adults we work with who have care needs and who may be at risk of abuse or neglect. It also applies to all trustees, staff, students and volunteers working for

Family Action. Any allegation or concern about abuse must be acted upon.

All work undertaken by Family Action will be subject to continuous risk assessment and comply with Family Action's Risk Policy and Procedures.

The responsibility to report any concerns rests with the individual regardless of their place within the organisation, any concern that an adult with care needs is at risk of abuse must be discussed with the line manager without delay and further action taken as necessary.

This Safeguarding Adults policy relates to adults who:

- Have a need for care and support by reason of mental or other disability, age or illness;
- Are experiencing, or at risk of experiencing neglect or abuse
- As a result of care needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect

Having a need for care and support can apply to:

- People with a learning disability
- People with physical disabilities
- People with sensory impairment
- People with mental health needs including dementia
- People who misuse substances or alcohol
- People who are physically or mentally frail

If in doubt, always discuss this with your line manager and make any decisions jointly and where necessary in consultation with others

Family Action staff, students and volunteers must follow their Local Adults Safeguarding Board Procedures which take precedence over Family Action's Safeguarding Adults Procedures, if there are any significant differences.

Every effort will be made to ensure that trustees, staff, students and volunteers recruited to work for Family Action are suitable to do so. Those who are responsible for appointing staff will be trained in safe recruitment practices. All references will be robustly scrutinized and other checks sought at the appropriate level e.g. DBS, SOVA etc.

Family Action is committed to training all staff, students and volunteers in this policy and procedure and code of behaviour, as part of the induction process. It requires all those working with adults with care needs to address safeguarding within the Social Care Induction Programme, and to undertake Safeguarding Adults Training within their probationary period. In addition, they will be required to undertake either refresher training or more advanced training (as appropriate) at least every two years.

This policy will be reviewed annually by the Deputy Director of Quality, Performance and Safeguarding.

Legal and Procedural Framework

Refer to Appendix One for more detail

1998 Human Rights Act

2003 Sexual Offences Act.

2003 Disability Discrimination Act

2004 Domestic Violence Crime and Victims Act.

2005 Mental Capacity Act

2005 Safeguarding Adults - National Framework of Standards.

2007 Mental Health Act

2018 Information Sharing Guidance for Safeguarding Practitioners

2014 Care Act

2014 Anti-Social Behaviour, Crime and Policing Act

2015 Serious Crime Act

2015 Counter-Terrorism and Security Act

Accountabilities Framework

Safeguarding is the responsibility of us all

TRUSTEES	<p>Accountable for Family Action and therefore all safeguarding within the organisation</p> <p>Receive regular reports on safeguarding</p>
CHIEF EXECUTIVE	<p>Accountable to the Trustees for safeguarding within the organisation</p> <p>Ensures a clear framework for the management accountability for safeguarding</p>
DIRECTOR OF SERVICES AND INNOVATION	<p>Respond to national safeguarding policy proposals</p> <p>Give leadership on safeguarding as a corporate issue</p> <p>Ensure that safeguarding is made integral to Family Action's Strategic Plan</p> <p>Ensure that the corporate Quality Assurance system takes account of safeguarding</p> <p>Safeguarding is given regular consideration at SLG Meetings</p> <p>Accountable to the Chief Executive for safeguarding in all projects and services within the Operations Department</p> <p>Commissions specific time limited work to address safeguarding issues</p> <p>Together with HR ensures that safe recruitment practices are fully employed and that staff appointed have the necessary skills and experience in safeguarding appropriate to their role</p> <p>Ensures that effective supervision supports safeguarding at all levels within the department</p> <p>Instigates the auditing of specific areas of work</p> <p>Receives internal reports as part of the Serious Case Review process</p> <p>Ensures that internal systems are established and effective in supporting safeguarding</p> <p>Receives reports from the various safeguarding sub groups</p>

	<p>Manages the Assistant Director for Safeguarding and budget</p>
DEPUTY DIRECTORS	<p>Accountable to the Director of Services and Innovation for Safeguarding in projects and services in their region.</p> <p>Together with the HR Department, ensure safe recruitment practices are fully employed in the recruitment of both staff and volunteers and that they have the necessary skills and experience in safeguarding, appropriate to the role.</p> <p>Line management responsibility for the safe delivery, quality and effectiveness of the services within their region</p> <p>Ensure all supervisors and managers within their region receive an appropriate level of safeguarding training appropriate to their role and responsibilities</p> <p>Ensure effective supervision supports safeguarding in their region</p> <p>Report on the practice and management of safeguarding in their region respond to safeguarding audit as required</p> <p>Offer advice and support to staff on safeguarding issues when Project Managers are absent, as well as providing support to Project Managers, co-ordinators and others as necessary.</p> <p>Ensure the development of a safeguarding culture within the context of their services</p> <p>Undertake management reviews when there are concerns about quality and effectiveness in relation to safeguarding and take corrective action where necessary</p> <p>Cost new services to allow for the implementation of the safeguarding framework</p> <p>Ensure that regional management meetings have safeguarding as a standing item on their agenda.</p> <p>Provide safeguarding activity reports as required</p> <p>Undertake an audit of case files</p>
DEPUTY DIRECTOR: QUALITY, PERFORMANCCE & SAFEGUARDING	<p>Accountable to the Director of Services and Innovation for the development of safeguarding within the organisation</p> <p>Provide annual reports to the Trustees, through the Quality and Performance Committee</p>

	<p>Regularly receive and collate information in respect of safeguarding activity to inform a corporate assessment of risk.</p> <p>Review and update the Family Action Safeguarding Policy and Procedures</p> <p>Responsible for developing and reviewing the Safeguarding Strategy</p> <p>Ensure, together with HR, that all new staff are inducted into Family Action’s Safeguarding framework prior to the completion of the probationary period</p> <p>Review the quality and content of Family Action’s Safeguarding training to meet the needs of the organisation and to ensure any new learning can be fully integrated into working practices</p> <p>Co-ordinate, analyse and report on the annual Safeguarding audits</p> <p>Link Family Action into national safeguarding networks</p> <p>Circulate safeguarding information and updates as appropriate</p> <p>Undertake tasks on behalf of relevant internal groups and the Director of Services and Innovation</p>
<p>OPERATIONAL/PROJECT/SERVICE MANAGERS</p>	<p>Accountable to the Regional Deputy Director for safeguarding in their project or service. Together with the HR Department, ensure safe recruitment practices are fully employed in the recruitment of both staff and volunteers and that they have the necessary skills and experience in safeguarding, appropriate to the role</p> <p>Line management responsibility for the safe delivery, quality and effectiveness of services provided by their project/s</p> <p>Responsibility to establish and maintain effective relationships with the Local Safeguarding Adults Board and other agencies locally, in relation to safeguarding, and to challenge when appropriate</p> <p>Ensure that safeguarding is integral to all Family Action processes for the assessment, analysis, planning and reviewing of outcomes, in our work with service users</p> <p>Ensure all their staff, students and volunteers receive</p>

	<p>safeguarding training and support commensurate with their need</p> <p>Ensure that all files clearly identify where there are concerns for the welfare of adults with care needs and that files comply with organisational standards</p> <p>Ensure that supervision is provided to staff, students and volunteers in line with Family Action’s supervision policy taking into account any safeguarding issues, the complexity of the work and experience of the supervisee</p> <p>Ensure that supervision sessions record reflective practice and any decisions made are transferred to the case file – all records are signed and dated</p> <p>Ensure that the risk assessment framework for each case is regularly reviewed and an escalation process implemented as necessary</p> <p>Ensure that safeguarding practice is regularly discussed in supervision to identify any training needs and is included within the staff appraisal process</p> <p>Ensure that there is a written Safeguarding Statement clearly displayed in each service</p> <p>Ensure that safeguarding is a standing item on team meeting agendas</p> <p>Ensure that supervisors regularly read case files and countersign them</p> <p>Undertake periodic file audits</p> <p>Make adult protection referrals to Adult Social Care, as necessary</p> <p>Provide information on safeguarding activity to the Regional Manager and SM as required</p>
<p>NAMED PERSONS</p>	<p>There are designated staff in each region who provide; consultation, guidance and support to staff on safeguarding matters and concerns.</p> <p>Named Persons will have a thorough and current knowledge of safeguarding guidance and legislation and a working knowledge of local procedures.</p> <p>For named person details for each region refer to Named</p>

	Persons file on our Safeguarding website.
ADMINISTRATORS, STUDENTS AND VOLUNTEERS INCLUDING SERVICE USERS WHO ARE PARTICIPATING AS VOLUNTEERS FRONTLINE STAFF	<p>Accountable to their Project or Service Manager for safeguarding within their work</p> <p>Responsibility for the safe delivery, quality and effectiveness of the services they provide</p> <p>Are alert to safeguarding issues in all aspects of their work</p> <p>Keep accurate and timely records which are signed and dated and comply with Family Action's procedures in relation to file format and management</p> <p>Remember that the welfare of the child is paramount but also to draw to the attention of their line management any concerns they may have for the welfare of an adult with care needs</p> <p>Make referrals to Adult Social Care as necessary in consultation with their line Manager</p> <p>Use supervision and appraisal to reflect on practice in relation to safeguarding.</p> <p>Undertake safeguarding training as necessary</p>

Links to other policies:

All staff involved with safeguarding and adult protection work need to bear in mind the other Family Action organisational policies which support their work and provide guidance:

- ☒ Safeguarding Children
- ☒ Social Care Induction
- ☒ Equal Opportunities and Diversity
- ☒ Supervision
- ☒ Whistle blowing
- ☒ Sharing Information and Confidentiality
- ☒ Code of Conduct
- ☒ Lone Working
- ☒ Health and Safety
- ☒ Complaints
- ☒ Internal & External Communications Strategies
- ☒ Volunteers
- ☒ Participation
- ☒ Safeguarding Practice Standards
- ☒ Anti bullying
- ☒ Escalation
- ☒ Safe Recruitment

SAFEGUARDING ADULTS PROCEDURES

The purpose of these procedures is to ensure a speedy and effective response for dealing with concerns about adult abuse. Adherence to these procedures is mandatory for all Family Action staff, students and volunteers. All new staff to Family Action will be made aware of this policy and procedures through the induction process. For operations staff working with adults with care needs, the Social Care Induction (Adults) Programme and Adult Protection Basic Awareness Course will be completed during the probation period.

