

## Safeguarding Adults at Risk Policy

### Overview

The Change Project takes its responsibilities to adults at risk very seriously. During the course of delivering services staff may become aware of concerns about a person at risk (someone 18 and over who has additional needs, are at risk and are less able to protect themselves than others). Consultation about these concerns with a senior member of staff is mandatory and disclosure to the appropriate authorities may be required in order to safeguard these clients. This policy sets out our response and is in accordance with relevant legal frameworks.

### Background

This policy applies to all organisations and individuals involved in delivering The Change Project services. This includes trustees, staff, volunteers and students. The policy should be read alongside our vision, mission and values, other policies, and the Change Project quality standards set by BACP and Respect.

### Purpose

This policy sets out our commitment to the health, safety and welfare of all adults at risk and who are in contact with The Change Project. The purpose of the policy and accompanying procedures is to ensure that the rights of adults at risk are protected, through staff awareness of the issues and the following of the statutory guidelines in the reporting of concerns. We use the term adults at risk of abuse or neglect. This is consistent with current terminology as set out in the Care Act 2015. The Act highlights that local authorities have new safeguarding duties.

*They must:*

- ***lead a multi-agency local adult safeguarding system*** that seeks to prevent abuse and neglect and stop it quickly when it happens
- ***make enquiries, or request others to make them,*** when they think an adult with care and support needs may be at risk of abuse or neglect and they need to find out what action may be needed
- ***establish Safeguarding Adults Boards,*** including the local authority, NHS and Police, which will develop, share and implement a joint safeguarding strategy

- **carry out Safeguarding Adults Reviews** when someone with care and support needs dies as a result of neglect or abuse and there is a concern that the local authority or its partners could have done more to protect them
- **arrange for an independent advocate** to represent and support a person who is the subject of a safeguarding enquiry or review, if required.

*Any relevant person or organisation must provide information to Safeguarding Adults Boards as requested.*

The Change Project staff should aim to work in accord with principles set out in this Act.

## **Policy Content**

### **1.0 Overview of responsibilities**

- 1.1. All Change Project personnel shall make the safety and protection from harm of all adults at risk involved in activities which come under The Change Project's responsibility their highest priority.
- 1.2. It is the responsibility of all staff working within The Change Project to report concerns about abuse or significant harm to an adult at risk. This responsibility extends to all staff and not just those specifically working with adults at risk.
- 1.3. The Change Project has a duty to ensure that its staff fulfill their responsibilities to prevent abuse of adults at risk and to report any abuse discovered or suspected. All Change Project staff are obliged to consult their manager about any concerns.
- 1.4. The Change Project will take all reasonable steps during its intake process to identify an adult at risk. Their additional needs will be recorded and the designated practitioner and supervisor will be informed.
- 1.5. The Change Project recognises that any adult can be subject to abuse and all allegations of abuse, no matter how small or trivial, will always be taken seriously and responded to swiftly and in accordance with The Change Project's procedures.

### **2.0 Definitions**

- 2.1 **Adult at Risk** is a term used by The Care Act 2015 to describe adults age 18 and over *“with care and support needs who may be in vulnerable*

*circumstances and at risk of abuse or neglect”*

Some may have difficulty expressing their wishes and feelings. This may make them ‘at risk’ of abuse or exploitation.

**2.2 Abuse** is anything that goes against a person’s human and civil rights. An adult at risk 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. It can take place anywhere (for example, in a person’s own home, a care home or a hospital).

Abuse may consist of a single act or repeated acts either in a continuing relationship or in a service context and it may be directed to more than one person at a time. This makes it important to look beyond the single incident or breach in standards to underlying dynamics and patterns of harm. Some instances of abuse will constitute a criminal offence. In this respect adults at risk are entitled to the protection of the law in the same way as all other members of the public. In addition, statutory offences have been created which specifically protect those who may be incapacitated in various ways.

