



# **SAFEGUARDING ADULTS POLICY**

# June 2015

## 1. Introduction

### Aims

The aim of adult safeguarding is to:

- Prevent harm and reduce the risk of abuse or neglect to adults with care and support needs
- Safeguard individuals in a way that supports them in making choices and having control in how they choose to live their lives
- Promote an outcomes approach in safeguarding that works for people resulting in the best experience possible
- Raise public awareness so that professionals, other staff and communities as a whole play their part in preventing, identifying and responding to abuse and neglect

*Protecting adults at risk* represents the commitment of all staff (paid and unpaid) working within to work together with the Local Authority and other organisations to safeguard adults at risk.

The Meath Epilepsy Charity Safeguarding policy and procedures aim to make sure that:

- The need and interests of adults at risk are always respected and upheld
- The human rights of adults at risk are respected and upheld
- A proportionate, timely, professional and ethical response is made to any adult at risk who may be experiencing abuse
- All decisions and actions are taken in line with the principles of the Mental Capacity Act 2005
- The Safeguarding Clauses within the Care Act 2014 are adhered to

The Care Act 2014 (implemented in April 2015) identifies that the local authority has the lead role in coordinating the response to safeguard adults; however the Care Act recognizes that successful responses need to have effective multi-agency and multi-disciplinary working.

## 2. Making Safeguarding Personal

'No decision about me without me' means that an adult has the right to know about how The Meath Epilepsy Charity and other agencies can work with them to find the right solutions to keep people safe and support them in making informed choices. Making safeguarding personal means that an agency's work with adults should be person-led and outcome-focused. It means engaging 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, wellbeing and safety.

This person led approach to safeguarding leads to services which are: person centred and focused on the outcomes identified by the individual; planned, commissioned and delivered in a joined up way between organisations; responsive and which can be changed when required.

Personalised care and support is for everyone, but some people will need more support than others to make choices and manage risks. Making risks clear and understood is crucial to empowering and safeguarding adults and in recognising people as 'experts in their own lives'.

Safeguarding adults from abuse is everyone's responsibility and there is a duty to report all concerns. All employers and volunteers within The Meath Epilepsy Charity have a duty to protect the adult and take action to manage the immediate safety of the adult and to report the concerns in line with The Meath Epilepsy Charity Safeguarding Adults Policies and Procedures.

All staff and volunteers within The Meath Epilepsy Charity whatever the setting, have a key role in preventing abuse or neglect occurring and in taking action when concerns arise.

## 3. Principles and Values

### 3.1. Six key principles underpin all adult safeguarding work:

- **Empowerment** – Personalisation and the presumption of person-led decisions and informed consent
- **Prevention** – it is better to take action before harm occurs
- **Proportionality** – Proportionate and least intrusive responses response appropriate to the risk presented
- **Protection** – Support and representation for those in greatest need
- **Partnership** – Local solutions through services working with their communities
- **Accountability** – Accountability and transparency in delivering safeguarding

### 3.2. Adults at risk

- Services provided should be appropriate to the adult at risk and not discriminate because of disability, age, gender, sexual orientation, 'race', religion, culture or lifestyle
- The primary focus/point of decision making must be in discussion with the adult at risk, and the person must be supported to make choices.
- Adults at risk, must be offered advocacy services where the adult needs the support of an advocate to fully engage and be part of the decisions following a concern of abuse being reported and there is no one in the person's support that is appropriate to do this. **This is the responsibility of the local authority.**
- There is a presumption that adults have the mental capacity to make informed decisions about their lives. If someone has been assessed as **not** having mental capacity which is decision specific, decisions will be made in their best interests as set out in the Mental Capacity Act (MCA) 2005 and MCA Code of Practice
- Adults at risk should be given information, advice and support in a form that they can understand and have their views and what outcomes they want included in all forums that are making decisions about their lives
- All decisions taken by professionals about a person's life should be timely, reasonable, justified, proportionate and ethical and must be made in discussion with the adult or where appropriate, their advocate.