All Family Action staff, students and volunteers will be expected to comply with the organisation's Code of Conduct.

Each team must ensure they have a hard copy of this policy and procedure and make it easily accessible to its staff. This guidance can also be easily accessed on our intranet site for Safeguarding, see policy and procedures. Safeguarding will be considered at each OSMG, regional and team meetings as a standing agenda item and within each supervision session.

DEFINITIONS

Definition of Abuse

Abuse is described as *"a violation of an individual's human or civil rights by any other person or persons"* (No Secrets, Department of Health - 2000).

Abuse can occur in any relationship, context or environment irrespective of whether the adult with care needs lives in his or her own home, with their family or on their own, in residential care, shared or supported housing. Those who perpetrate abuse on others are often well known to their victims. Abuse occurs where there is an imbalance of power and that power is misused. The seriousness of abuse varies and can range from behaviour that is violent and criminal to passive abuse, which is neglectful, unintentional and less deliberately exploitative in character.

Abuse may consist of a single act or repeated acts. It may be physical, verbal or psychological, it may be an act of neglect or an omission to act, or it may occur when a person is persuaded to enter into a financial or sexual transaction to which he or she has not consented, or cannot consent. Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it.

Self Neglect

NB; some adults may be at risk from their own self neglect. This is a serious issue which must be addressed; however, arrangements for responding to Self Neglect differ across local areas. Please check Local Safeguarding Adults Board (LSAB) procedures to understand the required response in your area. Should the LSAB website have no information on what to do in situations of Self Neglect, a referral should be made to Adult Services to initiate an assessment.

Physical abuse:

This can include being assaulted, hit, slapped, pushed, restrained, being denied food or water, or not being helped to go to the bathroom needed. It can also include misuse of medication.

Sexual abuse:

This includes indecent exposure, sexual harassment, inappropriate looking or touching, as well as rape. Sexual teasing or innuendo, sexual photography, subjection to pornography, witnessing sexual acts, and sexual acts that were not consented to or where pressured into consenting to all count as sexual abuse.

Psychological and emotional abuse:

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

Financial or material abuse:

Including theft, fraud, exploitation, pressure in connection with wills, or the misuse or misappropriation of property, possessions or benefits.

Neglect and acts of omission:

This may involve ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.

Discriminatory abuse

This includes some forms of harassment, slurs or similar unfair treatment relating to race, gender and gender identity, age, disability, sexual orientation, or religion.

Institutional abuse

Neglect and poor professional practice may in some circumstances constitute abuse. This may take the form of isolated incidents of poor practice or unsatisfactory professional practice at one end of the spectrum, through to pervasive ill treatment or gross misconduct at the other.

New technologies and abuse

This may involve abuse through bullying and intimidation using texting, mobile phones and emails. Exposure to inappropriate materials via internet sites and games and predators making contact with people through social networking sites.

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. This makes it important to look beyond the single incident or breach in standards to the underlying dynamics and pattern of harm.

Some instances of abuse will constitute a Criminal Offence. In this respect adults with care needs are entitled to the protection of the law in the same way as any other adult. Alleged criminal offences differ from all other types of non-criminal forms of abuse in that the responsibility for initiating action invariably fall on the state in the form of the police or CPS. They need to be contacted immediately, as a criminal investigation by the police takes priority over any other line of enquiry.

Family Action recognises that all service users are potentially open to abuse, but that those defined as 'adults with care needs' are particularly at risk.

Safeguarding adults means protecting a person's right to live in safety, free from abuse and neglect.

The Care Act requires that each Local Authority must:

Make enquiries, or ensure others do so, if it believes an adult is experiencing, or is at risk of, abuse or neglect. The Care Act lists the following criteria for Local Authorities to determine if such an enquiry must be initiated.

- Has a need for care and support by reason of mental or other disability, age or illness; and
- Is experiencing, or at risk of experiencing neglect or abuse and
- As a result of those care needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect

Care Act 2014

Remember, service users outside of this definition may also be at risk of abuse due to low self-esteem, social isolation, drug or alcohol misuse, offending history, homelessness, ethnicity, immigration status, gender or sexuality.

Domestic Abuse, as defined as "any incident of threatening behaviour, violence or abuse between adults who are or have been intimate partners or between family members regardless of gender, disability or sexuality".

Honour Based Violence and Forced Marriage can also involve the abuse of an adult with or without care needs.

Significant Harm

In determining how serious the degree of abuse must be to justify intervention it is helpful to consider whether the person has suffered or is likely to suffer significant harm.

It is helpful to consider the following:

- The nature and extent of the abuse
- The length of time over which it has occurred i.e. records of previous concerns or incidents
- The impact on the individual
- The risk of repeated acts involving this or other people

In practice it will be necessary to assess if:

- The person is suffering significant harm
- The person suffering harm is a person with care needs
- The intervention is in the best interests of the person
- Other people may be at risk of harm or exploitation
- Consideration has been given to the feelings of the person alleging the abuse

In determining if harm is 'significant', it is helpful to consider what the harm 'signifies' and not simply the seriousness or severity of the harm. E.g. relatively minor injuries/distress may be a sign of abuse and significant harm.

NB: WHO DECIDES *Law Commission (1997)* - "Harm should be taken to include not only ill treatment (including sexual abuse and forms of ill treatment that are not physical) but also the impairment of physical or mental health; and the impairment of physical, intellectual, emotional, social or behavioural development"

Who may be the abuser?

Adults with care needs may be abused by a wide range of people including relatives and family members, professional staff, paid care workers, volunteers, other service users, neighbours, friends and associates. Some people deliberately exploit strangers that they view as less likely to recognise the exploitation or less likely to seek help.

Where might abuse take place?

- A person's home
- A relative or friends home
- A day centre or support service
- Within a supported living scheme
- Within an adult placement
- An educational establishment
- A hospital
- A care home
- In employment
- Whilst volunteering

VALUES AND PRINCIPLES

Family Action believes that:

- ☒ Each person has the right to live their life free from coercion, intimidation, oppression and physical, sexual, emotional or mental harm
- ☒ Each person has a right to a life that maintains independence and enables them to make their own decisions and choices.
- ☒ It must actively promote the empowerment and wellbeing of adults with care needs through the services it provides
- ☒ An individual's rights to independent living sometimes involves a degree of risk and we therefore aim to ensure that any risk is recognised, understood by all and minimised, whenever possible
- ☒ There will be cases where an individual may be unable to make their own decisions and/or protect themselves or their assets
- ☒ All adults with care needs regardless of their ethnic origin, religion, language, age, sexuality, gender or disability should have equal opportunity to access services and information designed to protect them from abuse and to promote their welfare
- ☒ It must promote an organisational culture within which all those who express concerns will be treated seriously and receive a positive response from management
- ☒ It must work effectively with other agencies and within agreed local procedures and protocols
- ☒ Only staff who can demonstrate that they are suitable to work with adults with care needs will be recruited
- ☒ All staff must receive appropriate supervision and training.

INDICATORS OF POSSIBLE ABUSE

All staff should be alert to the potential indicators of abuse. However, the presence of one or more indicator does not necessarily mean that abuse is taking place, but may mean that further investigation/ observation is required.

Physical abuse:

- An injury not explained by the history given or different versions of the cause given to different people.
- Self-inflicted injury.
- Unexplained bruises or welts on the lips, mouth, torso, back, buttocks or thighs
- Bite marks, cigarette burns.
- Hand slap marks
- Bruising at different stages of healing, and or pinch/ grab marks
- Clusters of bruises forming a pattern or reflecting the shape of an article or implement
- Unexplained burns, untreated pressure sores or urinary or faecal incontinence
- Unexplained fractures, lacerations or abrasions
- Malnutrition, dehydration, rapid or continuous weight loss or eating disorder
- Untreated medical problems or signs that medication has been withheld or inappropriate medication given

Sexual abuse:

- Full or partial disclosure or hints about sexual abuse
- Wetting or soiling especially when it has not recently been a problem
- Unusual difficulty in walking or sitting
- Torn, stained or blood stained underclothing or bedding.
- Pain, itching or bruising in the genital area
- Sexually transmitted disease, urinary tract infection & vaginal infection
- 'Love' bites
- Significant changes in sexual behaviour or outlook
- Obsession with washing
- Bruising to thighs and/or upper arms
- Pregnancy in person who is unable to give consent to sexual relations
- Sexualised behaviour and confused sexual boundaries
- Self-mutilation

Psychological or emotional abuse:

- Loss of interest, emotional withdrawal and symptoms of depression
- Self harm
- Fearful, may avoid eye contact/ unexplained fear or defensiveness
- Low self esteem
- Sleep disturbance
- Avoiding discussing certain subjects or people.
- Demeanour may alter when a certain person is present or their name mentioned.
- Aggressive or challenging behaviour

- Poor concentration
- Chronic indecisiveness and inability to trust own judgment
- Isolation or withdrawal from services or supportive networks
- Callers, friends, visitors are not allowed access to person

Neglect:

- Neglect of accommodation
- Inadequate heating and/or lighting
- Failure to provide basic personal care needs
- Physical condition of the person poor – ulcers, untreated bed sores
- Personal clothing or bed linen in poor condition including being dirty, wet or soiled Malnutrition – inadequate or unsuitable food
- Failure to maintain medically approved dietary requirements
- Failure to give medication or not give it according to prescribed instructions
- Failure to ensure appropriate privacy and dignity
- Failure to ensure access to health and social care

