

# **Safeguarding for Adults at Risk**

## **Policy and Procedure**

**Sept 2018**

**Spiral Sussex**  
**Safeguarding Adults at Risk**  
**Policy and Procedure**

This policy and procedure has been approved by the Trustees Committee of Spiral Sussex which are responsible for its review.

The original signed copy of this policy and procedure is kept at Spiral Sussex's office.

Signed: Mark Shanahan

Date: 18<sup>th</sup> September 2018

Name: Mr Mark Shanahan

Chair of Trustees:

Signed: Marc Blackwell

Date: 18<sup>th</sup> September 2018

Name: Mr Marc Blackwell

Trustee

Record of adoption and review of this policy and procedure:-

- Adopted:
- To be reviewed: (+2 years from the adopted date)

## **Safeguarding Adults at Risk Policy and Procedure**

**This Policy should forms a part of the “Spiral Sussex Safeguarding Adults and Children at Risk Combined” Policy and Procedure.**

### **Safeguarding at Risk Policy Statement**

The Care Act 2014 was a major step forward in safeguarding adults who are experiencing, or are at risk of, abuse or neglect, and are unable to protect themselves. Sections 42 to 47 of the Care Act set out the legal duties and responsibilities in relation to adult safeguarding.

The legal framework for the Care Act 2014 is supported by Care and Support Statutory Guidance which provides information and guidance about how the Care Act should operate in practice. The guidance has statutory status which means that there is a legal duty to have regard to it when working with adults with needs for care and support and carers.

Safeguarding means protecting an adult’s right to live in safety, free from abuse and neglect. It is about working together to support people to make decisions about the risks they face in their own lives and protecting those who lack the mental capacity to make those decisions.

The aims of adult safeguarding are to:

- Prevent harm and reduce the risk of abuse or neglect to adults with care and support needs.
- Stop abuse or neglect wherever possible.
- Safeguard adults in a way that supports them in making choices and having control about how they want to live.

- Promote an approach that concentrates on improving life for the adults concerned.
- Raise public awareness so that communities 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 wellbeing of an adult.

Ref Sussex Multi Agency Policy and Procedures for the Protection of Adults at Risk June 2018 It is the belief of Spiral that the safety and wellbeing of all participants is given paramount consideration. All members of staff share in the responsibility for protecting these adults from abuse while attending Spiral.

### **Spiral is committed to:**

- Continuing to develop and promote a culture that does not tolerate abuse, neglect and exploitation.
- Raise awareness about safeguarding adults.
- Prevent abuse, neglect and exploitation from happening wherever possible.

### **Making Safeguarding Personal**

Making Safeguarding Personal (MSP) is a national approach to promote responses to safeguarding situations in a way that enhances involvement, choice and control as well as improving quality of life, wellbeing and safety. It is about seeing people as experts in their own lives and working alongside them to identify the outcomes they want, with the aim of enabling them to resolve their circumstances and support their recovery. Making Safeguarding Personal is also about collecting information about the extent to which this shift has a positive impact on people's lives. People are individuals with a variety of different preferences, histories, circumstances and life-styles.

Safeguarding arrangements must not prescribe a process to be followed whenever a concern is raised, but rather Making Safeguarding Personal emphasises the importance of a person-centred approach, adopting the principle of 'no decision about me without me'. Personalised care and support is for everyone, but some people will need more support than others to make choices and manage risks. A person led approach is supported by personalised information and advice and, where needed, access to advocacy support.

### **Key Principles of Safeguarding Adults at Risk**

The Care Act and the Care Act guidance sets out the statutory requirement for all agencies to both develop and assess the effectiveness of their safeguarding arrangements. This is based on the six key principles below.

- **Empowerment**- People being supported and encouraged to make their own decisions and give 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.

These six principles should inform the ways in which we work with the Adult participants at Spiral. They apply to all sectors and settings including care and support services, further education colleges, commissioning, regulation and provision of health and care services, social work, healthcare, welfare benefits, housing, wider local

authority functions and the criminal justice system. These principles are also used by Safeguarding Adults Boards (SABs) and organisations to develop and improve local arrangements.

## **Preventing Harm & Abuse**

The most effective way to safeguard adults from abuse is to enable them to safeguard themselves. For some people this may involve their own support networks, or support or care services, depending on their individual circumstances.

Effective prevention in safeguarding is not about over-protective or risk averse practice. The prevention of abuse should occur in the context of person-centred support and personalisation, with individuals empowered to make choices and be supported to manage risks.

