

# Brampton & District 50+ Forum

## Safeguarding Adults Policy

Document Control	
<b>Name:</b>	Safeguarding Vulnerable Adults Policy
<b>Applicable To:</b>	All staff, contractors, trustees, volunteers, and users
<b>Date Approved:</b>	20 <sup>th</sup> April 2023
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### 1. Policy Statement

This policy exists to ensure that Brampton & District 50+ Forum implements appropriate arrangements, systems, and procedures to ensure that the organisation has the right skills, means, and resources to protect and safeguard adults.

Brampton & District 50+ Forum recognises that safeguarding means protecting an adult's right to live in safety, free from abuse and neglect.

### 2. Aim

**The Care Act (2014) provides a definition and framework for Safeguarding Adults.**

Safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect while at the same time making sure that the adult's well-being is promoted, including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear, or unrealistic about their personal circumstances.

**The aims of adult safeguarding are to:**

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

### 3. Legislation – The Care Act (2014)

#### Safeguarding Duties

The Care Act (2014) introduced statutory safeguarding duties. The safeguarding duties apply to an adult who:

- a) Has needs for care and support (whether or not the authority is meeting any of those needs).
- b) Is experiencing, or is at risk of, abuse or neglect; and
- c) As a result of those needs, is unable to protect him or herself against the abuse or neglect or the risk of it.

#### 4. Key Principles for Adult Safeguarding

In the safeguarding of adults, Brampton & District 50+ Forum is guided by the principles set out in The Care Act (2014) and aims to demonstrate and promote these principles in our work:

- **Empowerment** – People being supported and encouraged to make their own decisions and to have informed consent.
- **Prevention** – It is better to take action before harm occurs.
- **Proportionality** – The least intrusive response appropriate to the risk presented.
- **Protection** – Support and representation for those in greatest need.
- **Partnership** – Local solutions through services working with their communities. Communities have a part to play in preventing, detecting, and reporting neglect and abuse.
- **Accountability** – Accountability and transparency in delivering safeguarding.

#### 5. Recognising the signs of abuse

Staff and volunteers may be particularly well placed to spot abuse and neglect, i.e., the adult may say or do things that hint that all is not well. It may come in the form of a complaint or an expression of concern. Everyone within the organisation should understand what to do and where to go locally to get help, support, and advice. It is vital that everyone within the organisation is vigilant on behalf of those unable to protect themselves, including:

- Knowing about different types of abuse and neglect and their signs.
- Supporting adults to keep safe.
- Knowing whom to tell about suspected abuse or neglect; and
- Supporting adults to think and weigh up the risks and benefits of different options when exercising choice and control.

The Care Act (2014) defines the following areas of abuse and neglect; they are not exhaustive but are a guide to behaviour that may lead to a safeguarding enquiry. This includes:

##### **Physical Abuse**

The physical mistreatment of one person by another, which may or may not result in physical injury. This may include slapping, burning, punching, unreasonable confinement, pinching, force-feeding, misuse of medication, shaking, and inappropriate moving and handling.

##### *Signs and indicators*

Over or underuse of medication, burns in unusual places, i.e., hands, soles of feet etc., sudden incontinence, bruising at various healing stages, bite marks, disclosure, bruising in

the shape of objects, unexplained injuries or those that go untreated, reluctance to uncover parts of the body.

### **Sexual Abuse**

Any form of sexual activity that the adult does not want and or has not consented to, a sexual relationship instigated by those in a position of trust, rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.

#### *Signs and indicators*

Signs of being abused may include recoiling from physical contact, genital discharge, fear of males or females, inappropriate sexual behaviour in presence of others, bruising to thighs, disclosure, and pregnancy. Abusers may take longer with personal care tasks, use offensive language, work alone with clients, or show favouritism to clients.