Discriminatory abuse:

- Acceptance of racist language or language which denigrates someone's disability
- The use of language which suggests that all people from the same ethnic grouping or with the same disability behave in a certain way
- Lack of respect
- Hunger due to not receiving appropriate food
- Loss of interest, emotional withdrawal or signs of depression
- Self harm
- Low self-esteem, fearfulness, lack of eye contact
- Defensiveness
- Aggressive or challenging behaviour
- All behaviour or medical symptoms explained solely in terms of a person's disability, race, gender, religion or sexuality
- Viewing someone only in terms of one aspect of their lives

Financial abuse:

- Unexplained or inappropriate bank activity
- Power of Attorney obtained when person is unable to comprehend.
- Person claiming to have power of attorney but no documentary evidence of this
- Refusal to produce bank statements/books or to allow holder to access them
- A person managing financial affairs is evasive or uncooperative
- Recent change of deeds or title of house
- Someone being dependent on the adult with care needs for the provision of accommodation
- Pressure on an adult with care needs to buy their local authority home under the right to buy scheme
- Pressure to change a will or asking someone who does not have mental capacity to sign a will

- A person lacking goods or services which they can afford
- A person living in poorer circumstances than others in the household
- Care provision seen solely in terms of expense
- Someone being financially dependent on benefits received by the adult with care needs
- Someone being dependent on the adult with care needs' money to support a substance or alcohol habit
- A person encouraged to spend their money on items intended for communal use in a residential or nursing home
- A person required to pay for items that should be provided within the fees of a residential or nursing home
- A person is expected to pay an unrealistic amount to be included in social outings
- A person is encouraged to make financial gifts to staff paid to provide care for them
- Recent acquaintances expressing sudden or disproportionate affection for a person with means
- Carer only asks worker about a person's financial affairs and does not appear concerned about the care of the person.

An older person, a person with a disability or a person with mental health needs may be particularly at risk of abuse because:

- The nature of their disability may mean they are unable to protect themselves from the actions of others
- They may live or come into contact with people who for one reason or another inflict harm upon them or take advantage of their care needs to exploit them
- The place where they live or the services they receive are of poor quality

It is usually the circumstances that surround a person, rather than something about them personally, that provides the potential for harm. The nature of a person's disability, ability to communicate or mental capacity may however, increase the likelihood of abuse remaining undiscovered. In some cases it may be a factor in increasing the risk of being targeted by someone who wishes to take advantage of a person's perceived vulnerability.

There is some evidence that people with challenging behaviour may also be more likely to be the target of abuse.

OTHER SPECIFIC TYPES OF ABUSE

Honour Based Violence

The Association of Chief Police Officers (ACPO) definition of Honour Based Violence is; "A crime or incident, which has or may have been committed to protect or defend the honour of the family and/or the community."

Honour based violence is a violent crime or incident which may have been committed to protect or defend the honour of the family or community. It is often linked to family members or acquaintances who believe that someone has brought shame to their family or community by doing something that is not in keeping with the traditional beliefs of their culture – for example, becoming involved with a boyfriend or girlfriend from a different culture or religion, or wanting to get out of a forced or arranged marriage.

Honour-based violence is a "collection of practices that are used to control the behaviour within families in order to protect perceived cultural and religious beliefs and/or honour." (www.bedfordshire.police.uk)

Violence can take place when perpetrators perceive that a relative has brought shame to their family and/or to their community by breaking their 'honour code' which is closely related to their religion.

Women are most often the victims of honour-based violence but this is not always the case. However, what marks honour-based violence is that it is usually committed with some kind of approval or collusion from family and/or community members.

Males can be caught up in honour-based violence if they are believed to be supporting the victim and sometimes because of their involvement in what are perceived to be inappropriate relationships such as being in a homosexual relationship.

What does honour based violence look like?

It is important for professionals and volunteers to be alert to the nature of offences associated with honour based violence. These can be indicators of what is happening to a person and we should all carefully consider individual's circumstances when offences such as those detailed below, are committed by close or extended family members.

Remember: offences can be committed directly by family members or they can be commissioned by members of the family and carried out by others outside of the family.

The kinds of offences that may be associated with honour-based violence are listed below:

- Common assault
- Domestic abuse
- Forced marriage
- Neglect and abandonment
- Failure to secure regular attendance at school.

- Theft (for example of a passport, other form of identity or the financial means to escape).
- Child abduction
- Abduction of an unmarried girls under the age of 16 from a parent or guardian
- Abduction of a woman by force or for the sake of her property
- Forced repatriation
- Rape
- Kidnapping
- False imprisonment
- Murder.

A child or adult who is at risk of honour based violence is not only at risk of the threat of physical harm but also of emotional harm as well as they may witness violence directed towards a brother, sister or other family member.

Honour crimes are not determined by age, faith, gender or sexuality.

Responding to concerns about Honour Based Violence

If you are concerned that someone is a victim of, or at risk of Honour Based Violence, it is important to have a conversation with a manager and the designated safeguarding lead for your setting (if this is a different person to the manager of the service). This conversation should occur as soon as you become concerned. Do not speak to any friends, relatives or acquaintances of the person you are concerned about.

If your own manager is not available, you should make contact with their manager. Highlight why you are concerned and decide on next steps. The Deputy Director of Quality, Performance and Safeguarding, Clare Lawson, is also available internally to discuss complex specific cases – 07515 429 421. It is important to document all contacts, concerns and discussions. Having a record over time, of smaller less worrying incidents or statements, can enable a picture to develop and help practitioners and managers to understand the bigger situation.

Family Action's senior managers are available via telephone to offer advice and support to any service out of hours. If you need assistance call the Tier One number first on 0333 800 1208 and if you are unable to get a response, or if the situation requires it, please call the Tier Two number on 0333 800 1209.

Getting specialist help and advice – Karma Nirvana

Karma Nirvana is national organisation that exists to support and work with all victims of Honour Based Violence and Forced Marriage. They operate a National helpline to support victims in immediate danger: 0800 5999 247

Forced Marriage

A forced marriage is one in which either or both people involved don't consent to the marriage. Victims can be forced into marriage in different ways – this may include physical, psychological, financial, sexual or emotional pressure.

Any marriage involving someone who lacks the capacity to give consent is a forced marriage. Forced marriage is illegal in the UK. [Read more about forced marriage.](#)

It can be hard to recognise when someone is being forced into marriage, especially when this involves psychological and emotional pressure rather than physical abuse. For example, some victims of forced marriage are pressured by being made to feel responsible for bringing shame to their family.

A forced marriage is where one or both people do not (or in cases of people with learning disabilities or reduced capacity, cannot) consent to the marriage as they are pressurised, or abuse is used, to force them to do so. It is recognised in the UK as a form of domestic or child abuse and a serious abuse of human rights.

The pressure put on people to marry against their will may be:

- physical: for example, threats, physical violence or sexual violence
- emotional and psychological: for example, making someone feel like they are bringing 'shame' on their family
- Financial abuse: for example taking someone's wages and preventing them from fleeing or having control over their life, may also be a factor.

Understand the legislation on forced marriage

[The Anti-social Behaviour, Crime and Policing Act 2014](#) made it a criminal offence in England, Wales and Scotland to force someone to marry. (It is a criminal offence in Northern Ireland under separate legislation).

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 to or not)

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

It is also possible for victims or those at risk to apply for a Forced Marriage Protection Order (FMPO). As a civil law measure, an application for a FMPO would be made in the family court. Read [guidance from the Ministry of Justice on taking out an FMPO](#)

Failure to comply with the requirements or terms set out in a FMPO granted by the Family Court, is a criminal offence and can result in a sentence of up to 5 years in prison.

In 2017 the government introduced lifelong anonymity for victims of forced marriage to encourage more victims of this hidden crime to come forward.

Responding to concerns about Forced Marriage

'Multi-agency practice guidelines: Handling cases of Forced Marriage' can be found [here](#)
Please see page 14 of the above guidance document to view a comprehensive list of indicators.

Statutory guidance on forced marriage states that all organisations should have "a nominated lead person with overall responsibility for safeguarding children, protecting vulnerable adults or victims of domestic abuse – the same person should also be the lead on forced marriage". The designated safeguarding lead for your service takes on this role locally. The Deputy Director of Quality, Performance and Safeguarding, Clare Lawson, is the overall lead for such matters across Family Action.

If you are concerned that someone is a victim of, or at risk of Honour Based Violence, it is important to have a conversation with a manager and the designated safeguarding lead for your setting (if this is a different person to the manager of the service). This conversation should occur as soon as you become concerned. Do not speak to any friends, relatives or acquaintances of the person you are concerned about.

If your own manager is not available, you should make contact with their manager. Highlight why you are concerned and decide on next steps. The Deputy Director of Quality, Performance and Safeguarding, Clare Lawson, is also available internally to discuss complex specific cases – 07515 429 421. It is important to document all contacts, concerns and discussions. Having a record over time, of smaller less worrying incidents or statements, can enable a picture to develop and help practitioners and managers to understand the bigger situation.

Family Action's senior managers are available via telephone to offer advice and support to any service out of hours. If you need assistance call the Tier One number first on 0333 800 1208 and if you are unable to get a response, or if the situation requires it, please call the Tier Two number on 0333 800 1209.

There may be occasions when a practitioner or manager will need to gather some information from the person to establish the facts themselves and assist the referral. This should only be done if it is safe to do so.

- See them immediately in a secure and private place where the conversation cannot be overheard.
- See them on their own – even if they attend with others.
- Explain all the options to them.
- Recognise and respect their wishes.
- Perform a risk assessment – there are already a number of risk assessment tools available, including CAADA/DASH, however it will be best to use a tool as guided by your specific agency
- Contact a trained specialist (forced marriage specialist) as soon as possible.
- If the young person is under 18 years of age, refer them to the designated person responsible for safeguarding children and activate local safeguarding procedures.

