

Jami Adult Safeguarding Policy and procedures

CEO

Laurie Rackind

Head of Services

Louise Kermode

Jami Adult Safeguarding lead

Adam Ali, Lead social worker

August 2020

Review date August 2021

Contents

Introduction	3
Policy statement	3
Reason for policy	3
Policy Objectives	4
Guiding Policies and legislation	4
Recruitment	5
Definitions of Abuse and Risk	6
Procedures	7
CEO Responsibilities	11
Management Responsibilities	11
Staff and Volunteers Responsibilities	12
Responsibilities of Designated safeguarding Lead	13
Appendix A: Alert Form	14
Appendix B: Safeguarding Process Table	17
Appendix C	18
Appendix D	19
Appendix E	29

1. Introduction

Jami is committed to promoting the safety and wellbeing of adults, young people, children, and their families in all that we do. Our safeguarding framework, policy, procedures, and guidance outline how we will fulfil our duty of care to safeguard everyone we work with and those that work on our behalf including staff, volunteers, trustees and partner agencies. We believe that adult (and child) safeguarding is everybody's business.

We believe everyone has a responsibility to promote the welfare of all children and young people, and adults to keep them safe from harm and abuse and ensure we take all reasonable steps to prevent harm to them. We will give equal priority to the safety of all adults regardless of their age, disability, gender reassignment, race, religion or belief, sex, or sexual orientation.

2. Policy statement

Jami recognises that every person has the right to live free from abuse. Therefore, Jami has a duty of care to all its service users, staff, and volunteers to protect them wherever possible from any form of abuse. This policy defines Jami's method of responding to allegations or suspicions of abuse. This policy applies to all Jami activities, staff, and volunteers.

The policy and procedures that Jami will work within are based on The Six guiding Principles of Safeguarding that underpin all adult safeguarding work (see Appendix E.)

3. Reason for policy

There are legal requirements on statutory bodies under the Care Act 2014, and statutory guidance (Care and Support Statutory Guidance 2018) applying to the voluntary sector across England and the devolved nations, for organisations to do everything they can to recognise and report abuse quickly and appropriately to keep adults safe, and to prevent such abuse from happening in the first place. The legal requirements help to develop mechanisms and processes to protect individuals, families, and the wider community from experiencing various forms of abuse. For Jami to support people to live free from abuse the Jami Adult Safeguarding policy has been created to support people experiencing abuse, using the policy as a framework to operate within.

4. Policy Objectives

- The wishes and feelings of people using Jami services should, wherever possible, be ascertained, considered, and recorded. There is an emphasis on individual well-being and 'making safeguarding personal'. This approach means supporting and enabling people to make choices and have control about how they want to live their own lives. (Care Act 2015)
- Provide mechanisms to help safeguard individuals from abuse and/or exploitation
- Provide a framework for effective working
- Reduce and prevent incidences of abuse
- Ensure that abuse of an individual does not occur as a result, either directly or indirectly, of any of the services offered by Jami
- Increase awareness of issues concerning the abuse of individuals of all ages.
- Provide a process for staff who have issues of concern in respect to suspected, disclosed or observed abuse
- Ensure that adults are empowered to speak out for themselves and know that they will be supported during any investigations of abuse.
- Respond quickly and sensitively to suspicions or disclosed incidents of abuse

5. Guiding Policies and legislation

The Jami safeguarding adult's policy should be read alongside and cross references with the documents below:

No Secrets Guidance 2009

Jami HR Whistleblowing Policy

Jami Child Safeguarding Policy

Sexual Offences Act 2003

Protection of Freedoms Act 2012

Jami Employee Handbook 2018

Jami Lone working policy 2018

Jami confidentiality policy 2018

Jami GDPR data protection policy 2018

Jami Information Governance Policy 2018

Equality Diversity & inclusion Policy 2018

Data Protection Act (2018)

Available at: <http://www.legislation.gov.uk/ukpga/2018/12/contents/enacted>

Human Rights Act (1998)

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

Care Act (2014)

Available at <http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>

Care and Support Statutory Guidance (2018)

Available at: <https://www.gov.uk/guidance/careand-support-statutory-guidance>

Children Act (1989 & 2004)

Available at: <http://www.legislation.gov.uk/ukpga/1989/41/contents>

Equality Act (2010)

Available at: <http://www.legislation.gov.uk/ukpga/2010/15/contents>

Mental Capacity Act (2005)

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

London multi-agency policy and procedures to safeguard adults from abuse 2019

Available at <http://londonadass.org.uk/wp-content/uploads/2019/05/2019.04.23-Review-of-the-Multi-Agency-Adult-Safeguarding-policy-and-procedures-2019-final-1-1.pdf>

Safeguarding Vulnerable Groups Act 2006

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

6. Recruitment

The Safeguarding Vulnerable Groups Act 2006 provides the legislative framework for the Vetting and Barring scheme. Jami has legal responsibilities under the 2006 Safeguarding Vulnerable Groups Act, specifically for those activities that involve contact including training, care, supervision, treatment, advice or transportation of children and vulnerable adults.