### **Financial or Material Abuse**

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

#### *Signs and indicators*

This may include not allowing a person to access their money, not spending an allocated allowance on the individual, theft from the individual, theft of property, and misuse of benefits. There may also be an over-protection of money, forged signatures, disclosure, inability to pay bills, lack of money after payments of benefits or unexplained withdrawals. An abuser may be evasive when discussing finances, goods purchased may be in the possession of the abuser, and there may be an over-keenness in participating in activities involving individuals' money.

### **Psychological and/or Emotional Abuse**

This abuse may involve the use of intimidation, indifference, hostility, rejection, threats of harm or abandonment, humiliation, verbal abuse such as shouting, swearing or the use of discriminatory and or oppressive language. A deprivation of contact, blaming, controlling, coercion, harassment, cyberbullying, name-calling, isolation or unreasonable and unjustified withdrawal of services or supportive networks. There may be a restriction of freedom, access to personal hygiene, a threat to withdraw care or support, a threat of institutional care, the use of bribes or threats, or choices being neglected.

#### *Signs and indicators*

Stress and or anxiety in response to certain people, disclosure, compulsive behaviour, reduction in skills and concentration, lack of trust, lack of self-esteem, someone may be frightened of other individuals, and there may be changes in sleep patterns.

### **Neglect and Acts of Omission**

Behaviour by carers that results in the persistent or severe failure to meet the physical and

or psychological needs of an individual in their care. This may include ignoring medical, emotional or physical care needs, failure to provide access to appropriate healthcare and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating, wilful failure to intervene or failure to consider the implications of non-intervention in behaviours which are dangerous to them or others, failure to use agreed risk management procedures, inadequate care in the residential setting, withholding affection or communication, denying access to services,

#### *Signs and indicators*

There may be disclosure. Someone being abused may have low self-esteem, deterioration, depression, isolation, continence problems, sleep disturbances, and pressure ulcers. There may be a seemingly uncertain attitude and cold detachment from a carer, denying individual's requests, lack of consideration to the individual's request, denying others access to the individual health care professionals.

#### **Self-Neglect**

This covers a wide range of behaviour, for example, neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding.

#### **Discriminatory Abuse**

This includes forms of harassment, slurs, or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation, and religion or health status and may be the motivating factor in other forms of abuse. It can be personal, a hate crime or institutional.

#### *Signs and indicators*

There may be a withdrawal or rejection of culturally appropriate services e.g., food, mixed-gender groups or activities etc. Individuals may agree with the abuser for an easier life, there may be disclosure, or someone may display low self-esteem. An abuser may react by saying, "I treat everyone the same", have inappropriate nicknames, be uncooperative, use derogatory language, or deny someone social and cultural contact.

#### **Institutional or Organisational Abuse**

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

#### *Signs and indicators*

This may include a system that condones poor practice, a deprived environment, lack of procedures for staff, no or little evidence of training, lack of staff support/supervision, lack of privacy or personal care, repeated unaddressed incidents of poor practice, lack of homely environment, manager implicated in poor practice. There may be a lack of personal clothing, no support plan, lack of stimulation, repeated falls, repeated infections, unexplained bruises/burns, pressure ulcers, and unauthorised deprivation of liberty. Abusers may have a lack of understanding of a person's disability, misuse medication, use illegal controls and restraints, display undue/inappropriate physical intervention, and inappropriately use power/control.

## **Domestic Abuse**

The cross-government definition of domestic violence and abuse is any incident or pattern of incidents of controlling, coercive, 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. The abuse can encompass, but is not limited to:

- Psychological
- Sexual
- Financial
- Emotional

A new offence of coercive and controlling behaviour in intimate and familial relationships was introduced into the Serious Crime Act (2015). The offence will impose a maximum of 5 years imprisonment, a fine or both.

### *Signs and indicators*

May include many of those indicators listed under previous categories in this document, including unexplained bruising, withdrawal from activities, work, or volunteering, not being in control of finances, or decision-making.

## **Modern Slavery**

Encompasses slavery, human trafficking, and forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.

### *Signs and indicators*

There may be signs of physical or psychological abuse; victims may look malnourished or unkempt, or appear withdrawn. Victims may rarely be allowed to travel on their own, seem under the control or influence of others, and rarely interact or appear unfamiliar with their neighbourhood or where they work. They may be living in dirty, cramped or overcrowded accommodations and/or living and working at the same address. Victims may have no identification documents, have few personal possessions and always wear the same clothes day in and day out. What clothes they do wear may not be suitable for their work. People may have little opportunity to move freely and may have had their travel documents retained, e.g. passports. They may be dropped off/collected for work on a regular basis, either very early or late at night. Victims may avoid eye contact, appear frightened or hesitant to talk to strangers and fear law enforcers for many reasons, such as not knowing whom to trust or where to get help, fear of deportation, fear of violence to them or their family.

## **Radicalisation to Terrorism**

The Government, through its PREVENT programme, has highlighted how some adults may be vulnerable to radicalisation and involvement in terrorism. This can include the exploitation of vulnerable people and involving them in extremist activity. Radicalisation can be described as a process by which a person, to an increasing extent, accepts the use of undemocratic or violent means, including terrorism, in an attempt to reach a specific political/ideological objective. Vulnerable individuals being targeted for radicalisation/recruitment into violent extremism is viewed as a safeguarding issue.

### *Signs and indicators*

This may include being in contact with extremist recruiters; articulating support for violent extremist causes or leaders; accessing violent extremist websites, especially those with a social networking element; possessing violent extremist literature; using extremist narratives to explain personal disadvantage; justifying the use of violence to solve societal issues; joining extremist organisations, and significant changes to appearance and/or behaviour.

## **Who Might Abuse?**

Abuse of adults at risk may be perpetrated by a wide range of people, including relatives, family members, professional staff, paid care workers, volunteers, other service users, neighbours, friends and associates, and people who deliberately exploit vulnerable people and strangers.

Incidents of abuse may be one-off or multiple and affect one person or more. Professionals and others should look beyond single incidents or individuals to identify patterns of harm.

Patterns of abuse vary and include:

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

## **6. Prevention of Abuse**

### **6.1 Promoting Adult Safeguarding within Brampton & District 50+ Forum**

To assist in the prevention of abuse, the following factors should be considered:

- Rigorous recruitment practices (including volunteers).
- Internal guidelines for staff and volunteers.
- Training.
- Making Safeguarding Personal and empowering service users.

### **6.2 Safe Recruitment & Selection**

Brampton & District 50+ Forum ensures that all potential new staff, volunteers, and trustees:

- Complete an application form or a letter of application. This includes:
  - Address.
  - Evidence of relevant qualifications.
  - Paid work and voluntary work experience.
  - Criminal convictions.
- Provide two pieces of identification which confirm both identity and address.
- Undergo an interview (formal or informal) involving at least two interviewers.
- Provide at least two references which are followed up before a post is offered. One reference is from the last employer or an organisation that has knowledge of the applicant's work.

If undertaking a regulated activity, or if their post is eligible, staff and volunteers must consent to a Disclosure and Barring Service check, which will be updated regularly.

Brampton & District 50+ Forum understands that:

- A person who is barred from working with children or vulnerable adults is breaking the law if they work or volunteer or try to work or volunteer with these groups.
- An organisation which knowingly employs someone who is barred to work with those groups will also be breaking the law.
- If our organisation dismisses a member of staff or volunteer because they have harmed a child or vulnerable adult or would have done so if they had not left, we must make a referral to the Disclosure and Barring Service.

### **6.3 Management & Support of Paid Staff & Volunteers**

Brampton & District 50+ Forum has the following items in place for managing its staff and volunteers:

- All staff and volunteers are provided with a job description (paid staff) or a role description (volunteers) outlining their main responsibilities. This includes a requirement to comply with the Safeguarding Policy.
- All paid staff and volunteers complete a role review at the end of their induction period before being confirmed in post. Inductions will be completed within 6 months.
- All paid staff are provided with a supervision opportunity by their line manager or another appropriate organisational member.
- All volunteers are provided with regular support sessions.
- Brampton & District 50+ Forum's disciplinary and grievance procedures are implemented for all paid staff, which comply with the ACAS Code of Practice.
- All trustees, paid staff, and volunteers attend regular safeguarding training appropriate to their role.
- All trustees, paid staff, and volunteers receive an induction, which includes information on the organisation's policies and procedures.

### **6.4 Code of Conduct**

We have a Code of Conduct in place for:

- Trustees
- Staff and volunteers

### **6.5 Training**

Brampton & District 50+ Forum will promote awareness of Adult Safeguarding issues to its trustees, staff, volunteers, broader membership, and services users as appropriate. Trustees, staff and volunteers all receive Adult Safeguarding training appropriate to their role.

For all staff who are working or volunteering with adults at risk, this requires them, as a minimum, to have awareness training that enables them to:

- Understand what safeguarding is and their role in Safeguarding Adults.
- Recognise an adult potentially in need of safeguarding and take action.
- Understand the procedures for making a safeguarding alert.
- Understand dignity and respect when working with individuals.
- Have knowledge of policy, procedures and legislation that supports safeguarding adults' activity.

## 6.6 Making Safeguarding Personal

Making safeguarding personal means that it should be person-led and outcome-focused. It engages the person in a conversation about how best to respond to their safeguarding situation in a way that enhances involvement, choice, and control, as well as improving quality of life, well-being and safety.

We aim to empower our service users and provide them with the information they need to make decisions about how to be safe from abuse and reduce risks. We recognise that adults may make decisions that might be perceived as risky or unwise. Adults must be assumed to have the capacity to make their own decisions and be given all practicable help before anyone treats them as not being able to make their own decisions. Where an adult is found to lack the capacity to make a decision, then any action taken, or any decision made for or on their behalf must be made in their best interests.

We need to understand and always work in line with the Mental Capacity Act 2005 (MCA) and seek support and guidance when we have concerns regarding an adult's capacity.

## 7. Reporting Procedures

The following procedure refers to abuse or suspicion of abuse of that staff and volunteers become aware of during their work with Brampton & District 50+ Forum. Any member of staff or volunteer who becomes aware that an adult is or is at risk of being abused or has safeguarding needs should raise the matter immediately with their supervisor /or with the designated safeguarding lead.

Early sharing of information is the key to providing an effective response where there are emerging concerns. To ensure effective safeguarding arrangements, no member of staff or volunteer should assume that someone else will pass on information which they think may be critical to the safety and well-being of the adult.

Brampton & District 50+ Forum will:

- Inform the adult of the action we propose to take.
- Seek their agreement for any referral.
- Ensure that they are kept informed about what will happen next, so they can be reassured about what to expect.
- Endeavour to ensure that they are safe and supported before proceeding with any other action.
- Inform the adult if Brampton & District 50+ Forum are planning to seek advice from or report concerns to an external agency.

### Reporting

Report abuse or neglect by telephone or email using the details below.

#### **Carlisle**

3rd Floor, Cumbria House, 117 Botchergate, Carlisle, CA1 1RD.  
Tel: 0300 303 3249

The Area Contact will pass on reported concerns to the Cumbria Safeguarding Adults Team, who will make a decision regarding the best course of action. In certain circumstances, another appropriate authority may need to be involved, e.g., Adult Social Care, Police, Health and Safety Executive, etc. If this is the case, their involvement will be coordinated by



the Cumbria Safeguarding Adults Team.

**For emergencies outside normal office hours, please get in touch with the Emergency Duty Team (Adult Social Care) at 01228 526690.**

**There are some cases that require an urgent response:**

- If you suspect a serious criminal act has taken place, telephone 999. Tell them if you think it might be adult abuse.
- If the individual is injured, seek immediate medical treatment. Tell the ambulance personnel or A&E staff that this is a potential adult abuse situation.