### 3.3. The Meath Epilepsy Charity staff working with adults at risk

- All staff (paid and unpaid) **must** understand their role and responsibilities in regard to this policy and procedure and must know how to recognise abuse and how to report and respond to it
- All staff (paid and unpaid) have a duty to report in a timely way any concerns or suspicions that an adult at risk is being or is at risk of being abused and to gain the consent of the adult where possible or where this is not possible, to make a best interest decision to report without consent
- **All concerns and suspicions that an adult at risk is being or is at risk of being abused by a member of staff or a volunteer, must be reported even if consent is absent**
- Actions to protect the adult from abuse should always be given a high priority with dignity, safety and the well-being of the individual a priority within the actions
- Concerns or allegations must be reported without delay and given a high priority
- As far as possible, The Meath Epilepsy Charity staff (paid and unpaid) must respect the rights of the person causing harm. If that person is also an adult at risk they must receive support and their needs must be addressed
- All staff (paid and unpaid) must undertake the relevant levels of safeguarding training in line with the Meath Epilepsy Charity training framework

### **3.4. Working together in safeguarding adults**

- All The Meath Epilepsy Charity staff (paid and unpaid) will contribute to effective inter-agency working and effective multi-disciplinary assessments and joint working partnerships in order to provide the most effective means of safeguarding adults
- Actions taken under the Multi Agency safeguarding procedures does not affect the obligation on The Meath Epilepsy Charity to comply with its statutory responsibilities such as notification to regulatory authorities under the Health and Social Care Act 2008/CQC Fundamental Standards, to comply with employment legislation
- The Meath Epilepsy Charity staff (paid and unpaid) may have information about adults who may be at risk from abuse and may be asked to share this where appropriate, with due regard to confidentiality

## **4. Adult(s) at risk and adult abuse**

### **4.1. Definition of an adult at risk**

**The Care Act 2014 defines an adult at risk who requires a safeguarding response as being someone who is:**

an adult who is aged 18 or over who has needs for care and support

AND

Is experiencing or at risk of, abuse or neglect?

AND

As a result of their care and support needs are unable to protect themselves from either the risk of, or the experience of abuse or neglect

'Local authority statutory adult safeguarding duties apply equally to those adults with care and support needs regardless of whether those needs are being met, who is meeting those needs, regardless of whether the adult lacks mental capacity or not, and regardless of setting, other than prisons and approved premises where prison governors and National Offender Management Service (NOMS) respectively have responsibility'.

## **4.2. Ill Treatment and Wilful neglect { new Offences }**

An allegation of abuse or neglect of an adult at risk who does not have capacity to consent on issues about their own safety must always be referred to the Local Authority as a safeguarding concern.

## **4.3. Consent**

The Meath Epilepsy Charity staff (paid and unpaid) must always seek the consent of the individual before taking any action or sharing personal information. However, there may be circumstances when consent cannot be obtained because the adult lacks the capacity to give it, but the best interests of the individual or others at risk, demand action.

If after discussion with the adult at risk who has mental capacity, they refuse any intervention; their wishes will be respected unless:

- There is a public interest, for example, not acting will put other adults or children at risk
- There is a duty of care to intervene, for example, a crime has been or may be committed
- The person alleged to have caused harm is employed in a position of trust ,such as a health or social care professional

**A person's refusal to give consent does not preclude The Meath Epilepsy Charity staff from sharing information with other relevant agencies.**

## **4.4. Types of Harm**

Abuse can be viewed in terms of the following categories:

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

## **4.5. Physical abuse**

This may be defined as 'the use of force, or any action, or inaction which results in pain or injury or a change in the person's natural physical state' or the 'non-accidental infliction of physical force that results in bodily injury, pain or impairment'. Examples of physical abuse include: hitting, slapping, pushing, pinching, shaking, scalding, misuse of medication, restraint or inappropriate physical sanctions