Checks will take place before an individual is able to start work. The scheme will make sure that those who are known to present a risk of harm to children and/or vulnerable adults cannot enter the relevant workforce in the first place.

Jami must have Disclosure and Barring (DBS) checks completed when recruiting staff or volunteers who are in regular contact with service users.

Jami is also required to make a referral to the Independent Safeguarding Authority (ISA) whenever a worker or volunteer is reasonably considered to be guilty of misconduct that has harmed or placed a vulnerable adult at risk of harm or committed an offence since taking up a position in the organisation that may put adults and young people at risk. Other professional registration bodies can be informed such as, Social Work England or the Health and Care Professionals Council (HCPC) where deemed appropriate to do so.

7. Definitions of Abuse and Risk

Although there are many definitions of abuse and risk in the literature Jami have used the definitions and indicators of abuse & risk that are in line with legislation.

Definitions of abuse:

- Abuse is a violation of an individual's human and civil rights, by any other person or persons.
- A deliberate form of maltreatment that can harm or is likely to harm a child or young person, or adult.. A child or young person may suffer abuse by having harm inflicted, or by someone failing to act to prevent harm.

Definition of an adult at risk: An adult at risk is defined as a person aged 18 years or over who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation.

The safeguarding duties apply to an adult who:

- has needs for care and support (whether or not the local authority is meeting any of those needs) and;
- is experiencing, or at risk of, abuse or neglect; and
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect. (Care Act 2014) (see appendix D for categories & signs of Adult abuse)

Definition of a child at risk: A child is a person under 18 who for the purposes of this policy needs to be safeguarded from harm, exploitation or neglect. (see Appendix C for -categories of abuse, children & and Jami Child safeguarding policy)

8. Procedures

8.1 Action to be taken when abuse is known about or suspected

- **Witnessing:** When a person witnesses abuse, they must immediately ensure the safety of the person being abused and inform their line manager immediately and or the safeguarding lead within no more than 24 hours of the incident.
- **Alerting:** where an incident of concern is disclosed, suspected, or witnessed, the person receiving the information must record as much detail as possible of what they know. They should notify their line manager as soon as practicable, both verbally and in a written document. A decision will be made in consultation with all relevant parties including the service user whether an alert should be raised. If the risk is immediate, life threatening to self or others there should be no delay in raising an alert and emergency services should be contacted. e.g. police, GP, social services.
- **Reporting:** When a concern about abuse has been raised, a line manager should discuss the issue with the person who raised the concern, to find out about the particular incident. A detailed verbal report about the incident must take place at the same time. The more information you can provide in the report the better. However, it is essential that you do not press the issue if the information required is not forthcoming without asking direct or searching questions.

At this stage, you are an observer/recorder only, not an investigator.

You should discuss the situation with the safeguarding lead (SL) or a senior manager. The SL or senior manager will decide whether to make a report directly to the relevant local authority adult protection or children's team (or equivalent). The Jami Alert Form (Appendix A) should also be completed within 24 hours and sent to the Safeguarding Lead. In all cases accurate signed and dated written records must be maintained. The senior manager can consult the SL before the concern is raised.

- **Alleged staff or volunteer abuse:** Where suspected abuse is alleged to be malpractice by a staff member or volunteer, the HR whistle-blowing policy or internal disciplinary procedure will be invoked.

8.2 Why follow procedures?

Safeguarding people or children who are at risk is rarely a clear-cut process. Each situation has its unique circumstances and each individual has specific needs. It is essential therefore that Jami has a straightforward and effective procedure in place for dealing with a wide variety of safeguarding concerns. The process must take into account the needs of people with physical and/or mental health issues,

the well-being of staff and the protection of Jami's good name. These procedures provide the method by which Jami monitors, evaluates, and maintains high quality responses to abuse concerns. See Appendix B for the full Safeguarding Process.