- If the person is an adult with support needs, refer them to the designated person responsible for safeguarding vulnerable adults and activate local safeguarding procedures.
- Reassure the victim about confidentiality where appropriate i.e. practitioners will not inform their family.
- Establish and agree an effective method of contacting the victim discreetly in the future, possibly using a code-word to confirm identity.
- Obtain full contact details that can be forwarded to a trained specialist.
- Where appropriate, consider the need for immediate protection and placement away from the family.

Getting specialist help and advice - The Forced Marriage Unit

The Forced Marriage Unit (FMU) is a joint Foreign and Commonwealth Office and Home Office unit which leads on the government's forced marriage policy, outreach and casework. It operates both inside the UK (where support is provided to any individual) and overseas (where consular assistance is provided to British nationals, including dual nationals).

The FMU operates a public helpline to provide advice and support to victims of forced marriage as well as to professionals dealing with cases. The assistance provided ranges from safety advice, through to helping a forced marriage victim prevent their unwanted spouse moving to the UK ('reluctant sponsor' cases). In extreme circumstances the FMU will assist with rescues of victims held against their will overseas.

The FMU undertakes an extensive training and awareness programme targeting both professionals and potential victims, and carries out a range of work to raise awareness.

Contact

- telephone: +44 (0) 20 7008 0151
- email: fmufco.gov.uk
- email for outreach work: fmuoutreach@fco.gov.uk
- Facebook: [Forced Marriage page](#)
- Twitter: [@FMUnit](#)

ADULTS WITH CARE NEEDS - POSITIVE RISK MANAGEMENT

When working with adults with care needs Family Action will seek to mitigate risks by undertaking risk assessments of individual service users and developing risk management plans with them. Where appropriate, Family Action staff will seek to acquire any existing risk management plans previously completed by service users with partner professionals or Family Action in order to build up a comprehensive picture, respond appropriately and reduce risks.

PREVENTION

Family Action acknowledges that its primary responsibility is the prevention of abuse, and where this fails, to ensure that robust measures are in place to deal with incidents of abuse. Measures for preventing incidents of abuse include:

- ☒ Involving service users in the development and review of Risk Management Plans to promote their learning and skill acquisition in relation to risk management
- ☒ Raising service user awareness of abuse via service inductions, service handbooks , promotional posters, clarification of roles, in the Safeguarding information leaflet and through regular discussion in team/house meetings
- ☒ Promoting service user access to independent advocacy services
- ☒ Ensuring that robust policies and procedures are in place and are being followed by staff who are sufficiently skilled, trained and aware of abuse
- ☒ Effective recruitment and selection processes for staff, volunteers and service user volunteers are in place and are implemented and thorough checks are made through the correct channels.
NB. CRB and ISA (Independent Safeguarding Authority) have merged into the Disclosure and Barring Service, and checks are now referred to as DBS checks
- ☒ Ensuring that breaches of policy and procedures are dealt with appropriately and consistently
- ☒ Maintaining effective partnership with other agencies, including Social Services and the police and working in line with local inter-agency guidelines for the protection of adults with care needs and where appropriate to challenge work practices and responses
- ☒ Cases of abuse are reported to and monitored in each area by the Project Team and Steering Group (see local procedures) and individual cases of abuse are reviewed in order to improve working practices.

RESPONDING TO A DISCLOSURE OF ABUSE

Staff and volunteers should always take seriously any disclosure concerning an allegation of abuse.

They should listen carefully and not interrupt or stop someone telling them their story. They should not interrogate the details but should be empathetic and reassuring. The service user should be enabled to remain empowered and in control and should be asked what action they would like taken (presuming they do not lack mental capacity), however, the member of staff must inform the person that they have a duty to report this to their line Manager. The person should be made aware of the possibility that medical or other forensic evidence may be required. They should also be informed of any actions that may need to be taken including steps to protect and support them. Information should be recorded as soon as possible and definitely within 24 hours.

Staff should not contact the alleged abuser or discuss the allegations with them nor should they pass the information to anyone other than those with a legitimate need to know, such as their line Manager or member of the senior management group.

In some particular circumstances a Project/ Service Manager, having heard details of the

allegations and having discussed the matter with their Operational Manager/ Assistant Director, may determine that the allegations although logged will not be further investigated. This may be because the allegation reiterates an ongoing concern expressed by the service user already previously investigated or it may be seen as a symptom of their current mental health, which has already been addressed within the current risk assessment management plan.

Remember:

It is important that everyone in the organisation is aware that the person who first encounters a case of alleged or suspected abuse is not responsible for deciding whether or not abuse has occurred, this decision is the responsibility of others.

RESPONDING TO DISCLOSURES OF HISTORICAL ABUSE

This policy and procedure cannot cover every situation, but when an adult discloses historical abuse, it is important to listen carefully, remain calm and take the disclosure seriously.

At the point of the disclosure, the likely scenarios are:

1. The service user/client discloses abuse and is prepared to make a formal statement to the police (i.e. to report a crime).
2. The client discloses abuse and gives consent to the staff member making an informal/ anonymous report to the police or social services on their behalf.
3. The service user/client discloses abuse and is not well enough to make their own report to other agencies but the practitioner has sufficient information and believes the risk is substantial enough to require reporting.
4. The service user/client discloses abuse but does not wish it to be reported to other agencies (police and/or social services). It is recognised also that the client may disclose abuse but be ambivalent about whether or not they wish to report or if reporting is necessary.

A client may decide to report, and then change their mind, retracting their allegation and possibly cancelling arrangements to be interviewed, and then later decide to re-disclose. Clients may even say that they were unwell at the time of disclosure. These are not unusual reactions and are often part of the survivor trying to cope with the enormity of disclosure. Talking about traumatic events takes time, and this can be particularly marked when events have involved sexual abuse.

If you receive a disclosure of historical abuse, immediately following this, you must speak with your line manager. For complex cases where decisions need to be made about ongoing risks to others or the client/service user who made the disclosure, and the client/service user does not wish to report the abuse to the police, involve regional senior management – including the regional Deputy Director and the Deputy Director of Quality, Performance and Safeguarding.

Therapy services staff – including psychologists and therapists – should also read the BPS Guidance document on the management of disclosures of non-recent (historic) child sexual abuse. This can be found [here](#)

In all cases, please refer to the multi-agency procedure for responding to Historical Allegations within your local area, which will be available on the Local Safeguarding Adults Board website.

CAPACITY AND CONSENT

All action, including referrals to social services and the police, must be subject to the consent of the service user. In every situation it will be assumed that a person can make their own decisions and action will only be taken in the absence of consent from the service user:

- 1) If other people appear to be at risk of harm (adults or children)
- 2) If there is a 'legal restriction' or an overriding public interest
- 3) If the adult is exposed to life threatening risk and they are unreasonably withholding their consent
- 4) If the adult has impaired capacity or decision making in relation to the safeguarding issues and the withholding of consent.

A 'legal restriction' in this context means that there may be exceptional circumstances where a service user makes a decision or intends to act in a way that is unlawful or where their need for care should be addressed under the Mental Health Act 1983.

An 'overriding public interest' refers to a situation where it is essential to share information in order to prevent a crime or to protect others from harm (e.g. 'Hate Crime' for which there is a statutory responsibility to report). This is supported by the Crime and Disorder Act, 1998.

In Family Action's supported housing/housing support services all allegations and concerns of abuse should be discussed with a line manager and the service user; and a decision made as to whether a referral to the local area safeguarding adults team is required.

All service users within supported housing/housing support services, are, by the nature of the residential service they are using considered to be an adult with care needs. Advice can be sought from the Adult Safeguarding team for the borough, whilst maintaining the anonymity of the service user, if this approach is required in order to reach a decision.

In drop-in day services or domestic violence services, where the risks to the adult may be more difficult to ascertain, advice can also be sought from the Adult Safeguarding team for the borough; or in the case of a sexual allegation with the police from the local Sexual Assault Referral Unit, whilst maintaining the anonymity of the service user.

INFORMATION SHARING & CONFIDENTIALITY

Family Action's Information Sharing and Confidentiality policies and procedures will be followed in all cases where information is received concerning the possible abuse of one of our service users.

When making decisions with regard to information sharing and confidentiality, staff should always:

- ☒ Take advice from their line Manager
- ☒ Ensure that they are working within locally agreed information sharing protocols and national guidance
- ☒ Remember that, when necessary, contact can be made with the Local Authority Safeguarding Adults team, for advice purposes, whilst maintaining the anonymity of the service user
- ☒ Ensure that decisions are in line with current legislation

The basic principles of information sharing and confidentiality are:

- ☒ All staff should be aware of their responsibilities to respect confidentiality and comply with the law (NB: The Data Protection Act 1998 does not preclude the sharing of information to protect a person from harm, danger and abuse). If in doubt, check with our General Counsel based at Head Office.
- ☒ A person's consent should always be sought (apart from in exceptional circumstances see below), prior to information about them being discussed or disclosed to another party
- ☒ Consent should always be recorded, together with the purpose for which the information will be used.
- ☒ Information given for one purpose should not be used for another, without further consent being obtained
- ☒ Access to person identifiable information should be on a strict needs to know basis
- ☒ Clear documentation and record keeping must support these communications and any decision making processes.
- ☒ Service users must be kept informed and updated.

Exceptions to the above

There are some circumstances in which sharing confidential information without consent will normally be justified in the public interest. These are:

- ☒ When there is evidence or reasonable cause to believe that a child is suffering, or at risk of suffering significant harm
- ☒ When there is evidence or reasonable cause to believe that an adult is suffering or is at risk of suffering serious harm,
- or
- ☒ To prevent significant harm to a child or serious harm to an adult, including through the prevention, detection and prosecution of serious crime.