Prevention of abuse includes multi-agency working (including information sharing), community safety, community participation and public awareness, as well as awareness raising and skills development with adults at risk. There are many ways in which we can support participants to reduce the risks they may face, including:

- Recognising potential risks to themselves and considering how they wish to reduce the risks of being harmed or exploited.
- Identifying what strengths, skills, support and networks they could use to avoid potentially abusive situations.
- Being aware of what to do if an abusive situation arises i.e. how to get help, how to report concerns. Spiral will endeavour to reduce the risks that participants may face as far as practicably possible by ensuring:
  - Robust staff recruitment and vetting.
  - Producing and implementing policies and procedures staff work to, including confidential reporting (whistle-blowing) and complaints procedures.

- Ensuring all new staff undertake a thorough staff induction and training, including safeguarding adults policy and procedures and awareness of abuse and how to raise safeguarding concerns.
- Ensuring all staff receive supervision and support.
- Adhering to professional codes of conduct or practice and relevant service standards e.g. compliance with standards as detailed by the Care Quality Commission.
- Meet our responsibilities for obtaining Disclosure & Barring Service (DBS) checks and referring to the DBS and relevant professional bodies.
- Meet our professional responsibilities under employment and other legislation.
- Have robust systems in place for training and support.

It is important to remember that although the process above are adhered to, this does not fully protect our participants. It is essential that staff regularly check and question the practice of their colleagues and raise any concerns with the safeguarding team.

### **Promoting Wellbeing**

Spiral aims to ensure that adult participants remain safeguarded from harm. This should underpin every activity. We will promote wellbeing when carrying out any of their care and support functions in respect of a participant. Wellbeing' is a broad concept, and it is described as relating to the following areas:

- Personal dignity (including treatment of the individual with respect).
- Physical and mental health and emotional wellbeing.
- Protection from abuse and neglect.
- Control by the individual over their day-to-day life.
- Participation in work, education, training or recreation.
- Social and economic wellbeing.
- Domestic, family and personal.

- Suitability of accommodation.
- The individual's contribution to society.

### **What is abuse?**

Abuse can happen in any relationship and may result in significant harm to, or exploitation of, the person subjected to it.

Abuse may:

- consist of a single act or repeated acts
- be physical, verbal or psychological
- be an act of neglect or an omission to act
- occur when an Adult at Risk is persuaded to enter into a financial or sexual transaction to which he or she has not consented or cannot consent.

### **Who may be at risk of abuse or neglect?**

Under the Care Act 2014, specific adult safeguarding duties apply to any adult (18 years or over) who:

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

### **Why and where does abuse occur?**

Abuse can occur for a number of reasons that may be inter-related and complex. The following factors could indicate that an adult may be at risk of abuse, due to their situation or circumstances. (these lists are not exhaustive)

The individual

- poor communication or communication difficulties
- physical and / or emotional dependence on others



- mental health needs
  - lacking capacity to make key decisions.
  - rejection of help
  - history of making allegations of abuse
  - high level of reliance on others to meet their care needs or manage their financial affairs
  - history of violent relationships within the family or social networks.
- The environment
- overcrowding
  - poor or insecure living conditions, homelessness
  - poor management and / or high staff turnover or insufficient staff
  - other adults with challenging behaviour Relationships
  - unequal power relationships (that include controlling, coercive or threatening behaviour) • increased reliance on others by the person
  - multi-generational family structure where conflicts of interest and loyalties may exist
  - role reversal or significant change in the relationship between the person and their carer
  - history of abuse within the family, either being abused or responsible for previous abuse
  - isolation of the carer, due to the demands of caring, leading to a lack of practical and emotional support
  - lack of understanding about the person's condition, resulting in inappropriate care;
  - reliance on the person by others
  - difficult or challenging behaviour by the person which the carer finds intolerable or stressful, or which puts the carer at risk
  - financial difficulties

- illness or disability of the carer
- significant and long-term stress of the carer
- inappropriate care responses eg. poor quality care, support or treatment Abuse can include targeted fraud or scams perpetrated by complete strangers, or the person responsible for abuse can be someone known to the adult who is in a position of trust and power.

### **The Aims of Safeguarding Adults at Spiral**

- Stop abuse or neglect wherever possible;
- Prevent harm and reduce the risk of abuse or neglect to all adult participants.
- Safeguard participants in a way that supports them in making choices and having control about how they want to live;
- Promote an approach that concentrates on improving the life for the participants concerned;
- Educate participants across all settings to help them understand the different types of abuse, how to stay safe and how to raise a concern about their own or another participant's safety and wellbeing
- Support the staff team to understand abuse, how to support the participants to maintain safety and how to raise a concern.
- Address (if appropriate) what has caused the abuse or neglect and encourage proactive working to implement strategies to prevent abuse re-occurring.