8.3 Choice, consent, and capacity

Jami aims to empower adults with mental health issues to be in control of their own lives, to make informed choices and their own decisions wherever possible. Within the context of these procedures, Jami seeks to protect individuals from abuse at the same time as promoting their dignity and right to live safely in the way they want, ensuring a crucial balance is maintained between autonomy and adult protection. It is imperative that the 6 guiding principles from the Care Act 2014 and the 5 key principles from the Mental Capacity Act 2005 are considered.

Children. It is important to refer a child if there are concerns about a child's welfare, possible abuse, or neglect to Social Services. Children are protected by the Safeguarding Children and a written referral using the Multi Agency Referral Form from your local Safeguarding Children's Services must be faxed or e-mailed to the appropriate office as soon as possible on the day, copying in Jami's Safeguarding Lead. Alternatively, and or in addition a direct call can be made to relevant authorities such as the Children's Social Services Department, police, NSPCC etc. (refer to Jami Child safeguarding policy)

Adults have the freedom to choose whether they wish to change their current circumstances or not. Their wishes should be respected. It is assumed that an adult has capacity to make their own decisions unless otherwise assessed as lacking capacity. A person is not to be treated as unable to make a decision merely because they make an unwise decision. The exception is where there is a statutory responsibility to intervene. This would occur if:

- A serious crime was suspected
- Allegations involved a Jami member of staff or volunteer
- There was a risk of significant harm to that person or other people at risk.

Staff members/volunteers must work closely with people who are at risk to make sure they have as full an understanding as possible, of the support and options available to them. Volunteers/staff members must uphold the five key principles that are contained in the Mental Capacity Act. If there is any doubt about the ability of the person at risk to give meaningful consent, it is essential that staff members/volunteers consult their line manager.

There are occasions when the statutory duty to report abuse overrides consent, for example when:

- A member of staff/volunteer reasonably believes that there is immediate risk to life or limb
- The person at risk is a tenant, resident or patient in a statutory, voluntary or private institutional setting, and it is thought that any suspected or actual abuse may impinge on others' rights and/or may involve situations where the alleged abuser is a member of staff.

8.4 Why is documentation necessary?

The necessity of maintaining detailed written documentation may be viewed as a burden on staff members'/volunteers' time but it can be invaluable in dealing with complaints in a positive way. It has also made providing reliable witness statements for case reviews, at multi-agency boards and in court, much easier. Written records are essential for monitoring the standard of Jami's work.

8.5 Abuse awareness training

To ensure staff know how to identify abuse concerns in the course of their work, they will be expected to attend awareness training and be made familiar with Jami's whistle blowing, gifts policy and disciplinary policies. Managers will attend external training to enable them to address the support needs of their team members and comply with the demands of the referral/alerting process. Safeguarding training will be provided to the organisation and will form part of the mandatory training programme.

8.6 What to do if the person causing harm is a member of staff/volunteer

Where any staff member/volunteer is observed carrying out abuse, or is suspected of doing so, Jami whistle-blowing policy will be invoked. This includes a situation in which a line manager may have colluded in an incident of abuse.

The person suspecting such malpractice must record as much detail as possible. Then notify a line manager or the lead safeguarding person as soon as practicable. If a line manager is implicated, then another manager and the lead safeguarding person must be approached. Reference to Jami's whistle-blowing policy must be given here also.

8.7 Supporting the clients through the process. It is important that:

- Clients are supported during and after safeguarding investigations in the way they wish.
- That where it is wished, advocacy services are made available including an IMCA where appropriate.
- In the event of an alert, the person concerned is at the centre of the safeguarding process and, wherever possible, they remain in control and make their own decisions.
- Where deemed necessary the Local Authority have a duty to appoint an advocate for the person.

8.8 Sharing information about a client

It is vital that staff members/volunteers consult the SL and, or senior managers and do not attempt to handle an abuse issue in isolation. The process of consultation with managers is designed to make sure each situation is considered carefully and any decisions to act, or not to act, are made with as much appreciation of the circumstances as possible.

8.9 Monitoring and storage of client records

Written documentation will record the reasons why action is being taken or not taken, as well as facts about what occurred. Every resource or service will keep their own records. All documentation will also be stored, collated, and analysed by the Safeguarding Lead (SL) in Jami in readiness for report writing or should Jami be asked to explain how cases have been responded to.

8.10 Alerting authorities

It is vital that alerts are passed on as soon as possible to the local council and the police (where appropriate) once information has been received about abuse. For adults, Jami will raise alerts to statutory authorities when managers deem this is warranted. For children, Jami will raise alerts as soon as concerns are raised. Where necessary, the initial alert can be by telephone or email if this will result in getting better support for the abused person or child. This is to be followed by a formal confirmation in writing, with a copy to the Safeguarding Lead in Jami. The Care Quality Commission expects councils to take alerts, from charities and the public, without consent being a prerequisite as this may adversely affect the process.

8.11 Enquiries

It is not the role of the organisation to carry out the safeguarding enquiry. The purpose of raising an alert to a statutory authority is to pass on information about a person who might be at risk.

9. CEO Responsibilities

The CEO has overall responsibility for ensuring the effective implementation of the Jami Safeguarding Policy. The CEO will fulfil the following responsibilities or delegate them to an appropriate person where necessary:

- Ensure that all information in respect of safeguarding vulnerable adults and children is stored securely.
- Provide support to colleagues, wherever practicable, to discuss any queries, prior, during and after a safeguarding protection concern.
- Oversee training and specialist support for Jami staff and volunteers.
- Ensure line managers of all Jami staff will report to statutory authority's cases of abuse, document all actions, conversations and reasons for decisions made, informing the Safeguarding Lead Person at the same time.
- Ensure that all team members, paid and volunteer are familiar with the safeguarding policy and procedures.

The implementation and effectiveness of this policy will be monitored by the CEO, not less than annually. The CEO will also review the policy regularly (not less than annually) and recommend and implement action to ensure the policy is up to date and compliant with current legislation and guidance.

10. Management Responsibilities

- Ensure that all their staff have received training in safeguarding awareness.
- Ensure that their team members are familiar with Jami's whistle-blowing policy, gifts policy, disciplinary procedures, and safeguarding policy.
- Ensure that all notifications of abuse, actual or suspected, are treated with the highest priority.
- When receiving a concern about abuse, discuss the issue with the person who raised the concern to ascertain the particular circumstances of the incident. The persons and wishes should be taken into consideration. ("making safeguarding personal" and working within the "6 principles")
- If an adult, undertake a risk analysis on the information and decide whether to alert a statutory authority.
- Ensure that accurate, signed and dated written records are maintained throughout this process. The Safeguarding Lead will need to have access to documentation that includes a record of all actions, conversations and reasons for decisions made.

- Undertake a risk analysis on the information and decide whether to alert a statutory authority. A referral to the local authority should be made if there is any indication that the person has been harmed or put at risk of harm and unable to protect themselves. The local authority multi-agency safeguarding policy and procedure must be followed in all instances. The local authority has a duty to initiate an enquiry into all concerns. This can include asking the provider of a service to carry out this enquiry.
- Maintain contact with the local authority, attend strategy meetings and maintain links with stakeholders throughout the process and until there is an outcome from an investigation.
- If receiving a concern about abuse involving a member of staff, follow Jami's whistle-blowing and disciplinary policies.
- Conduct risk assessments for the roles within their teams; to determine whether their staff's activities are defined by 'regulated' or 'controlled' activities (Regulated and controlled activities require Disclosure & Barring Services (DBS) checks.
- Be aware that they, and their staff, may be exposed to difficult or disturbing cases of abuse. They should be able to offer effective supervision and support to their staff while also ensuring that any personal issues are communicated to their own managers.
- Ensure that no new member of staff starts their duties without an appropriate check through the DBS process.
- Ensure attendance at all strategy meetings and co-operate fully with all authorities.
- Do not talk to the press without express permission from Jami's Press office.

11. Staff and Volunteers Responsibilities

- If any paid member of staff or volunteer sees or hears about the abuse of a child or adult, or have seen changes in behaviour or living patterns that make them suspect that someone is being abused, it is vital that they do not ignore what they have seen or suspected. The safety and welfare of people who use our services are paramount and a lack of response can have serious consequences for that individual.
- Staff must alert the relevant emergency services if there is an immediate risk to life or limb of the person(s) involved, or ensure they are kept safe immediately. Inform their line manager immediately and certainly within 24 hours of such an incident.

- Be aware of the whistleblowing policy and be comfortable alerting managers of any such situations.
- Attend staff and volunteer meetings, supervision and appraisal, training and any handovers that are required.
- Be clear on how to write a clear, concise and objective report of any incident.
- Do not talk to the press and keep the organisation's confidentiality policy.

