



Safeguarding and Protection of Adults at Risk Policy and Procedure (UK)

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1. Introduction

- 1.1 tide (together in dementia everyday) is a registered charity and is committed to safeguarding and promoting the welfare of all who engage with our network and use our services regardless of gender, race, disability, sexual orientation, religion/beliefs, whether pregnant or undergoing gender reassignment. We recognise that we have a particular responsibility to ensure that adults who may be at risk are protected.
- 1.2 The purpose of this policy is to outline the duty and responsibilities of members of the Board, Staff, volunteers and associates working on behalf of the organisation in relation to safeguarding adults at risk of harm.
- 1.3 For the purposes of this policy, the term 'all parties' will include the Board, staff, volunteers and associates working on behalf of tide, unless it is necessary to specify specific groups.
- 1.4 The term 'adult at risk' is used in this policy to replace 'vulnerable adult'. This is because the term 'vulnerable adult' may wrongly imply that some of the fault for the abuse lies with the victim of abuse. We use 'adult at risk' as an exact replacement for 'vulnerable adult' as that phrase is used throughout existing government guidance.
- 1.5 Tide is a UK-wide charity and this policy aims to provide a consistent approach across the four nations that incorporates the different legislative frameworks:
 - In England, the Care Act (2014)
 - In Scotland, the Protection of Vulnerable Groups (Scotland) Act 2007 and the Adult Support and Protection Act (2007);
 - In Wales, the Social Services and Well-being (Wales) Act (2014);
 - In Northern Ireland, the Adult Safeguarding; Prevention and Protection in Partnership policy (2015)
- 1.6 In England, Wales and Northern Ireland, an adult is defined as a person over 18 years old. In Scotland, this is a person over 16 years old.

2. Objectives

- 2.1 This policy aims to:
 - Provide all parties with an overview of adults at risk of harm and/or abuse
 - Explain the responsibilities that the organisation and its staff, associates volunteers and Board have in respect of adults at risk;
 - Provide a clear procedure that will be implemented where we suspect that an adult is at risk of, is being or has been abused or is at risk of serious harm;
 - Highlight and promote effective safeguarding arrangements to prevent harm and reduce the risk of abuse and neglect;
 - Increase awareness of adult safeguarding legislation and procedures and how to recognise signs of abuse.

3. Principles

3.1 tide is committed to the following six key principles in all aspects of this policy:

- Protection: Ensuring that all people that tide encounter are protected from harm and abuse;
- Prevention: Responding quickly to suspected cases of abuse and any disclosures made around risk of serious harm;
- Empowerment: Putting people first and helping those who need our support to feel involved and informed;
- Proportionality: Making sure that what we do is appropriate to the situation and for the individual;
- Partnership: Sharing the right information appropriately;
- Accountability: Making sure that all our staff and the agencies we work with have a clear role.

4. Responsibilities:

4.1 tide is committed to the following responsibilities:

- Ensure that all individuals engaged in working with adults at risk are subject to an appropriate disclosure check undertaken through the Disclosure and Barring Service (in England, Wales and Northern Ireland) or Disclosure Scotland;
- Monitor the level and validity of the checks for all parties
- Ensure that any person who is barred from working with adults at risk, or whose previous conduct indicates they would not be suitable to support adults at risk, is not employed by tide;
- Take action quickly, effectively and professionally when we suspect that abuse may be taking place or in the event of disclosures made about any serious risk or serious harm;
- Take reasonable steps to assess whether organisations with which it contracts, have appropriate adult safeguarding policies and procedures in place during the procurement process.
- Work with other agencies to recognise and manage suspicions, allegations and findings of abuse of adults at risk, who come in to contact with tide;
- Manage sensitive personal information about people, including personal identity information and information about health and financial issues;
- Ensure there is no unauthorised access, loss, misuse, amendment or disclosure of this information. Details of how we store this information can be found in tide's Privacy Notice which follows guidelines laid out by the Information Commissioner's Office.

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- 4.2 When safeguarding adults at risk, we may need to share personal or sensitive information with someone from another organisation. tide will only do this where the law says we can, and where sharing the information is in the best interests of an individual, including where it might prevent a crime taking place.
- 4.3 Where abuse is suspected or alleged, tide will share information to protect the individual, or other people. Anyone who is being abused or is suspected of being abused has a right to expect that we will take action and seek to protect their privacy, but in circumstances of harm, we have a responsibility to share information.
- 4.4 tide will take all suspicions or allegations of abuse seriously. tide Board members, staff and associates know that the needs of the adult at risk are of the highest importance.
- 4.5 tide will always try to act in the best interests of the adult at risk. tide will respond quickly to all allegations that abuse has happened, or is likely to happen.
- 4.6 Once an allegation has been reported, it is the responsibility of the Senior Management Team to agree the course of action and to designate an individual member of the team who will oversee progress and ensure that actions are fully compliant with this policy and with legislative requirements.