However a further exception to this would be where an adult with capacity to make decisions puts him/herself at risk but presents no risk of significant harm to children or serious harm to other adults. In this case it may be justifiable to share information without consent.

ADULT PROTECTION PROCEDURE

(See Appendix Four: Flow chart Capacity and Consent)

Whenever abuse of a service user is suspected, staff should follow this procedure.

Please also read dedicated sections of this procedure to recognise and understand different types of abuse.

- Definitions of abuse: pages 14-17
- Indicators of possible abuse: pages 19-21
- Honour Based Violence and Forced Marriage – specific information on indicators and how to get specialist help and advice: pages 22-26

Stage 1

- Staff should contact the emergency services immediately if a service user appears to be in immediate physical danger and take any necessary action to prevent any further harm to the individual. They should also be aware of the need to preserve/retain any forensic evidence.
- If there appears to be no immediate physical danger, proceed directly to Stage 2.

Stage 2

- Staff should discuss the situation and courses of action available with the service user who has had abuse perpetrated upon them.
- Staff should contact their Project Manager (PM) immediately except where that individual is the alleged abuser. If the PM is unavailable staff should contact their Operational Manager (OM), Deputy Director (DD) or contact the Director of Services and Innovation; or if they are unavailable, another member of the Executive Group, to report the full facts and circumstances of the situation and to discuss required actions including: For complex cases, including Forced Marriage and Honour Based Violence, the designated safeguarding lead for your setting, if this is a different person to the manager of the service/project, should also be involved in discussions and decision making. Clare Lawson, Deputy Director of Quality, Performance and Safeguarding, is also available to provide support and guidance on complex cases – 07515 429 421.
- Making a decision to take no further action. The process, (who was involved) and justification (reasoning) for making that decision would need to be recorded and to be transparent.
- Deciding if the person is an adult with care needs, determining if they have mental

capacity and whether consent has been obtained.

- ☒ Determining if a referral to the Police or Adults Social Care is required
- ☒ If it is agreed that the matter is to be investigated internally, it should be logged with Adults Social Care and they should be properly informed.
- ☒ If there is any requirement to inform the bodies for registration, regulation or inspection (e.g. Care Quality Commission) or if the allegation is against a member of staff or volunteer, the Designated Person for Managing Allegations within the Safeguarding Adults team of the Local Authority must be informed within 24 hours of the concerns being raised/becoming apparent
- ☒ Is there a need to contact partner care/support agencies?
- ☒ Review of relevant records, particularly similar incidents of the same kind
- ☒ Consider the immediate health/welfare needs of the alleged victim or any other adult with care needs who may be affected and methods for supporting the service user, including access to counselling services

The alleged perpetrator should not be spoken to without consultation with the Local Authority unless immediate action is required such as suspending a member of staff. In these circumstances, the only information that can be provided is that an allegation has been made. No details of the allegation can be given at this time so as not to compromise any potential investigation.

Stage 3

- ☒ Staff having obtained the views of the service user, will establish the known facts of the abuse and with the support of their PM/OM, must document all known details in full.

Prior to making a referral to the local Authority, only information about the alleged abuse should be sought. No investigation should take place, and only actions to mitigate immediate any significant risk should be taken prior to consultation.

- ☒ It is essential that all documentation is dated and completed in a manner that is:
 - Clear and factual.
 - Reflects the words and phrases used by the person disclosing.
 - Describes the circumstances in which the disclosure came about i.e. the context, setting and anyone else who was there at the time.

- Contains factual information only and not your own opinions. Any third party opinions or information must be clearly identified as such.
- An action plan detailing actions to be taken, by whom and by when must be devised in consultation with the service user. This plan will be produced jointly by the staff member, PM and OM and should be reviewed by the staff member, PM and service user at appropriate intervals to ensure the on-going safety of all service users.
- A copy of the completed Adult Protection Recording Form and Action Plan, plus additional records pertaining to the incident, should be kept in the service user's file. The issue of confidentiality must always be considered, for example, if the allegation involves a staff member do all staff in the project have access to the file? Private and confidential information on staff should be kept separately and placed on the personnel file, with only 'need to know' information in the file at the project.

Stage 4

There may be no further action, or if there is, the process will differ depending on whether the allegation is about someone internal or external to Family Action. But in either case it will be necessary to consider:

- Who do you need to inform?
- Who needs to be involved?
- Does the service user require an advocate?
- Confidentiality issues
- Storage of information.

If no referral is made to Social Services or no further action taken, including contacting the police, in line with a service user's wishes, the staff member and PM must:

- Keep records of all decisions, including why no further action is to be taken
- Review the service user's Risk Management Plan with the service user and appropriate partner professionals
- Regularly monitor the situation and review the agreed action plan
- Discuss with the service user, as appropriate, any help-line or counselling services that are available.

Stage 5

If a referral is made to Social Care this should be made by phone and followed by written notification on the form produced by the local Social Care department. NB: It is strongly advised that a request is made by you for written confirmation that your referral has been received and acted upon. All correspondence must be logged and stored appropriately by the service in accordance with confidentiality procedures and Family Action's recording standards.

Investigating Allegations of Abuse

When investigations into alleged abuse of service users are undertaken it is crucial that the individual's privacy, dignity, independence and choice are taken into consideration throughout the

entire process. Therefore, the organisation aims to ensure that the service user is fully supported and has access to all the relevant information to enable them to make informed decisions, regarding possible follow-up action.

Stage 6

If the accused is a member of staff, volunteer or student and has been deemed to be responsible for acts of abuse following the conclusion of any investigation, then they will need to be referred to the Disclosure and Barring Service (DBS)

When Family Action believes an employee or volunteer has caused harm or poses a future risk to adults or children; and this has led to the employee's/volunteer's dismissal, they are required to refer this information and the decision to dismiss, to the DBS. Within Family Action this is the responsibility of the Human Resources Department. When an individual's name is placed on the Barred List, that person is not able to work with adults with care needs until his or her name is removed from the list.

RECORDING

Accurate case records are essential. Family Action, through its induction process, will ensure that staff know what is expected of them in terms of style, content and the timely production of case records. It will make sure that there are systems in place for checking that case records are accurate and up to date.

Any allegations of abuse must be recorded in writing and placed on the case file, as soon as possible but definitely within 24 hours.

The record should include a detailed account of what was seen and said and should include details of who was present and the context. It should separate factual information, observation and third party information, from opinion. The record should be legible, in plain English which can be easily understood and must be signed and dated. Any decision making must be clearly recorded, including the reasons why the decisions have been made. Remember that your case records and notes may be required as part of any subsequent legal action or disciplinary procedures.

If the alleged abuser is a user of the same service, any relevant information about their behaviour or demeanour should also be recorded.

Remember: more minor incidents, concerns and conversations should also be recorded to ensure that there is an accurate picture of the adult's lived experience and to assist in developing a picture of potential abuse and risk.

WHISTLEBLOWING

All staff must be familiar with Family Action's Whistleblowing policy. Where a member of staff wishes to disclose alleged abuse perpetrated by a colleague, they must immediately contact their Manager. Their Manager will discuss the issue with their Operational Manager with advice from the HR department. An investigation will be set up immediately and this may involve the colleague being suspended from work. The Manager will discuss the options for action, including approaching the police, if appropriate. All staff will take reasonable steps to respect the confidentiality of the person disclosing the alleged abuse.

Family Action will ensure that the staff member making the disclosure is supported and protected from reprisals or victimisation as a result of an expression of concern. The Public Disclosure Act (1998) provides protection for staff who raise concerns about poor practice, institutional abuse or other organisational failings that pose a risk to service users or are causing them harm

NOTIFICATION OF THE DEATH OF AN ADULT WITH CARE NEEDS

When a member of staff becomes aware that a service user known to Family Action has unexpectedly died or been seriously injured they must immediately notify their line Manager and implement the Serious Incident Policy (See Flow Chart Appendix Nine)

The Director of Services and Innovation, having heard the detail of the case and any involvement we may have had, will advise as to whether the file should be secured. The Media Department will produce a response on behalf of the organisation, for use should there be any approach from the media. Any media requests should be referred to the Media Department.

Staff are expected to co-operate fully with any subsequent enquiries made by the Local Safeguarding Adults Board, Police or other statutory agencies.

SUPERVISION OF SAFEGUARDING WORK

Supervision plays a critically important role both in our safeguarding work and in ensuring that Family Action remains a safe organisation. Regular supervision of good quality should be available to all staff to ensure proper accountability and best practice. The Family Action supervision policy outlines minimum standards required for staff, students and volunteers. However, the frequency of supervision should reflect the complexity of the work being undertaken together with the skills, knowledge and experience of the people involved. Safeguarding must be discussed at each supervision session. Supervision is to be properly recorded and any decisions transferred to the case file without undue delay. Supervision should identify any training needs and ensure that they are addressed.

It is the shared responsibility of both supervisor and supervisee to establish a relationship within supervision which enables an honest and open discussion of any safeguarding concerns or issues which arise either directly from the work or within the work place. Supervision should be a creative process which may, on occasions, require the robust challenge of the views and/or practice of colleagues and on rare occasions, if differences cannot be resolved, the possible involvement of senior Managers.

All staff should read and be familiar with the Family Action Supervision Policy.

Supervisors:

In addition, supervisors/line Managers should take account of:

1. S/he is acting on behalf of Family Action and should follow the procedures of both Family Action and the Local Safeguarding Adults Board (LSAB) and if there are differences those of the LSAB take precedence.
2. Issues of race, culture, disability and gender must be active components of any supervision session. There must be an awareness of the impact of these issues both within the supervisory relationship and in the work with service users.
3. It is important that supervisors remain familiar with the law relating to adults with care needs and with knowledge and guidance in relation to safeguarding.

4. The supervisor must be aware of the danger that anyone working closely with adult protection may become part of the system and that there are inherent dangers attached to this.
5. The importance of maintaining appropriate levels of consultation in the inter-agency network, particularly with Adult Social Care if there is an adult protection plan and conferences.
6. The supervisor is responsible and accountable for all major decisions that the worker is involved in which relate to the case, and for ensuring that any decisions are recorded on the case file.
7. The supervisor must make sure that all safeguarding cases are regularly discussed to ensure that the work being undertaken is in accordance with the adult protection plan and conference decisions.
8. The file and all records must be kept up to date – see Family Action’s recording standards.
9. Students on placement with Family Action will not be given sole responsibility for adult protection cases but will work jointly with another worker.
10. Supervision needs to deal with issues relating to labelling, stereotyping, prejudice, direct and indirect discrimination, personal and institutional power and uses and abuses of authority. Supervisors must be prepared to challenge staff when dealing with such issues and to deal with any resistance/ denial which may be encountered

Supervisees:

Those working directly with adults with care needs must be aware that:

1. S/he is acting on behalf of Family Action and should follow the organisation’s or Local Safeguarding of Adults with care needs Board’s procedures.
2. Major decisions about the work should be made in consultation with the supervisor/line Manager and recorded on the file.
3. Maintaining appropriate levels of consultation in the inter agency network, particularly with Adult Social Care, the protection plan and conferences, is very important.
4. Recording must be kept up to date and any decisions made during supervision are to be recorded on the case file.
5. Supervisees have a responsibility to ensure that they receive the right level of supervision for the complexity of the work undertaken and to meet their individual needs.
6. Safeguarding issues, whether they relate to the direct work, the work environment or the impact on the supervisee, must be openly discussed within supervision. Supervisees must be prepared to have their views challenged and any block or resistance exposed.
7. The supervision process should be used to monitor attendance at safeguarding training, and to identify and address any additional training needs.

Training

(see Appendix Two; Training Matrix)

Family Action recognises the complexity of safeguarding work undertaken by staff and the emotional impact it can have upon them. All staff, as part of their induction and as part of the Social Care Induction Programme (SCI) are introduced to Safeguarding and their responsibilities in relation to it. For staff primarily working with adults there is the "Skills for Care" induction folder.

In addition, frontline operational staff are required to complete the Protecting Adults with care needs e-learning training and Child Protection Awareness e-learning courses within their probationary period and further safeguarding training at least every two years.

Supervision and appraisal will be used to identify any specific or additional, training needs. Family Action provides a range of safeguarding training and information, at different levels, to support staff and to extend and update their knowledge and skills to ensure best practice. Staff can also access multi-agency safeguarding training locally through their LSAB.

Appendix One

National Legislation and Policy Framework

White Paper Modernising Social Services 1998	Stresses the importance of protection for adults needing care and support	<i>Promotes</i> The protection of adults with care needs
Human Rights Act 1998	Placed a positive duty on public bodies to intervene proportionately to protect the rights of citizens	<i>Promotes</i> An individual's right to live a life free from abuse and neglect
Sexual Offences Act 2003	Outlines a range of offences against children and adults with a mental disorder	<i>Promotes</i> The safety of adults with mental disorders from sexual exploitation and abuse
Disability Discrimination Act 2003	Significantly extends the rights of disabled people	<i>Promotes</i> Equality of opportunity for disabled people
Domestic Violence Crime and Victims Act 2004	Strengthens the protection available to victims of domestic violence by: <ul style="list-style-type: none"> • Criminalising any breach of a non-molestation order • Extending the availability of restraining orders • Making common assault a criminal offence <p>Plus: Introduces a new offence of causing or allowing the death of an adult with care needs</p>	<i>Promotes</i> The protection of adults with care needs from domestic abuse
Mental Capacity Act 2005	It aims to protect people who cannot make decisions for themselves due to a learning disability or mental health condition. It sets out a single clear test for assessing whether a person lacks capacity to make a decision at a particular time.	<i>Promotes</i> The right of an adult to make his or her own decision. The assumption that adults have capacity to make decisions unless it is proved otherwise
Safeguarding Adults – National Framework of Standards 2005	This document collects best safeguarding practice and sets it within 11 good practice standards. These are to be used as an audit tool and guide for those implementing adult protection work	<i>Promotes</i> Consistency and best practice across agencies
Safeguarding Vulnerable Groups Act 2006	Strengthens the local governance arrangements for safeguarding by putting Safeguarding Adults Boards on a statutory footing	<i>Promotes</i> Effective partnership and joint working

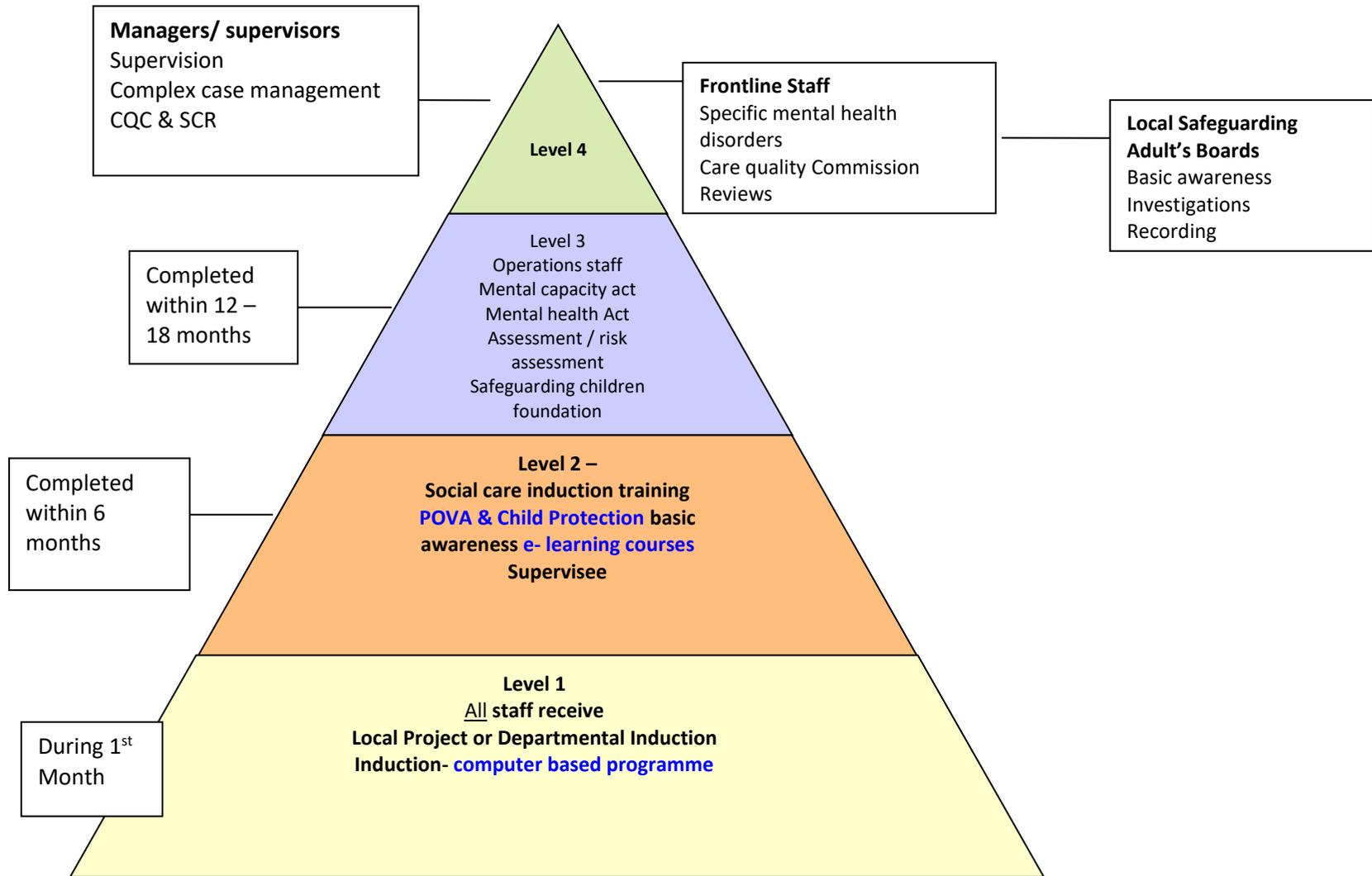
Mental Health Act 2007	This makes changes to the procedures for authorising the deprivation of liberty of a person in a hospital or care home who lacks capacity to consent to being there.	<i>Promotes</i> Principle of supporting a person to make a decision when possible, acting at all times in a person's best interests and in the least restrictive manner
Care Act 2014	Brings in new and improved support for Adults requiring care and support for their adult carers Requires every local authority area to establish a Safeguarding Adults Board Repeals No Secrets (2000)	<i>Promotes</i> Consistent approach to accessing care and support for carers
Anti-Social Behaviour, Crime and Policing Act 2014	Makes Forced Marriage a criminal act.	<i>Promotes</i> Equality and informed choice for women and girls; and the prosecution of offenders
Serious Crime Act 2015	Updating and clarifying the offence of child cruelty to make it explicit that it covers psychological suffering or injury as well as physical harm. (Section 66) <ul style="list-style-type: none"> • A new criminal offence of sexual communication with a child. • Amends existing sexual offences legislation so as to recognise children as victims rather than consenting participants • Extends the extra-territorial reach of female genital mutilation offences and providing anonymity to victims • A new offence of failing to protect a girl under 16 from the risk of female genital mutilation • A new duty on professionals to notify the police of acts of female genital mutilation. • A new offence criminalising repeated or continuous coercive or controlling behaviour perpetrated against an intimate partner or family member which has a serious effect on the victim. 	

<p>Counter-Terrorism and Security Act 2015</p>	<p>Places the Prevent programme on a statutory footing. This means that from the 1st July 2015 every local authority (and other relevant 'authorities') will have a legal duty to, "when exercising its functions, have due regard to the need to prevent people from being drawn into terrorism. This duty is conferred upon organisations commissioned by Local Authorities and any other 'authority' named in the Act. Places. Places a statutory duty on a range of organisations – including child care settings – to co-operate with local Channel arrangements/panels.</p>	<p><i>Promotes</i></p> <p>Increased reporting of individuals at risk of radicalisation.</p> <p>Multi-agency working when an individual is deemed to be at risk of radicalisation.</p>
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For a more extensive list and details of all adult care legislation and policy please refer to <http://www.scie.org.uk/atoz/>

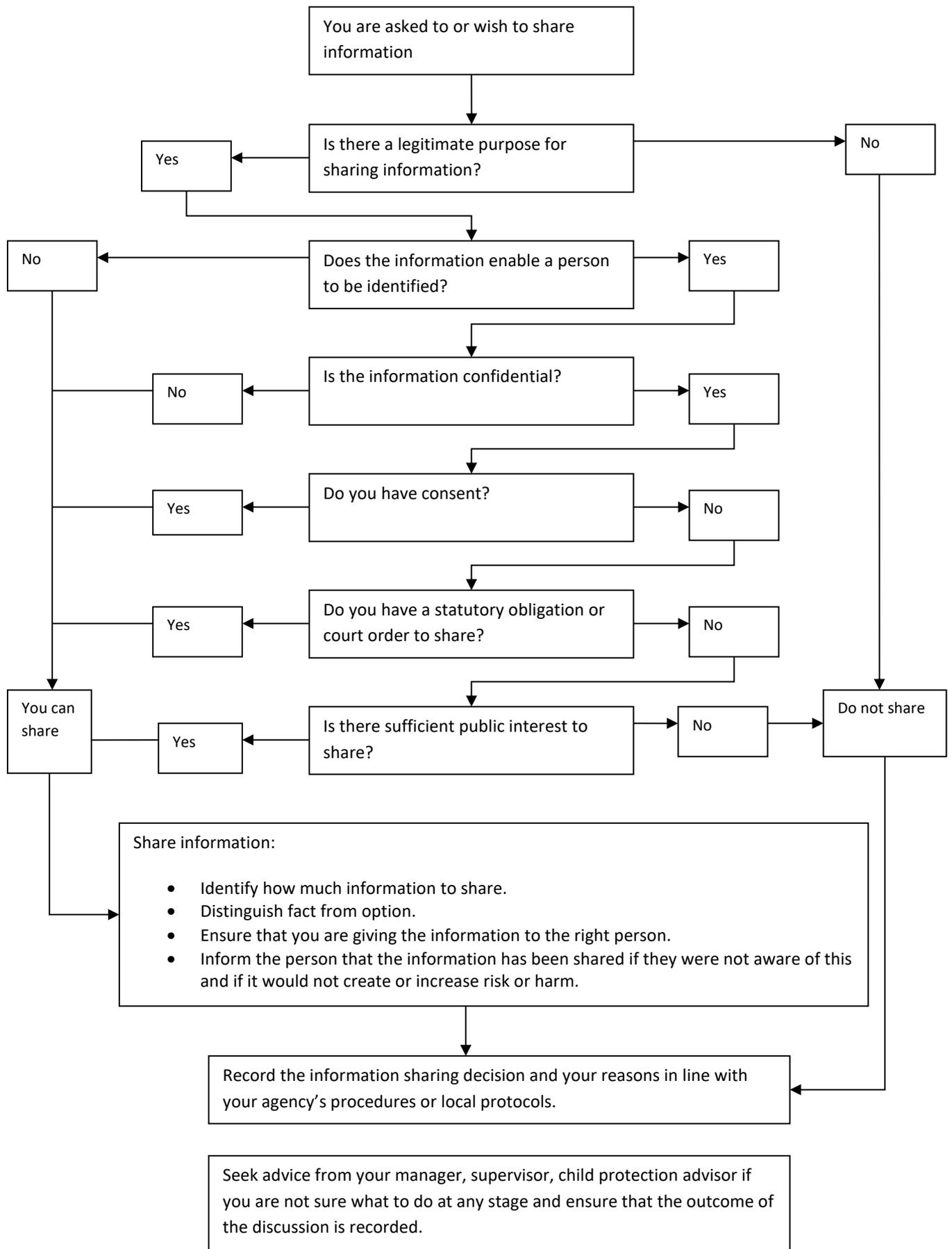
The Social Care Institute for Excellence has published a useful document, NQSW "Legislation and policy for newly qualified social workers working in adult services"

Appendix Two– Training Matrix

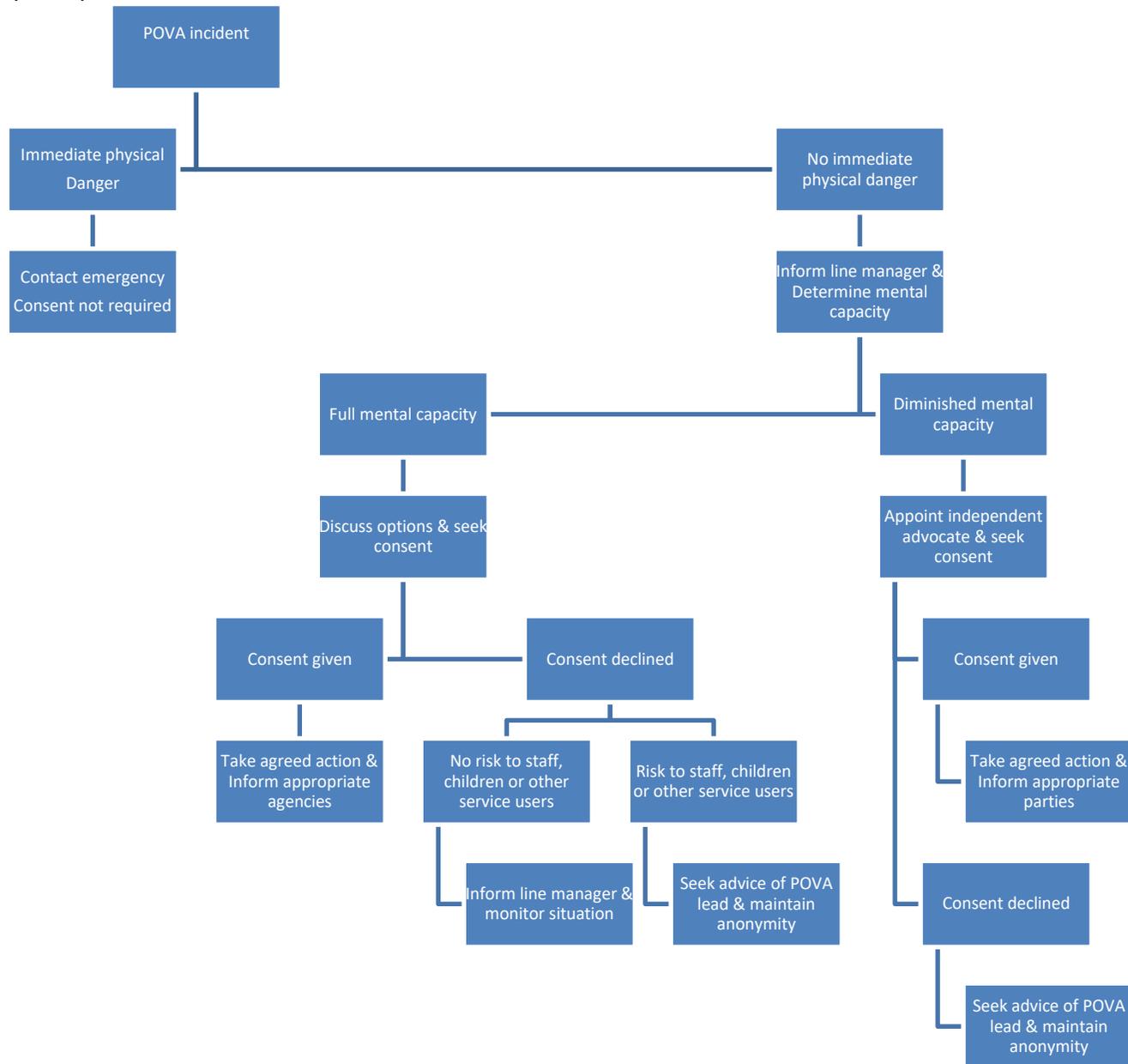


Appendix Three

Flowchart of key principles for information sharing



Appendix Four – Capacity and Consent Flow Chart



Appendix Five

Code of Conduct

The Code of Conduct applies to all staff and volunteers and seeks to ensure that Family

Action's expectations of its human resources are as clear as possible. It is intended to avoid misunderstandings, which might give rise to disciplinary action including summary dismissal.

Staff and volunteers must:

- * Ensure they have an understanding (appropriate to their role), and comply with, Family Action's procedures for promoting and safeguarding the welfare of children and adults with care needs in line with Department for Children, Schools and Families "Guidance for Safer working practice for adults who work with children and young people".
- * Work well and diligently to support the aims and values of Family Action including its Equal Opportunities Policy and to comply with relevant professional standards as well as the policies and procedures of Family Action.
- * Declare immediately to the Human Resources department any convictions, cautions, reprimands or warnings or pending ones. Details of these will only be retained if considered relevant.
- * Take reasonable care of own and others' health and safety.
- * Treat all those they come into contact with at, or through, work in a professional manner and with appropriate courtesy.
- * *Deal properly with property and money of Family Action or FWE (Family Welfare Enterprises Limited) or its service users and money that shall be deposited in their custody by a third party for Family Action, its service users or FWE.
- * Carry out those tasks, duties and responsibilities that fall within their job descriptions or tasks reasonably allocated to them from time to time.
- * Promote and maintain the good name and reputation of Family Action and FWE.
- * Report any business interests of themselves their family or friends at the very earliest opportunity to the Chief Executive, where such business is being or is likely to be conducted with Family Action or FWE or which may give rise to a conflict of interest in the performance of their duties.
- * Uphold and comply with such Family Action policies and procedures as may be issued from time to time.