### **To achieve these aims it is necessary to:**

- Ensure that everyone, is clear about their roles and responsibilities;
- Enable participants to access mainstream community resources such as leisure facilities, safe town centres and community groups that can reduce the social and physical isolation which in itself may increase the risk of abuse or neglect;

Safeguarding is not a substitute for the need to provide safe and high quality care and support.

## **Types of Abuse**

It is possible and likely that someone can experience more than one type of abuse, for example, Financial Abuse and Physical Abuse or, Psychological Abuse as a result of Physical abuse. The impact of abusive behaviour may be greater when there is a disproportionate balance of power involved, for example, when an adult is reliant on another person for providing their care. Categories of Abuse This is not intended to be an exhaustive list, but a guide as to the sort of issues or behaviour which could give rise to a safeguarding concern. Abuse can take many forms and we should always consider the circumstances of individual cases.

## **What constitutes abuse?**

Abuse is defined as:

“a violation of an individual’s human and civil rights by any other person or persons which results in significant harm” (ref: Protection of Adults at Risk).

Abuse is any action that causes significant harm. The impact rather than the intent is of principle concern. Increasingly, abuse can also happen online.

Abuse may occur as:

- A single or repeated act
- An act of neglect or non-action
- Multiple acts that may be suffered at the same time, for example an adult at risk may be being physically abused and suffering from institutional abuse

Abuse can take various forms and can include the following categories:

<b>Abuse type:</b>	<b>Behaviour includes:</b>
<b>Physical</b>	Being pushed, shaken, pinched, hit, held down, locked in a room, restrained inappropriately, or knowingly giving an adult too much or not enough medication.
<b>Sexual</b>	an adult being made to take part in sexual activity when they do not, or cannot, consent to this. It includes rape, indecent exposure, inappropriate looking or touching, or sexual activity where the other person is in a position of power or authority.
<b>Financial</b>	misusing or stealing an adult's money or belongings, fraud, postal or internet scams tricking adults out of money, or pressuring an adult into making decisions about their financial affairs, including decisions involving wills and property.
<b>Neglect</b>	not meeting an adult's physical, medical or emotional needs, either deliberately, or by failing to understand these. It includes ignoring an adult's needs, or not providing them with essential things to meet their needs, such as medication, food, water, shelter and warmth.
<b>Self-neglect</b>	being unable, or unwilling, to care for their own essential needs, including their health or surroundings (for example, their home may be infested by rats or very unclean, or there may be a fire risk due to their obsessive hoarding).
<b>Psychological or emotional</b>	being shouted at, ridiculed or bullied, threatened, humiliated, blamed for something they haven't done, or controlled by intimidation or fear. It includes harassment, verbal abuse, cyber-bullying (bullying which takes place online or through a mobile phone) and isolation.
<b>Discriminatory</b>	forms of harassment, ill-treatment, threats or insults because of an adult's race, age, culture, gender, gender identity, religion, sexuality, physical or learning disability, or mental-health needs. Discriminatory abuse can also be called 'hate crime'.
<b>Modern slavery</b>	an adult being forced to work for little or no pay (including in the sex trade), being held against their will, tortured, abused or treated badly by others.
<b>Domestic violence</b>	psychological, physical, sexual, financial or emotional abuse by someone who is a family member or is, or has been, in a close relationship with the adult being abused. This may be a one-off incident or a pattern of incidents or threats, violence, controlling or coercive behaviour. It also includes so called 'honour' based violence, being forced to marry or undergo genital mutilation.
<b>Organisational</b>	neglect and providing poor care in a care setting such as a hospital or care home, or in an adult's own home. This may be a one-off incident, repeated incidents or on-going ill-treatment. It could be due to neglect or poor care because of the arrangements, processes and practices in an organisation.

## **Scenarios in which abuse may take place**

### **Controlling or coercive behaviour:**

This is a range of acts designed to make a person subordinate and / or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour. Section 76 of the Serious Crime Act 2015 has created an offence in relation to coercive control within domestic abuse and sets out the importance of recognising the harm and cumulative impact on the victim caused by these patterns of behaviour.

### **Stalking and Harassment:**

Stalking refers to unwanted, persistent or obsessive attention by an individual or group towards another person causing fear, anxiety, emotional or psychological distress to the victim. Harassment can include repeated attempts to impose unwanted communications and contact upon a victim in a manner which causes fear or distress to the victim. Stalking and harassment behaviours may include nuisance telephone calls, sending excessive emails, regularly sending gifts, following the person or spying on them and making death threats. The Protection from Harassment Act 1997 makes stalking a specific offence.

### **Hate Crime:**

is defined as any crime that is perceived by the victim, or any other person, to be racist, homophobic, transphobic or due to a person's religion, belief, gender identity or disability. It should be noted that this definition is based on the perception of the victim or anyone else and is not reliant on evidence. Such incidents may constitute a criminal offence.

### **Cuckooing:**

is a form of crime in which drug dealers take over the home of a vulnerable person in order to use it as a base for criminal activity. Organised criminal groups are increasingly targeting adults with care and support needs in this way, and the level of coercion and control involved with cuckooing often leaves the victims with little choice but to cooperate with the perpetrators.

## **County Lines:**

is the police term for groups who are supplying drugs to suburban areas and market and coastal towns using dedicated mobile phone lines or “deal lines”. It can involve child criminal exploitation and using adults who are vulnerable to move drugs and money. Groups establish a base in the market location, typically by taking over the homes of local adults by force or coercion in a practice referred to as ‘cuckooing’. The Home Office County Lines guidance describes County Lines as a major, crosscutting issue involving drugs, violence, safeguarding, criminal and sexual exploitation, modern slavery, and missing persons. The response to tackle this activity involves the police, the National Crime Agency, a wide range of government departments, local government agencies, voluntary and community organisations and groups. County Lines activity and the associated violence, drug dealing and exploitation have a devastating impact on young people, adults at risk of exploitation and local communities.

## **‘Honour’-based violence:**

is a crime or incident which may have been committed to protect or defend the perceived ‘honour’ of the family and / or community. Women are predominantly (but not exclusively) the victims and the violence is often committed with a degree of collusion from family members and / or the community. Many victims are so isolated and controlled that they are unable to contact the police or other organisations.

## **Forced marriage:**

is a term used to describe a marriage in which one or both of the parties are married without their consent or against their will. A forced marriage differs from an arranged marriage, in which both parties consent to the assistance of their parents or a third party in identifying a spouse. Forced marriage can be a particular risk for people with learning disabilities and people lacking capacity.

## **Female genital mutilation (FGM):**

involves procedures that include the partial or total removal of the external female genital organs for cultural or other non-therapeutic reasons. The

practice is medically unnecessary, extremely painful and has serious health consequences, both at the time when the mutilation is carried out and in later life. The age at which girls undergo FGM varies enormously according to the community. The procedure may be carried out when the girl is first born, during childhood or adolescence, just before marriage or during the first pregnancy. FGM constitutes a form of abuse and violence against women and girls. In England and Wales the practice is illegal under the Female Genital Mutilation Act 2003.

### **Sexual Exploitation:**

involves exploitative situations, contexts and relationships where adults at risk (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. It affects men as well as women. People who are sexually exploited do not always perceive that they are being exploited. Those exploiting the adult have power over them such as by virtue of their age, gender, physical strength, and economic or other resources. There is a distinct inequality in the relationship.

### **Extremism by Radicalisation:**

Prevent is a key part of the government's counterterrorism strategy. Its aim is to stop people becoming terrorists, or supporting terrorism, including preventing the exploitation of susceptible people who are at risk of being drawn into violent extremism by radicalisation.

### **Sexual and Violent Offenders:**

Multi-Agency Public Protection Arrangements (MAPPA) is a framework to reduce the risks posed by sexual and violent offenders in order to protect the public, including previous victims, from serious harm.

### **Abuse by children:**

If a child or children is / are causing harm to an adult, this should be dealt with under the safeguarding adults' policy and procedures but will also need to involve the local authority Children's Services.

## **Where can abuse occur?**

Abuse can take place in any context. It may occur when an Adult at Risk lives alone or with a relative, it may also occur within a nursing, residential or day care setting, in hospitals, custodial situations, support services into people's own homes and other places previously assumed safe.

## **Where the Person Responsible for the Abuse is an Adult with Care and Support needs themselves:**

Abuse is unacceptable, regardless of the individual's capacity to understand or be responsible for their actions. In some situations, the person responsible for abuse may also be an adult with care and support needs. This could leave them at risk eg. due to retaliation or loss of care or support. It is important to ensure that the needs of both adults involved are addressed. Abuse of this kind may indicate shortcomings or failings in the care or support arrangements in place for both individuals, and possibly for others. In this situation robust risk assessment and support planning is essential to ensure any future risks are minimised.