## **8. Child Protection**

If at any time you become concerned that a child might be at risk, you need to follow the Child Protection Procedure outlined in the Brampton & District 50+ Forum Safeguarding Children Policy.

Contact one of the designated safeguarding leads, or if you cannot contact them, go straight to the Cumbria Local Safeguarding Children Board, telephone: 0333 240 1727.

**If a child is in immediate danger of being harmed, the police should be called on 999.**

## **9. Recording**

A written record must be kept in regard to any concern regarding an adult with safeguarding needs. This must include details of the person involved, the nature of the concern and the actions taken.

The recordings must be signed and dated. All records must be securely and confidentially filed.

## **10. Designated Safeguarding Leads**

<b>Name</b>	<b>Position</b>	<b>Contact</b>
Ann Oswin	Chair	ann.oswin@btinternet.com 01228 675684
Ivan Whetton	Treasurer	woodleigh@gmx.com 016977 2957

### Stage 7 Review

The purpose of the Review is to check if the agreed actions in the Safeguarding Plan have taken place and whether any further action is needed.

At the conclusion of an investigation, or at a Case Conference, a decision should be made of whether the Safeguarding plan should be reviewed within the Safeguarding Process. This should be the case whenever there is on-going risk of harm from Abuse.

The frequency of the review should be decided based on the situation and level of risk

### Stage 6 Case Conference / Safeguarding Planning Meeting

Co-ordinating a multi-agency response to the risk of abuse that has been identified. All information gathered during the investigation will be presented at a **Multi-Agency Safeguarding Planning Meeting** where, if appropriate, a **Safeguarding Plan** will be agreed. The meeting and the Plan will be recorded on the correct template.

### Stage 5 Investigation

Co-ordinating the collection of information about abuse or neglect that has occurred or might occur. This may include a criminal or disciplinary investigation.

- Establish matters of fact
- Provide a professional analysis of risk
- Provide rationale and inform decisions about any follow up action
- Produce a report

### Stage 1 Raising an Alert

**Raising an Alert:** Anyone who becomes aware of concerns of Abuse must report those concerns as soon as possible and in any case within the same working day to the relevant manager identified in their agency procedures.

### Adult Safeguarding

Safeguarding Duties apply to an adult who:

- Has needs for care and support
- Is experiencing, or is 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

Abuse or neglect includes:

- Physical abuse
- Psychological Abuse
- Domestic Violence
- Sexual abuse
- Financial and material abuse
- Modern Slavery
- Discriminatory abuse
- Neglect or acts of omission
- Organisational abuse
- Self neglect

Care Act 2014

### Closure to Adult Safeguarding Process

Recording and monitoring the Safeguarding Adults process and its outcomes.

The aim is to establish:

- With the person to what extent their aims/wishes/outcomes have been achieved
- What difference did the safeguarding process make?

### Stage 2 Reporting an alert / Duty to Enquire

**Enquiry:** the local authority must make enquiries, or require another agency to do so, whenever abuse or neglect are suspected in relation to an adult with care and support needs.

Gathering information about a concern by consulting agencies and undertaking a further risk assessment.

Upon receiving a Referral, Adult Social Care must gather as much information as possible from the referrer, multi-agency partners, the adult concerned and previous records

### Stage 3 Assessment / Applying Thresholds

The Local Authority Adult Social Care manager will make the following decisions and take the following actions about the Referral. This is called the decision stage and should occur within one working day of receiving the alert

- Is the referral appropriate?
- Should a safeguarding enquiry proceed? If not, what other routes of referral or action would be appropriate and who would initiate these?

### Stage 4 Strategy discussion or meeting

Formulating a multi-agency plan for assessing the risk, addressing any immediate protection needs and agreeing a plan for any further investigation or assessment.

This may be in the form of a meeting or by telephone contact, depending on the urgency of the situation.

Decisions and actions:

- Who will lead the investigation?
- Ensure a robust plan is in place to safeguard any adults with care and support needs who may be at risk

Minutes of the meeting must be recorded on the correct template.