#### **4.5.1. Restraint**

Unlawful or inappropriate use of restraint or physical interventions and / or deprivation of liberty is physical abuse. There is a distinction to be drawn between restraint, restriction and deprivation of liberty. A judgement as to whether a person is being deprived of their liberty will depend on the particular circumstances of the case, taking into account the degree of intensity, type of restriction, duration, the effect and the manner of the implementation of the measure in question. In extreme circumstances unlawful or inappropriate use of restraint may constitute a criminal offence. Someone is using restraint if they use force, or threaten to use force, to make someone do something they are resisting, or where a person's freedom of movement is restricted, whether they are resisting or not.

Restraint covers a wide range of actions. It includes the use of active or passive means to ensure that the person concerned does something, or does not do something they want to do, for example, the use of key pads to prevent people from going where they want from a closed environment. Appropriate use of restraint can be justified to prevent harm to a person who lacks capacity as long as it is a proportionate response to the likelihood and seriousness of the harm. (refer to the [Meath Epilepsy Charity Restraint Policy](#))

#### **4.6. Sexual abuse**

Examples of sexual abuse/ sexual assault include: rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual innuendo, sexual photography, subjection to pornography or witnessing sexual acts, or sexual acts to which the adult has not consented or was pressured into consenting.

Rape and other sexual assaults are among the most serious offences investigated by the Police. The trauma that victims suffer presents unique challenges to any investigation. It is the responsibility of all staff to ensure that they are aware of their individual roles and responsibilities to maximise all evidential opportunities to assist any investigation of a sexual nature and the minimum standards required regarding immediate response, recording and reporting

In Spring 2011, a Sexual Assault Referral Centre (SARC) opened in Surrey. It is located at the Solace Centre, Cobham Community Hospital, 168 Portsmouth Road, Cobham, Surrey, KT11 1HT, Telephone Number 0845 519 6168.

Further information can be found at: <http://www.solacesarc.org.uk>

SARCs provide a safe location where victims of sexual assault can receive medical care and psychological support, information and access to counselling, legal advice, meeting points with police and forensic examiners, emergency contraception, and screening for sexually transmitted diseases.

#### **4.7. Psychological/emotional abuse**

This is behaviour that has a harmful effect on the person's psychological and emotional health. This can include: emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.

#### **4.8. Financial or material abuse**

This is the main form of abuse recorded by the Office of the Public Guardian both amongst adults and children at risk. Financial abuse can occur in isolation but it is also likely to be connected to some other forms of abuse. Although this is not always the case, everyone should be aware of this possibility. **Financial abuse is a crime.**

Examples may include: 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.

#### **4.9. Neglect and Acts of omission**

This can take several forms and can be the result of an intentional or unintentional act(s) or omission(s). Neglect includes, ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition or heating.

**The Police have the powers to investigate allegations of neglect under the Mental Capacity Act 2005, Section 44 and also under the Criminal Justice and Courts Act 2015 Section 20 and 21.**

#### **4.10. Discriminatory abuse**

This exists when values, beliefs or culture result in a misuse of power that denies mainstream opportunities to some groups or individuals. It is the exploitation of a person's characteristics, which excludes them from opportunities in society, for example, education, health, justice, civic status and protection. It includes discrimination on the basis of age, disability, gender reassignment, marriage, civil partnership, pregnancy, maternity, race, religion or belief, sex or sexual orientation and includes hate crime incidents. Discriminatory abuse includes forms of harassment and slurs or similar treatment because of race, gender and gender identity, age, disability, sexual orientation or religion.

#### **4.11. Organisational abuse**

Repeated instances of poor or inappropriate care or support may be an indication of more serious problems and this is referred to as 'organisational abuse'.

Organisational abuse occurs when an organisation's systems and processes, and / or management of these, fails to safeguard a number of adults leaving them at risk of, or causing them harm. Organisational abuse can also occur when the routines, systems and norms of an organisation override the needs of those it is there to support, or fail to be the product of both ineffective and / or punitive management styles, creating an environment within which abuse can take place, intentional or otherwise.

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

#### **4.12. Domestic Violence**

Domestic Abuse is 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. This can encompass, but is not limited to, the following types of abuse:

- Psychological
- Physical
- Sexual
- Financial
- Emotional

Controlling behaviour 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.

#### **4.13. Self-Neglect**

This is 'the inability (intentional or non-intentional) to maintain a socially and culturally accepted standard of self-care with the potential for serious consequences to the health and well-being of people who self-neglect and perhaps even to their community' (Gibbons, 2006).

An individual may be considered as self-neglecting and therefore at risk of harm where they are:

- either unable or unwilling to provide adequate care for themselves
- unable or unwilling to obtain necessary care to meet their needs

**and/or**

- declining essential support without which their health and safety needs cannot be met.

This includes a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviours such as hoarding, nourishment, medication and treatment, administration (utility bills/services), refusing help/services.

#### **4.14. Modern Slavery**

Modern Slavery exists in the UK and can be perpetrated against men, women and children, UK nationals, and those from abroad. Modern slavery includes exploitation in the sex industry, forced labour, domestic servitude in the home and forced criminal activity. These types of crime are often called human trafficking. It can include victims that have been brought from overseas, and vulnerable people in the UK, being forced to work illegally against their will in many different sectors, including brothels, cannabis farms, nail bars and agriculture.

There is a national framework to assist in the formal identification and help to coordinate the referral of victims to appropriate services; this is called the National Referral Mechanism. The UK Human Trafficking Centre takes referrals of adults and children identified as being the victims of trafficking. Local authorities can provide a range of assistance on a discretionary basis. The Centre now comes under the Serious and Organised Crime Agency (SOCA).

The police are the lead agency in managing responses to adults who are the victims of human trafficking.

**Human trafficking** is defined as the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation.

#### **4.15. Related issues**

##### **4.15.1. Professional abuse**

Professional abuse is the misuse of therapeutic power and abuse of trust by professionals, the failure of professionals to act on suspected abuse / crimes, poor care practice or neglect in services, resource shortfalls or service pressures that lead to service failure and culpability as a result of poor management systems / structures.

Signs of possible professional abuse:

- failure to refer disclosure of abuse

- poor, ill-informed or outmoded care practices
- denying an adult at risk access to professional support and services such as advocacy, service design where groups of users living together are incompatible
- punitive responses to challenging behaviours
- failure to whistle blow on issues when internal procedures to highlight issues have been exhausted.

#### **4.15.2. Honour Based Violence (HBV)**

HBV may be committed when family members feel that dishonour has been brought to their family. Women are predominantly (but not exclusively) the victims, and the abuse 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. Safeguarding concerns that may indicate 'honour'-based abuse include domestic abuse, concerns about forced marriage or enforced house arrest and missing person reports. If a concern is raised and there is a suspicion that the adult is the victim of 'honour'-based abuse, a referral to the police should always be considered as they have the necessary expertise to manage the risk.

#### **4.15.3. Forced Marriages**

Forced marriage is a term used to describe a marriage in which one or both of the parties is 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. The multi-agency practice guidelines *Handling cases of forced marriage* (Home Office, 2009) recommend that cases involving forced marriage are best dealt with by child protection or 'adult protection' specialists.

In a situation where there is concern that an adult is being forced into a marriage they do not or cannot consent to, there may be an overlap between action taken under the forced marriage provisions and the adult safeguarding process. In this case action will be co-ordinated with the police and other relevant organisations, such as The Forced Marriage Unit.

Forced marriage is a criminal offence.

There is a website [www.fco.gov.uk/forcedmarriage](http://www.fco.gov.uk/forcedmarriage) which provides further guidance, information and advice.

#### **14.15.4. Female genital mutilation (FGM)**

This 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 new

born, during childhood or adolescence, just before marriage or during the first pregnancy.