Type of abuse	Examples
Physical	<ul style="list-style-type: none"> <li>• slapping, pushing, kicking or other forms of violence</li> <li>• misuse of medication (for example, increasing dosage to make someone drowsy)</li> <li>• inappropriate punishments (for example, not giving someone a meal because they have been ‘bad’).</li> </ul>
Sexual	<ul style="list-style-type: none"> <li>• rape</li> <li>• sexual assault</li> <li>• sexual acts without consent (this includes if a person is not able to give consent or the abuser used pressure).</li> </ul>
Psychological	<ul style="list-style-type: none"> <li>• emotional abuse</li> <li>• threats of harm, restraint or abandonment</li> <li>• refusing contact with other people</li> <li>• intimidation</li> <li>• threats to restrict someone’s liberty.</li> </ul>
Financial	<ul style="list-style-type: none"> <li>• theft</li> <li>• fraud</li> <li>• undue pressure</li> <li>• misuse of property, possessions or benefits</li> <li>• dishonest gain of property, possessions or benefits.</li> </ul>

Coercive Control	<ul style="list-style-type: none"> <li>• Coercive control is an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.</li> </ul>
Neglect and acts of omission	<ul style="list-style-type: none"> <li>• ignoring the person’s medical or physical care needs</li> <li>• failing to get healthcare or social care</li> <li>• withholding medication, food or heating.</li> </ul>
Discriminatory	including racist, sexist, that based on a person’s disability, and other forms of harassment, slurs or similar treatment.

**2.3 Community Care Services** includes all care services provided in any setting or context.

**2.4 Safeguarding** In legislation and guidance, the term ‘safeguarding’ describes individuals’ and agencies’ responsibilities to protect and promote the welfare of children and adults at risk. The aim of safeguarding adults at risk is to help people live lives free from abuse and neglect. Good safeguarding includes arrangements for responding to allegations and suspicions of abuse.

**2.5 Significant Harm** - The Law Commission for England and Wales 1995, Mental Incapacity Report 231, has suggested that a key concept is ‘significant’ harm which helps to determine how serious or extensive abuse must be to justify intervention. “Harm’ should be taken to include not only ill-treatment (including sexual abuse and forms of ill-treatment that are not physical); the impairment of, or an avoidable deterioration in physical or mental health; and the impairment of physical, social, emotional or behavioural development’.

### **3.0 Legal Framework**

3.1 This policy and procedures reflect the principles contained within:

- The Care Act 2015
- The Mental Capacity Act 2005, covering England and Wales, provides a statutory framework for people who lack capacity to make decisions for themselves, or who have capacity and want to make preparations for a time when they may lack capacity in the future. It sets out who can take decisions, in which situations, and how they should go about

this.

- The Human Rights Act 1998 gives legal effect in the UK to the fundamental rights and freedoms contained in the European Convention on Human Rights (ECHR).
- The Public Interest Disclosure Act 1998 (PIDA) created a framework for whistle blowing across the private, public and voluntary sectors. The Act provides almost every individual in the workplace with protection from victimisation where they raise genuine concerns about malpractice in accordance with the Act's provisions.

#### **4.0 Code of Practice**

- 4.1 All actions taken under these procedures must be carried out sensitively, taking account of the adult at risk's individual, wishes, abilities needs, including race, culture and ethnicity, age, gender, religion, disability or sexuality.
- 4.2 Adults at risk should be allowed and helped to make their own decisions based on an awareness of the choices available. It is recognised that there will be situations where an adult at risk chooses to remain in a situation perceived by professionals to be risky or dangerous.
- 4.3 The principle of self-determination is important but may need to be reconsidered if an adult at risk is unable to make an informed choice, where there is a risk to life or limb or where a statutory responsibility exists.
- 4.4 The Change Project's code of practice and procedures will be carried out in accordance with the principles for determining individual capacity and ability to consent as set out in The Mental Capacity Act 2005 Part 1. These include:

##### **a) *The Principles***

- *A person must be assumed to have capacity unless it is established that he lacks capacity.*
- *A person is not to be treated as unable to make a decision unless all practicable steps to help him to do so have been taken without success.*
- *A person is not to be treated as unable to make a decision merely because he makes an unwise decision.*
- *An act done or decision made, under this Act for or on behalf of a person who lacks capacity must be done, or made, in his best interests.*

- *Before the act is done, or the decision is made, regard must be taken as to whether the purpose for which it is needed can be as effectively achieved in a way that is less restrictive of the person's rights and freedom of action.*

**b) *People who lack capacity***

- *For the purposes of this Act, a person lacks capacity in relation to a matter if at the material time he is unable to make a decision for himself in relation to the matter because of an impairment of, or a disturbance in the functioning of, the mind or brain.*
- *It does not matter whether the impairment or disturbance is permanent or temporary.*
- *A lack of capacity cannot be established merely by reference to:*
  - i) *a person's age or appearance, or*
  - ii) *a condition of his, or an aspect of his behaviour, which might lead others to make unjustified assumptions about his capacity.*

**c) *Inability to make decisions***

- *A person is unable to make a decision for himself if he is unable to:*
- *understand the information relevant to the decision,*
- *retain that information,*
- *use or weigh that information as part of the process of making the decision, or*
- *communicate his decision (whether by talking, using sign language or any other means).*

**5.0 Initial response**

5.1 Any member of personnel who suspects or knows of the abuse of any adult at risk should immediately inform their Line Manager or Supervisor. Even if they have only heard rumours of abuse, or have a suspicion but do not have firm evidence, they should still report their concerns.

5.2 If the Supervisor or Line Manager is not available, they should immediately

contact the Chief Executive.

## **6.0 Assessment and action**

- 6.1 When making an assessment, the environment, or context in which the abuse has occurred is relevant (e.g. residential care home, day care setting, domiciliary paid care or care by partner or other family members etc).
- 6.2 Exploitation, deception, misuse of authority, intimidation or coercion may make it particularly difficult for an adult at risk to speak openly about what is happening to them. Therefore, it will be important for the adult at risk to be away from the sphere of influence of the abusive person or the setting in order to be able to make a free choice about how to proceed.
- 6.3 Managers and Supervisors will use consultations to assess the information that has been disclosed. The objective will be to support the adult at risk so they can access protection and help and if they are in immediate danger the Police and Social Care must be contacted.
- 6.4 However, adults at risk who are age 18 and above should not be treated in the same way as children in need of safeguarding. They have a right to decide on actions concerning themselves unless they lack the mental capacity to do so.
- 6.5 Unlike young people under the age of 18, adults can insist on confidentiality unless there are circumstances in which an adult at risk's wishes may be overridden. As a general principle any actions taken will be in accordance with the wishes of the adult at risk, wherever possible.
- 6.6 All adults at risk and, where appropriate, their carers or representatives need to be made aware that the operation of multi disciplinary and inter-agency procedures will, on occasion, require the sharing of information in order to protect an adult at risk or others, or to investigate an alleged or suspected criminal offence.
- 6.7 Where there is reasonable suspicion of abuse and the adult has capacity to withhold consent and does not wish the information to be shared, then the adult must be offered all appropriate support.
- 6.8 If there is reason to believe a crime has been committed, and the adult at risk gives consent to informing the police, the Line Manager will ensure that they are assisted in reporting to the police or will make the report on their behalf. If the adult at risk does not give permission to involve the police, this information should be clearly recorded.

- 6.9 In normal circumstances observing the principle of confidentiality will mean that information is only passed on to others with the consent of the client. However, it should be recognised that in order to protect adults at risk, it may be necessary, in some circumstances, to share information that might normally be regarded as confidential. This would be the case if an adult at risk lacked the mental capacity to make a decision or give consent.
- 6.10 An assessment of 'lack of capacity' requires specialist help and given the nature of The Change Project's services, it is unlikely that such a situation will arise very often. However, it is important that staff are aware of such situations and how they should respond.