12. Responsibilities of Designated safeguarding Lead

- Provide support for colleagues before, during and after any concerns raised and/or whistle-blowing case.
- Either directly report or support staff to report safeguarding to relevant bodies such as the local authority, police, mental health services and to Human Resources so that the DBS can be informed where deemed necessary.
- Obtain feedback regarding the outcomes of alerts given to DBS or local authority or police.
- Follow clear governance procedure for the reporting of safeguarding alerts.
- Produce reports as requested to the Clinical Governance Consultative Committee.
- Inform the board of trustees of any abuse incidents involving Jami staff members/volunteers.
- Collate and report data on safeguarding adult cases to the trustee board annually.
- Ensure that all information on safeguarding is stored securely, monitored, and analysed, in line with Jami Policy.
- Provide information and updates on good practice in respect of issues of abuse and adult safeguarding.
- Review Jami's safeguarding procedures and policy annually and update them when necessary.
- Co-ordinate a regular training programme for all staff on safeguarding.

Appendix A: Alert Form

Alert Form (Initial Alert & Ongoing Record)

NOTE: Please email your completed form to adam.ali@jamiuk.org

DETAILS OF VULNERABLE ADULT: (i.e.: name, address, dob, age)

ALLEGED, SUSPECTED, WITNESSED OR REPORTED ABUSE/INCIDENTS:

RESOURCE:

ALLEGATIONS AGAINST:

ALERTED BY:

DESCRIPTION OF THE ALLEGED, SUSPECTED OR WITNESSED ABUSE/CONCERN, WHAT WAS SEEN, SAID, WHO ELSE WAS PRESENT ETC.: (also record in Apricot)

DATE AND TIME OF ALLEGED SUSPECTED OR WITNESSED ABUSE:

DATE AND TIME ALERT REPORTED:

ABUSE SETTING:

(Please tick where appropriate)

- Own Home
- Supported housing
- Residential Care
- Mental health setting
- Alleged perpetrator's home
- Public place
- Acute hospital
- Other health setting
- Not known
- Other (please give details)

TYPE OF ABUSE:

(Please mark where appropriate)

- Physical
- Sexual
- Domestic abuse/Violence
- Psychological
- Financial or material
- Neglect / Act of Omission
- Modern Slavery
- Discriminatory
- Organisational
- Self-Neglect
- Other (please give details)

IMMEDIATE ACTION TAKEN:

BY LOCAL AUTHORITY:

BY Jami:

Protection Plan: (please detail what you have tried to put in place to protect or support the client, e.g. referral to JWA, community support Team, Police, ambulance etc.

NB: Once form is completed please upload to Apricot under safeguarding Tab

Appendix B: Safeguarding Process Table

Stage	Function	Responsibility	Timeframe
Concern raised abuse, incident, or suspicion	If there is immediate risk to life or limb contact paramedics/Emergency services. Respond to client involved and write detailed case notes	Frontline member of staff/volunteer	Immediate
Consultation between manager and member of staff/volunteer	A discussion is held between the member of staff/volunteer and manger to talk about the concern. Written record made of the discussion, signed, and dated by both	Member of staff/volunteer and manager	Within 24 hours/ 1 working day of notification of abuse
Decision how and/or if to take action	Safeguarding lead will decide, based on the information gained by the volunteer/ member of staff, and Manager if the safeguarding process is necessary	Safeguarding lead / manager	Within 1 working day of member of staff/volunteer/ Manager dealing with the case
Give/discuss case details, consultation, and decision with SL	Review risks, reasons for actions decisions or inactions. There should be no delay in raising safeguarding concern with the local authority when deemed necessary	Manager in consultation with SL/CEO/trustee responsible for Jami's safeguarding	Within 48 hours/ 2 working days of receiving the notification of abuse
Alert statutory authority when appropriate	Local safeguarding team or social services or police are alerted about the case. This can be done verbally first, but formal written account must always be given. Jami will keep copies of written correspondence and records of time, date, and name of anyone spoken to. Feedback on the case will be requested	Generally, the SLP will raise the concern once there is enough information gathered	Within 48 hours/ 2 working days of receiving notification of the case
Record keeping, including outcomes	Whether the case has been alerted or not, outcomes are recorded, stored, and kept in accordance with the Data Protection Act	SL/ database holder	Within 5 working days of the case being notified by member of staff/volunteers
Feedback	Feedback given by a statutory authority will be kept in the case file	SL and, or case worker	When information becomes available from statutory authority but within 4 weeks where possible
Regular report	The SL will generate a safeguarding biannual report to be presented to the CEO/trustee board	SL & Managers	Biannually (once every 6 months)

Appendix C

Categories of Abuse under the Children Act 1989 & 2004

The Children Act 1989 places obligations on the local authority and partner agencies as well as parents and the courts to ensure that children are safeguarded and protected from harm and their welfare is promoted.

There are 4 main categories of abuse under the Children Act which are:

Physical Abuse: Physical abuse may involve hitting, shaking, throwing, poisoning, burning, or scalding, drowning, suffocating, or otherwise causing physical harm to a child. There is not one sign or symptom to look out for that will say a child is definitely being physically abused. But if a child often has injuries, there seems to be a pattern, or the explanation does not match the injury then this should be investigated.

Emotional Abuse: Emotional abuse is the ongoing emotional maltreatment of a child. It is sometimes called psychological abuse and can seriously damage a child's emotional health and development. Emotional abuse can involve deliberately trying to scare or humiliate a child or isolating or ignoring them. Children who are emotionally abused are often suffering another type of abuse or neglect at the same time – but this is not always the case.

Sexual Abuse: A child is sexually abused when they are forced or persuaded to take part in sexual activities. This does not have to be physical contact and it can happen online. Sometimes the child will not understand that what is happening to them is abuse. They may not even understand that it is wrong, or they may be afraid to speak out. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing, and touching outside of clothing.

Neglect: Neglect is the persistent failure to meet a child's basic physical and/or psychological needs likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to provide adequate food, clothing, and shelter (including exclusion from home or abandonment).

- protect a child from physical and emotional harm or danger.
- ensure adequate supervision (including the use of inadequate caregivers); or
- ensure access to appropriate medical care or treatment.
- It may also include neglect of, or unresponsiveness to, a child's basic, emotional needs.

Appendix D

Categories and indicators of abuse under the Care Act 2014

Physical abuse

Types of physical abuse:

- Assault, hitting, slapping, punching, kicking, hair-pulling, biting, pushing
- Rough handling
- Scalding and burning
- Physical punishments
- Inappropriate or unlawful use of restraint
- Making someone purposefully uncomfortable (e.g. opening a window and removing blankets)
- Involuntary isolation or confinement
- Misuse of medication (e.g. over-sedation)
- Forcible feeding or withholding food
- Unauthorised restraint, restricting movement (e.g. tying someone to a chair)

Possible indicators of physical abuse:

- No explanation for injuries or inconsistency with the account of what happened
- Injuries are inconsistent with the person's lifestyle
- Bruising, cuts, welts, burns and/or marks on the body or loss of hair in clumps
- Frequent injuries
- Unexplained falls
- Subdued or changed behaviour in the presence of a particular person
- Signs of malnutrition
- Failure to seek medical treatment or frequent changes of GP

Domestic violence or abuse

Types of domestic violence or abuse:

Domestic violence or abuse can be characterised by any of the indicators of abuse outlined in this briefing relating to:

- psychological
- physical
- sexual
- financial
- emotional

Domestic violence and abuse includes any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence, or abuse between those aged 16 or over who are or have been, intimate partners or family members regardless of gender or sexuality. It also includes so called 'honour' -based violence, female genital mutilation and forced marriage.

Coercive or controlling behaviour is a core part of domestic violence. Coercive behaviour can include:

- acts of assault, threats, humiliation, and intimidation
- harming, punishing, or frightening the person
- isolating the person from sources of support
- exploitation of resources or money
- preventing the person from escaping abuse
- regulating everyday behaviour

Possible indicators of domestic violence or abuse:

- Low self-esteem
- Feeling that the abuse is their fault when it is not
- Physical evidence of violence such as bruising, cuts, broken bones

- Verbal abuse and humiliation in front of others
- Fear of outside intervention
- Damage to home or property
- Isolation – not seeing friends and family
- Limited access to money

Sexual abuse

Types of sexual abuse:

- Rape, attempted rape, or sexual assault
- Inappropriate touch anywhere
- Non-consensual masturbation of either or both persons
- Non-consensual sexual penetration or attempted penetration of the vagina, anus, or mouth
- Any sexual activity that the person lacks the capacity to consent to
- Inappropriate looking, sexual teasing or innuendo or sexual harassment
- Sexual photography or forced use of pornography or witnessing of sexual acts
- Indecent exposure

Possible indicators of sexual abuse:

- Bruising, particularly to the thighs, buttocks and upper arms and marks on the neck
- Torn, stained or bloody underclothing
- Bleeding, pain or itching in the genital area
- Unusual difficulty in walking or sitting
- Foreign bodies in genital or rectal openings
- Infections, unexplained genital discharge, or sexually transmitted diseases
- Pregnancy in a woman who is unable to consent to sexual intercourse
- The uncharacteristic use of explicit sexual language or significant changes in

sexual behaviour or attitude

- Incontinence not related to any medical diagnosis
- Self-harming
- Poor concentration, withdrawal, sleep disturbance
- Excessive fear/apprehension of, or withdrawal from, relationships
- Fear of receiving help with personal care
- Reluctance to be alone with a particular person