5. Definitions: Safeguarding

- 5.1 Safeguarding means protecting people's health, well-being and human rights, and enabling them to live free from harm, abuse and neglect. It is an important shared priority of many public services, and a key responsibility of local authorities and the police.
- 5.2 Safeguarding is protecting adults at risk from abuse or neglect. It means making sure people are supported to get good access to health care and stay well. People at risk must be treated by professionals with the same respect as other individuals in society.
- 5.3 Safeguarding should make sure that people get the support they need to make the most of their lives and understand their full rights, including their right to be treated in a way that respects diversity, equality and dignity.
- 5.4 Safeguarding is about protecting people who may be at risk in certain circumstances. This may be due to the actions (or lack of action) of another person. In these cases, it is vital that public services work together to identify people at risk, and put steps in place to help prevent abuse or neglect.

6. Definition: Abuse or Harm

6.1 Abuse or harm of an adult at risk may consist of a single act or repeated acts. It may occur as a result of a failure to undertake action or appropriate care tasks. It may be an act of neglect or an omission to act, or it may occur where an adult at risk is persuaded to enter into a financial or sexual transaction to which they have not consented, or cannot give consent. Abuse can occur in any relationship, including that between an unpaid carer and the person they look after or a relationship with a paid member of staff. It may result in significant harm to, or exploitation of, the person subjected to it. Some examples of what might amount to abuse include the following:

- Physical Abuse: including hitting, slapping, pushing, kicking, misuse or absence of medication, restraint, or inappropriate sanctions;
- Sexual Abuse: including rape and sexual assault or any sexual contact which the adult did not consent to or was coerced into;
- Psychological Abuse: including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks;
- Financial or Material Abuse: including theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits;
- Neglect and Acts of Omission: including ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of medication, nutrition and heating;
- Self-Neglect: Self-neglect can include a wide range of behaviours but the Social Care Institute of Excellence (SCIE) defines self-neglect as:
 - Lack of Self-Care: lack of care over personal hygiene, health, nutrition or hydration leading to potentially severe harm or death.
 - Lack of care of environment: leading to squalor or hoarding;
 - Refusal of Services: which may mitigate harm, such as help with alcoholism, or risk-taking behaviour;
- Discriminatory Abuse: including race, sex, culture, religion, politics, that is based on a person's disability, age or sexuality and other forms of harassment, slurs or similar treatment, hate crime;
- Institutional Abuse: Institutional abuse although not a separate category of abuse in itself, requires specific mention simply to highlight that adults placed in any kind of care home or day care establishment are potentially at risk of abuse and exploitation. This can be when care standards and practices fall below an acceptable level as detailed in regulations and the contract specification;

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- Multiple Forms of Abuse: may occur in an ongoing relationship or an abusive service setting to one person, or to more than one person at a time, making it important to look beyond single incidents or breaches in standards, to underlying dynamics and patterns of harm.
- Domestic Abuse: Any incident of threatening behaviour, violence or abuse or coercive control between adults who are, or have been, intimate partners or family members, regardless of gender or sexuality. Coercive control is a pattern of behaviour which seeks to take away the victim's liberty or freedom or to strip away their sense of self.
- tide may be made aware of any of the following circumstances:
 - A carer may witness abuse or neglect;
 - A carer may experience intentional or unintentional harm from an adult they are supporting;
 - A carer may unintentionally or intentionally harm or neglect the adult they support;
 - A carer may be experiencing mental health issues and disclose self-harm, self-neglect and/or suicidal ideation;
 - An allegation of abuse or harm against a Board member, employee, volunteer or associate

7. Detailed Roles & Responsibilities

- 7.1 All parties working on behalf of the organisation have a duty to promote the well-being and safety of adults at risk.
- 7.2 Any group may witness or receive disclosures of abuse or serious risk of harm.
- 7.3 How might abuse or serious risk of serious harm come to light? Someone may:
- Disclose this to a member of staff and/or another individual associated with tide
 - Witness an event happening
 - Notice changes in behaviour
 - Notice physical indicators of abuse, neglect and/or harm
- 7.4 The 4 R's of Adult Protection that all parties need to be aware of are:
- Recognising suspected, reported or witnessed harm;
 - Reporting suspected or actual harm, at the earliest opportunity, either verbally or by email (marked 'strictly confidential');
 - Recording adult protection events in the allocated secure location;
 - Referral to Adult Social Care and the police (if a crime is suspected) to ensure joint working and shared responsibilities.