## **7.0 Consent and Capacity**

- 7.1 Procedures for determining an individual's ability to consent will be consistent with the Principles set out in the Mental Capacity Act 2005 and shown in the Code of Practice section of this document (section 4.4).
- 7.2 One of the key challenges in relation to working with adults at risk relates to capacity and consent in considering what action should be taken about alleged or suspected abuse. Two key questions need to be addressed:
- Did the adult at risk give meaningful consent to the act, relationship or situation which constitutes the alleged or suspected abuse?
  - Does the person now give meaningful consent to any preventable action, investigation or report to Social Care?
- 7.3 It is also necessary to determine both whether the person could consent and whether they did consent. Abuse may occur when any of the following conditions apply:
- The person does not consent.
  - The person is unable to consent, either because of issues of capacity or because the law.
  - Does not permit the adult at risk to give consent to a particular act or relationship.
  - Other barriers to consent exist for the adult at risk; e.g. where the person may be experiencing intimidation or coercion.
- 7.4 Where a person is deemed unable to make a decision, every reasonable and practicable effort must be made to encourage and permit the person to



participate in, or improve their ability to do so. If it is assessed that the client does not have capacity, (see para 4.4) then staff should act in a way which is in that person's best interests; i.e. what is necessary to promote health or wellbeing to prevent deterioration, consistent with existing legislation.

## **8.0 Record keeping**

- 8.1 Any disclosure from a client or another member of staff must be recorded on a Safeguarding Adult at Risk Record Form (SAARRF).
- 8.2 The record should be factual and should not include opinions or personal interpretations of the facts presented. It should contain all relevant detail and be as accurate as possible.
- 8.3 A record of consultation and subsequent actions including any report made to the statutory authority must also be kept on the SAARRF.

## **9.0 Dealing with allegations made against Change Staff**

- 9.1 Any information that gives rise to concern or suspicion about any Change Project personnel must be reported by the person who has this information to their Line Manager (unless the concern involves the Line Manager and then the report should be made to the Chief Executive). If the matter relates to the Chief Executive then the reports should be made to a Director.
- 9.2 The Line Manager will record the concerns on a Safeguarding Adult at Risk Record Form (SAARRF). The Line Manager will also inform the Chief Executive with regards to the concerns that have been raised.
- 9.3 If, following this discussion, it becomes quite clear that there is no cause for concern; the Line Manager will make a note on the SAARRF of the circumstances and the reason for not taking action, including the date, time and signature.
- 9.4 If it is decided that there is reasonable cause for concern then the Police must be informed by the Line Manager / Chief Executive immediately.
- 9.5 Appropriate support must be offered to the member of staff against whom the allegations have been made during the period of investigation.

## **10 Document review**

This document will be reviewed annually to ensure that it reflects best practice and legislation, aimed at safeguarding adults at risk. All



stakeholders are invited to provide feedback on this document, should they identify areas of inaccuracy or opportunities for enhancement.

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The Change Project

## FURTHER RESOURCES

- Safeguarding Adult at Risk Record Form (SAARRF).
- Safeguarding children at risk Policy
- Disciplinary Policy
- Domestic Abuse Policy
- Equality and Diversity Policy

No Secrets 2000

<https://www.gov.uk/government/publications/no-secrets-guidance-on-protecting-vulnerable-adults-in-care>

In Safe Hands

<http://www.wales.nhs.uk/governance-emanual/safeguarding-vulnerable-adults>

Safeguarding Adults: A National Framework of Standards for good practice and outcomes in adult protection work

<https://www.adass.org.uk/adassmedia/stories/publications/guidance/safeguarding.pdf>

Mental Capacity Act 2005 Code of Practice April 2007

<https://www.gov.uk/government/publications/mental-capacity-act-code-of-practice>

The Mental Capacity Act 2005

<http://www.legislation.gov.uk/ukpga/2005/9/contents>

Safeguarding Vulnerable Groups Act 2006

<http://www.legislation.gov.uk/ukpga/2006/47/contents>

The Data Protection Act 1998

<https://www.gov.uk/data-protection/the-data-protection-act>

Sexual Offences Act 2003

<http://www.legislation.gov.uk/ukpga/2003/42>

Independent Safeguarding Authority

<https://www.gov.uk/government/organisations/disclosure-and-barring-service>



The Human Rights Act 1998

<http://www.legislation.gov.uk/ukpga/1998/42/contents>