Psychological or Emotional abuse

Types of psychological or emotional abuse:

- Enforced social isolation – preventing someone accessing services, educational and social opportunities and seeing friends
- Removing mobility or communication aids or intentionally leaving someone unattended when they need assistance
- Preventing someone from meeting their religious and cultural needs
- Preventing the expression of choice and opinion
- Failure to respect privacy
- Preventing stimulation, meaningful occupation, or activities
- Intimidation, coercion, harassment, use of threats, humiliation, bullying, swearing or verbal abuse
- Addressing a person in a patronising or infantilising way
- Threats of harm or abandonment
- Cyber bullying

Possible indicators of psychological or emotional abuse:

- An air of silence when a particular person is present
- Withdrawal or change in the psychological state of the person
- Insomnia

- Low self-esteem
- Uncooperative and aggressive behaviour
- A change of appetite, weight loss/gain
- Signs of distress: tearfulness, anger
- Apparent false claims, by someone involved with the person, to attract unnecessary treatment

Financial or material abuse

Types of financial or material abuse:

- Theft of money or possessions
- Fraud, scamming
- Preventing a person from accessing their own money, benefits, or assets
- Employees taking a loan from a person using the service
- Undue pressure, duress, threat, or undue influence put on the person in connection with loans, wills, property, inheritance, or financial transactions
- Arranging less care than is needed to save money to maximise inheritance
- Denying assistance to manage/monitor financial affairs
- Denying assistance to access benefits
- Misuse of personal allowance in a care home
- Misuse of benefits or direct payments in a family home
- Someone moving into a person's home and living rent free without agreement or under duress
- False representation, using another person's bank account, cards, or documents
- Exploitation of a person's money or assets, e.g. unauthorised use of a car
- Misuse of a power of attorney, deputy, appointeeship or other legal authority
- Rogue trading – e.g. unnecessary or overpriced property repairs and failure to carry out agreed repairs or poor workmanship

Possible indicators of financial or material abuse:

- Missing personal possessions
- Unexplained lack of money or inability to maintain lifestyle
- Unexplained withdrawal of funds from accounts
- Power of attorney or lasting power of attorney (LPA) being obtained after the person has ceased to have mental capacity
- Failure to register an LPA after the person has ceased to have mental capacity to manage their finances, so that it appears that they are continuing to do so
- The person allocated to manage financial affairs is evasive or uncooperative
- The family or others show unusual interest in the assets of the person
- Signs of financial hardship in cases where the person's financial affairs are being managed by a court appointed deputy, attorney, or LPA
- Recent changes in deeds or title to property
- Rent arrears and eviction notices
- A lack of clear financial accounts held by a care home or service
- Failure to provide receipts for shopping or other financial transactions carried out on behalf of the person
- Disparity between the person's living conditions and their financial resources, e.g. insufficient food in the house

Modern slavery

Types of modern slavery:

- Human trafficking
- Forced labour
- Domestic servitude
- Sexual exploitation, such as escort work, prostitution, and pornography
- Debt bondage – being forced to work to pay off debts that realistically they never will be able to

Possible indicators of modern slavery:

- Signs of physical or emotional abuse
- Appearing to be malnourished, unkempt or withdrawn
- Isolation from the community, seeming under the control or influence of others
- Living in dirty, cramped, or overcrowded accommodation and or living and working at the same address
- Lack of personal effects or identification documents
- Always wearing the same clothes
- Avoidance of eye contact, appearing frightened or hesitant to talk to strangers
- Fear of law enforcers

Discriminatory abuse

Types of discriminatory abuse:

- Unequal treatment based on age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex or sexual orientation (known as 'protected characteristics' under the Equality Act 2010)
- Verbal abuse, derogatory remarks or inappropriate use of language related to a protected characteristic
- Denying access to communication aids, not allowing access to an interpreter, signer, or lip-reader
- Harassment or deliberate exclusion on the grounds of a protected characteristic
- Denying basic rights to healthcare, education, employment, and criminal justice relating to a protected characteristic
- Substandard service provision relating to a protected characteristic

Possible indicators of discriminatory abuse:

- The person appears withdrawn and isolated
- Expressions of anger, frustration, fear, or anxiety
- The support on offer does not take account of the person's individual needs in terms of a protected characteristic

Organisational or institutional abuse

Types of organisational or institutional abuse:

- Discouraging visits or the involvement of relatives or friends
- Run-down or overcrowded establishment
- Authoritarian management or rigid regimes
- Lack of leadership and supervision
- Insufficient staff or high turnover resulting in poor quality care
- Abusive and disrespectful attitudes towards people using the service
- Inappropriate use of restraints
- Lack of respect for dignity and privacy
- Failure to manage residents with abusive behaviour
- Not providing adequate food and drink, or assistance with eating
- Not offering choice or promoting independence
- Misuse of medication
- Failure to provide care with dentures, spectacles, or hearing aids
- Not taking account of individuals' cultural, religious, or ethnic needs
- Failure to respond to abuse appropriately
- Interference with personal correspondence or communication
- Failure to respond to complaints

Possible indicators of organisational or institutional abuse:

- Lack of flexibility and choice for people using the service
- Inadequate staffing levels
- People being hungry or dehydrated
- Poor standards of care
- Lack of personal clothing and possessions and communal use of personal items

- Lack of adequate procedures
- Poor record-keeping and missing documents
- Absence of visitors
- Few social, recreational, and educational activities
- Public discussion of personal matters
- Unnecessary exposure during bathing or using the toilet
- Absence of individual care plans
- Lack of management overview and support

Neglect or acts of omission

Types of neglect and acts of omission:

- Failure to provide or allow access to food, shelter, clothing, heating, stimulation, and activity, personal or medical care
- Providing care in a way that the person dislikes
- Failure to administer medication as prescribed
- Refusal of access to visitors
- Not taking account of individuals' cultural, religious, or ethnic needs
- Not taking account of educational, social, and recreational needs
- Ignoring or isolating the person
- Preventing the person from making their own decisions
- Preventing access to glasses, hearing aids, dentures, etc.
- Failure to ensure privacy and dignity

Possible indicators of neglect and acts of omission:

- Poor environment – dirty or unhygienic
- Poor physical condition and/or personal hygiene
- Pressure sores or ulcers

- Malnutrition or unexplained weight loss
- Untreated injuries and medical problems
- Inconsistent or reluctant contact with medical and social care organisations
- Accumulation of untaken medication
- Uncharacteristic failure to engage in social interaction
- Inappropriate or inadequate clothing

Self-neglect

Types of self-neglect:

- Lack of self-care to an extent that it threatens personal health and safety
- Neglecting to care for one's personal hygiene, health, or surroundings
- Inability to avoid self-harm
- Failure to seek help or access services to meet health and social care needs
- Inability or unwillingness to manage one's personal affairs

Indicators of self-neglect:

- Very poor personal hygiene
- Unkempt appearance
- Lack of essential food, clothing, or shelter
- Malnutrition and/or dehydration
- Living in squalid or unsanitary conditions
- Neglecting household maintenance
- Hoarding
- Collecting a large number of animals in inappropriate conditions
- Non-compliance with health or care services
- Inability or unwillingness to take medication or treat illness or injury

Appendix E

The Six Safeguarding Principles

Principle 1: Empowerment

What does this mean?

People should be supported and encouraged to make their own decisions. This should be done by:

- making services more personal
- giving people choice and control over decisions
- asking people what they want the outcome to be

What does this mean for the adult?

You are asked what you want to happen and services plan safeguarding round this.

Principle 2: Prevention

What does this mean?

Organisations should work together to stop abuse before it happens by:

- raising awareness about abuse and neglect
- training staff
- making sure clear, simple, and accessible information is available about abuse and where people can get help

What does this mean for the adult?

You will get clear and simple information about what abuse is and who to ask for help.

Principle 3: Proportionality

What does this mean?

When dealing with abuse situations services must ensure that they always think about the risk. Any response should be appropriate to the risk presented. Services must respect the person, think about what is best for them and only get involved as much as needed.

What does this mean for the adult?

Services think about what is best for you and only get involved when they need to.

Principle 4: Protection

What does this mean?

Organisations must ensure that they know what to do when abuse has happened by:

- what to do if there are concerns
- how to stop the abuse
- how to offer help and support for people who are at risk

What does this mean for the adult?

You can get help and support to tell people about abuse and can get involved in the safeguarding as much or as little as you want.

Principle 5: Partnership

What does this mean?

Organisations should work in partnership with each other and local communities. Local people also have a part to play in preventing, detecting, and reporting abuse.

What does this mean for the adult?

Staff look after your personal information and only share it when this helps to keep you safe.

Principle 6: Accountability

What does this mean?

Safeguarding is everybody's business. Everyone must accept that we are all accountable as individuals, services and as organisations.

Roles and responsibilities must be clear so that people can see and check how safeguarding is done.

What does this mean for the adult?

You know what all the different people should do to keep you safe.