## **Consent and Involvement of the Adult in Raising a Safeguarding Concern**

Adults have a legal right to make decisions about their own lives. If the adult is not the person raising the safeguarding concern, wherever possible every effort should be made to seek their views and agreement regarding this, unless doing so is likely to increase the risk to them or to put others at risk. Adults who may be at risk of, or who are, experiencing abuse and neglect, may often feel disempowered by the abuse, and acting without involving them or seeking their consent will often disempower them further. Empowering adults in this situation involves a proactive approach to seeking consent and maximising the person's involvement in decisions about their care, safety and protection, and this includes decisions regarding whether to raise a safeguarding concern.



## **When an Adult Does Not Want Information Shared and there is a Professional Responsibility to do so**

Where an adult with capacity to make an informed decision about their own safety does not want any action taken, this does not override a professional's responsibility to raise a safeguarding concern and to share key information with relevant professionals in the circumstances outlined above. If there appears to be significant risk to the adult, and no one else, consideration would need to be given to whether their wishes should be overridden. The adult's wishes should not stop professionals from fulfilling their responsibilities in relation to duty of care regarding appropriate sharing of information. In these situations, the adult must always be:

- advised about what information will be shared, with whom and the reasons for this;
- advised that their views and wishes will be respected as far as possible by the local authority or other agencies in relation to any response they may have a duty to make;
- provided with information regarding what happens when a local authority is advised of a safeguarding concern;
- assured by the professional passing this information to the local authority, that their lack of consent to the information being shared, and their views and wishes regarding actions they do or do not want taken in relation to the situation as far as it affects them directly will also be explained to the local authority.

Professionals should be alert to the risk of situational incapacity, where a person who would otherwise have capacity no longer has it due to their circumstances.

## **Where an Offence may have been Committed**

If it is suspected that an offence may have been committed, there should always be a conversation with the adult regarding whether they wish the police to be involved. If the adult does not want the police to be involved this does not override a professional's responsibility to share information regarding a potential or actual offence with them. Such situations should

always be approached sensitively. The adult should be advised that the police will be contacted and assured that the police will be informed that they do not wish to pursue this matter or speak to the police. It is for the police to determine if they feel it is necessary for them to speak to the adult, or if there is further action they may need to pursue.

## **Adults who Lack Capacity to make Relevant Decisions**

If the adult lacks capacity to make informed decisions about the incident and their ability to maintain their safety and they do not want a safeguarding concern to be raised, and/or other action to be taken, professionals have a duty to act in their best interests under the Mental Capacity Act 2005. This requires a Best Interest decision to be made regarding whether a safeguarding concern should be raised. Adults who lack capacity need to be supported to be able to make informed choices if possible before a decision can be made and a best interest decision made on their behalf. This may be achieved in a variety of ways such as the help of a family member or friend (as long as they are not the person thought to be the cause of risk), an Advocate or Independent Mental Capacity Advocate, a language interpreter or other communication assistance or aid.

## **MENTAL CAPACITY ACT 2005**

The Mental Capacity Act 2005 is underpinned by a set of five key principles.

- A presumption of capacity - every adult has the right to make his or her own decisions and must be assumed to have capacity to do so unless it is proved otherwise.
- The right for individuals to be supported to make their own decisions – people must be given all appropriate help before anyone concludes that they cannot make their own decisions.
- That individuals must retain the right to make what might be seen as eccentric or unwise decisions.
- Best interests - anything done for or on behalf of people without capacity must be in their best interests.

- Least restrictive intervention – anything done for, or on behalf of people without capacity, should be the least restrictive of their basic rights and freedoms.

## **CONSENT**

A key issue in the protection of Adult at Risks is one of consent. Adult at Risks have a fundamental right to decide how they live their life and with whom they live. A person who is able to make decisions for their self is entitled to refuse protection. However if the person lacks mental capacity to make this decision or there is an overriding public interest, (e.g.: other Adults at Risk are at risk) the need for referral should be considered. Wherever possible, the Adult at Risk should be informed that a referral will be made and the reason for this.

## **BEST INTEREST**

Where there is an issue of whether the participant is able to give consent, a Best Interest meeting needs to be arranged as soon as possible so that all decisions are made in the best interest of the participant. Members of the Best Interest group may include;

- Trustees
- Session Manager (if Participant is resident)
- Key person
- Participant's Social Worker
- Parents/Carers
- The Participant

This will also have to include referral to the "Mental Capacity act".