Staff and volunteers must not:

- * Abuse their position of power or responsibility in relation to other staff, volunteers, service users or other contacts of Family Action.
- * Solicit, or use the name or reputation of Family Action or FWE to obtain any preferential treatment, benefits, gifts or money from service users or contacts of Family Action or FWE for personal gain or the gain of their relatives or friends.
- * Engage in inappropriate relationships with, or inappropriate contact with the users of its services, including personal and sexual relationships.
- * Receive any preferential treatment, benefits, personal gifts in kind or money from any service users or other person contacted at or through work other than in strict accordance with any guidelines, policies, rules or procedures specified by Family Action or FWE from time to time.
- * Make use of the property or equipment of Family Action or FWE other than for the purpose(s) for which it is intended.
- * Enter contractual arrangements on behalf of Family Action or FWE without specific authority. Where there is authority, never to enter Family Action into commitments for more than 5 years in relation to equipment, services or property without specific authority from the Director of Finance and (in relation to services) the Director of Services and Innovation.

Appendix Six

Useful contacts

Safeguarding - General

- * Disclosure and Barring Service

www.gov.uk/disclosure-barring-service

DBS Customer Services

PO Box 110
Liverpool
L69 3JD

†0870 9090 811

- * Department of Health – Safeguarding Adults with care needs

<https://www.gov.uk/government/publications/adult-safeguarding-statement-of-government-policy>

- * Adult Safeguarding “statement of government policy”

- * Care Quality Commission (CQC)

Regulate all health and adult social care services in England

www.cqc.org.uk

- * The Churches’ Child Protection Advisory Service (CCPAS)

‘Safeguarding Adults: a Manual for working with Adults with care needs and Developing Safe Practice’ is available to order from:

<https://www.ccpas.co.uk/shop>

- * Social Care Institute for Excellence

www.scie.org.uk/adults/safeguarding

Helplines/Professional Guidance

Sexual Abuse

Mpower

0808 808 4321 Freephone Area Served: UK.

Helpline providing listening support and information for male survivors of rape, childhood sexual abuse or domestic violence at any time. Support for partners, families and friends of male survivors.

One in Four

020 8697 8022 Area Served: UK - helpline and internet support.

London - therapy and groups. Helpline providing support and advice for people who have experienced sexual abuse.

RASA Rape and Sexual Abuse Support

Freephone helpline 0808 802 9999.

Helpline support and information for survivors of rape

DABS Pathfinder Service

Helpline 01255 852774 Area Served: UK.

Telephone support for adult survivors of rape and childhood abuse, their families, carers and helping professionals. Information on national and local support agencies, details of available literature. Information for press/media on abuse.

Family Matters

01474 537392 Area Served: UK.

Helpline and counselling for people of all ages who have experienced rape, childhood sexual abuse or sexual assault. Limited service available for non-abusing primary carers.

Rape and Abuse Line – RAL for Women

0808 800 0123 Freephone Area Served: UK.

Helpline for anyone who has been affected by rape and/or abuse. This line is answered by women most evenings between 7pm and 10pm. See also Rape and Abuse Line - Men.

☒ Women and Girls Network

020 7610 4678

Area Served: London.

Telephone advice and information, listening, signposting and onward referrals for women and girls who have experienced any form of violence, including childhood sexual abuse, rape and domestic violence.

☒ Rape and Abuse Line - Men

0808 8000122 Freephone

Area Served: UK.

Helpline for anyone who has been affected by rape and/or abuse. This line is answered by men on selected evenings between 7pm and 10pm. Answerphone gives details of dates and times the line is staffed by men. See also Rape and Abuse Line - Women.

Abuse - general

☒ Stop It Now! UK and Ireland Helpline

0808 1000 900 Freephone

Area Served: UK and the Republic of Ireland.

Advice and support for adults who suspect that someone they know presents a risk to a child and for people seeking help to stop their own abusive behaviour. Also for parents and carers concerned about a child's sexual behaviour. Advice and information for professionals.

☒ SupportLine

01708 765200

Area Served: UK.

Advice and information particularly for people who are socially isolated, at risk or experiencing any form of abuse. Subjects include relationships, child abuse, anger, bullying, eating disorders, self-harm, domestic violence, rape and sexual assault, depression, anxiety, panic attacks, addictions, phobias. For details of service outside opening hours phone and listen to message.

☒ MINDinfoLine

0300 123 3393

Area Served: England and Wales.

Information service for users of mental health services, carers, professionals and the public. Information on types of mental distress, treatments, alternative therapies, mental health law, advocacy, where to get help, local Mind groups. Access to legal advice.

☒ Rethink - National Advice Service

0300 5000 927

Area Served: UK.

Telephone advice service providing information and help to people affected by severe mental illness, including carers. Information and advice on a range of subjects, including benefits, community care, the Mental Health Act, complaints and inquests.

Action on Elder Abuse

0808 808 8141 UK Helpline Freephone

Area Served: UK.

Helpline offering information and support for anyone concerned about the abuse of an older person.

Abuse – workplace / allegations

- ☒ False Allegations Support Organisation(FASO)

0844 335 1992

Area Served: UK.

Practical advice and emotional support for anyone affected by a false allegation of abuse. Network of members and supporters who maintain contact with convicted prisoners.

- ☒ Public Concern at Work

020 7404 6609

Area Served: UK.

Whistleblowing helpline staffed by lawyers provides advice to workers who wish to raise matters of serious public concern, including fraud, public danger, abuse in care or other serious malpractice within the workplace which may affect others. Advice about worker's rights under the Public Interest Disclosure Act 1998.

- ☒ WITNESS against abuse by health and care workers

0845 4500 300

Area Served: UK.

Helpline offering short term support to survivors of abuse by health or social care professionals. Information and advice to clients and professionals.

Physical abuse / domestic violence

- ☒ Everyman Project

020 7263 8884

Area Served: UK.

Advice and information for anyone concerned about a man's violence.

- ☒ National Domestic Violence Helpline

0808 2000 247 Freephone

Area Served: England.

Information and support for women experiencing physical, emotional or sexual violence in the home. Can refer callers to local refuges and emergency and temporary accommodation across England. Run in partnership between Women's Aid Federation of England and Refuge.

Karma Nirvana

Helpline 0800 5999 247

Operates nationally supporting victims and survivors of forced marriages and honour based violence.

Respect Phone line

0808 802 4040

Area Served: England and Wales.

Helpline providing information and advice to perpetrators of domestic violence, and also to professional people who come into contact with perpetrators and to former partners of perpetrators wanting to find out what help is available for the perpetrator. Typetalk aware.

Child Line

0800 111

Area Served: UK

Helpline for children and young people in danger or distress. Telephone counselling for any child with any problem. Provides support and advice and refers children in danger to appropriate helping agencies. Freepost address for children at Child Line, Freepost NATN1111, London E1 6BR. (For children living in care the "Face to Face" service is available also contact 0800 111)

NSPCC

0808 800 5000

Area Served: UK

The NSPCC protects children across the UK and runs a wide range of services for both children and adults, including national help lines and local projects.

Appendix Seven

Resolving Interagency Disagreements (Escalation Procedures)

Problem solving is an integral part of interagency working and particularly in relation to safeguarding. Professional disagreements are to be expected as part of a dynamic process and only become dysfunctional if not resolved in a transparent, constructive and timely fashion.

Effective 'working together' can only be achieved when agencies establish an open and honest relationship based on a genuine commitment to partnership working. As part of this, there needs to be an agreement and an agreed system in place, to enable disagreements to be resolved promptly and hopefully to the satisfaction of all parties. The aim should be to resolve difficulties at the level at which they occur e.g. if two practitioners from different agencies disagree, in the first instance they should try and resolve the difficulty themselves. If this proves impossible, then the matter should be escalated until it is resolved.

Disagreements may arise in a number of areas, but often it can be in relation to thresholds and differing opinions about the need for action, communication difficulties between agencies and a lack of clarity about roles and responsibilities. It is really important to:

- ☒ Avoid professional disputes that put children/adults with care needs at risk of continuing harm
- ☒ Ensure the focus on the child/adult with care needs is not lost and does not become obscured
- ☒ Resolve difficulties within and between agencies quickly and transparently
- ☒ Identify problem areas in partnership working and amend, where necessary, any joint protocols or procedures

What to do when difficulties arise

When problems first arise, initial attempts to resolve the difficulty should be made by the people immediately involved. Differences in status and experience may impact on a worker's confidence to pursue this unsupported, in which case, it is imperative that they discuss the matter and get any necessary support from their line Manager, in a timely manner.

Each Local Safeguarding Adult Board (LSAB) ought to have an agreed procedure and process for resolving professional disputes. Please refer to LSAB website for your local area.

Most typically, this procedure will state that if the matter remains unresolved then it should be referred to the line Manager for resolution at the next level. It may then be necessary for that line Manager to discuss the issue with their opposite number in the other agency in an attempt to achieve resolution. This may include a face to face meeting between the Managers and workers involved in an attempt to explore the problem openly and transparently and to gain resolution.

If the problem remains unresolved, then the matter will need to be referred upwards in each agency until a resolution is found.

A clear written record should be kept at all stages and by all parties and should upon resolution, include written confirmation between the parties about the agreed outcome of the disagreement and how any outstanding issues will be dealt with.

If it proves impossible to reach an agreement and the matter is of a safeguarding nature, then the matter should be referred to the Chair of the Local Safeguarding Children Board or the Chair of the Local Safeguarding of Adults with care needs Board, for mediation.

In order to promote continuing good working relationships between agencies, it may be helpful after some disputes to have a debrief meeting for those who have been involved.