FGM constitutes a form of child abuse and violence against women and girls, and has severe physical and psychological consequences. In England, Wales and Northern Ireland, the practice is illegal under the *Female Genital Mutilation Act 2003*.

#### **4.15.5. Hate crime**

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.

Individuals may be concerned that they would not be recognised as victims or be believed and taken seriously. Abusers may also control their victims, threatening to 'out' them to friends, family or support agencies.

Local authorities have a range of support services and advice for professionals in place.

**14.15.6. Mate crime** happens when someone is faking a friendship in order to take advantage of a vulnerable person. Mate crime is committed by someone known to the person. They might have known them for a long time or met recently. A 'mate' may be a 'friend', family member, supporter, paid staff or another person with a disability.

#### **4.15.7. Exploitation by radicalisers who promote violence**

'Prevent' is a key part of the Government's Counter Terrorist Strategy. Its aim is to stop people becoming terrorists or supporting terrorism. It is the preventative strand of the government's counter-terrorism strategy, CONTEST. Early intervention to divert people away from being drawn into terrorist activity is at the heart of Prevent.

Safeguarding adults from radicalisation is no different from safeguarding them from other forms of harm. Indicators for vulnerability to radicalisation include:

- Family tensions
- Sense of isolation
- Migration
- Distance from cultural heritage
- Experience of racism or discrimination.
- Feeling of failure

Individuals may be susceptible to exploitation into violent extremism by radicalisers. Violent extremists often use a persuasive rationale and charismatic individuals to attract people to their cause. The aim is to attract people to their reasoning, inspire new recruits and embed their extremist views and persuade vulnerable individuals of the legitimacy of their cause.

There are a number of factors that may make the individual susceptible to exploitation by violent extremists. None of these factors should be considered in isolation but in conjunction with the particular circumstances of the individual: identity or personal crisis, particular personal circumstances, unemployment or underemployment and criminality. All of these may contribute to alienation from UK values and a decision to cause harm to symbols of the community or the state.

#### **4.15.8. Child protection**

The Children Act 1989 provides the legislative framework for agencies to take decisions on behalf of children and to take action to protect them from abuse and neglect.

All The Meath Epilepsy Charity staff (paid and unpaid) must be aware that in situations where there is a concern that an adult at risk is or could be being abused or neglected and there are children in the same household, they too could be at risk. In this situation a referral **must** be made to Children's services at the Surrey Multi Agency Safeguarding Hub on 01483 518505.

## **5. Legislation**

There are a number of pieces of legislation that apply in the context of Safeguarding Adults. These are not exhaustive and include:

- The Care Act 2014
- The Sexual Offences Act 2003
- The Fraud Act 2006
- Corporate Manslaughter and Homicide Act 2007
- Vulnerable Groups Act 2006
- Public Interest Disclosure Act 1998
- Mental Capacity Act 2005
- The Criminal Courts and Justice Act 2015

Section 44 of the Mental Capacity Act 2005 makes it a criminal offence for care workers who ill-treat or wilfully neglects an adult at risk. This offence applies to adults who lack capacity and only the care worker can be liable.

The Criminal Justice and Courts Act 2015 makes it a criminal offence for a care worker to ill-treat or wilfully neglect someone in receipt of care irrespective of their mental capacity and applies to both the care worker and The Meath Epilepsy Charity as a care provider.

## **6. Annual Review of this Policy**

The Safeguarding Policy and Procedure will be reviewed annually to reflect any legislative amendments and also to reflect lessons learned from

Safeguarding Adult Reviews undertaken by the Surrey Safeguarding Adult Board and any other relevant reviews or enquiries where there is learning.

In addition The Meath Epilepsy Charity will reflect upon the learning arising from all safeguarding concerns within the organisation and review the learning against the Safeguarding Policy and procedure making amendments as necessary.

Any amendments made will be recorded together with the date of any changes to the Policy and Procedure.

The Policy and Procedure will be reviewed on August 2016