8. Procedures

- 8.1 The ways we investigate reports of abuse or risk of serious harm include:
- Receiving reports that an adult at risk is being abused;
 - Investigating concerns in accordance with our 'Whistleblowing Policy';
 - Working in partnership with other agencies, most particularly adult social services, the NHS and the police, taking part in meetings and case conferences and contributing to investigations of suspected abuse where appropriate.
- 8.2 If someone tells you they are being or have been abused:
- Stay calm and listen; Be objective;
 - Empathise; Take them seriously;
 - Ensure that they are immediately safe if necessary;
 - Make a written record of what you have been told, note the time and date;
 - Preserve any evidence.
- 8.3 It is important that you:
- Do not make decisions on your own; Do not promise to keep secrets
 - Do not ask investigative questions or make judgmental comments
 - Do not ask leading questions
 - Do not destroy any evidence
 - Do not confront the alleged abuser
- 8.4 If any concern of alleged or suspected abuse is reported to Adult Social Care in any borough, council or locality they will need the following information:
- Is there an immediate or future risk?
 - What are the adult's views? Has consent been obtained?
 - When and where did the incident take place?
 - Who was involved?
- 8.5 Whatever the nature of your concerns, report them to a tide Board member using the form in Appendix A.
- 8.6 If your concerns relate to a person in a position of trust, such as a Board member, staff colleague, volunteer or associate, you must refer the matter to the Board chair in the same way.
- 8.7 Responsibilities of all parties:
- To be familiar with the Safeguarding and Protection of Adults at Risk Policy and Procedure.
 - To take appropriate action in regard to safeguarding of adults. Failure to do so will be regarded as gross misconduct and may result in dismissal.
 - To declare any existing or subsequent convictions. Failure to do so will be regarded as gross misconduct and may lead to dismissal.

9. Confidentiality

- 9.1 Safeguarding adults at risk raises issues of confidentiality which must be clearly understood by all and clear boundaries of confidentiality communicated to all.
- 9.2 If an adult confides in a member of staff, Board member, or associate and requests that the information is kept secret, it is important that whoever is involved explains sensitively that he or she has a responsibility to refer cases of alleged abuse to the appropriate agencies.
- 9.3 Within that context, the adult must, however, be assured that the matter will be disclosed only to people who need to know about it.
- 9.4 Where possible, consent must be obtained from the adult before sharing personal information with third parties. In some circumstances obtaining consent may be neither possible nor desirable as the safety and well-being of the “adult at risk” is the priority.
- 9.5 Where a disclosure has been made, staff must let the adult know the position regarding their role and what action they will have to take as a result.

10. Investigation

- 10.1 Detailed written records should be made of all events and what the adult or other individuals have said. The staff member should record in the adult’s own words and report to a Board member. Any disclosure should not be shared with other staff or associates at this stage, beyond the need to report the matter to a Board member for agreed action.
- 10.2 Appendix A will help to structure the record of events and can also be used to inform Social Services or the Police. Any opinions or personal interpretations of the facts presented can be recorded but it should be clear they are opinions, rather than facts. Records should be signed and stored in a secure file.
- 10.3 Staff should not attempt to investigate the situation any further or interview the adult regarding the situation.
- 10.4 The Board member should contact the local Adult Social Care Department and/or the Police and ask to speak to the Duty Officer about an adult protection issue. If the report is received after hours, the Adult Social Care Department Emergency Duty team and/or the Police should be contacted. Any further action should only be taken in line with the advice given by the Adult Social Care Department.
- 10.5 The Board chair will agree any necessary actions and designate a member of the team to oversee progress and ensure that such actions are compliant with this policy and with legislative requirements.

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Appendix A

Adult at Risk Reporting Form STRICTLY CONFIDENTIAL
Completed by: Date:
A. Name of person believed to be at risk of, or experiencing, harm and/or abuse: Contact details (if known):
B. Briefly outline the information that leads you to believe that someone is experiencing, or at risk of, harm/abuse. Give date, time and place of any specific incidents or events.
C. If there has been an injury to this person, please briefly outline the type of injury and its location on the body.
D. Was an emergency call made to the police because there was immediate risk of harm? Yes/No Date: Time: Name of officer spoken to:
E. Referred to Board member on (insert date) Considered by Board Chair (delete as appropriate) on (insert date):
F. Board chair decision and reasons for the decision:
G. Name of Board member designated to oversee agreed actions:
H. If referred to a local authority: Name of local authority: Name of officer spoken to: Date: Time:
I. If referred to the police (other than as an emergency): Date: Time: Name of officer spoken to:
J. Any other action taken (list all actions taken): Date: Time: Action:
K. Signature of first member of staff to report: _____ Date: Signature of Board member who took the decision outlined at Section F: _____ Date: