



**Procedure:** **SAFEGUARDING - ADULTS**

**Approved by:** Leadership Group

**Date Approved:** May 2024  
**Frequency of review:** Annually

## 1. PURPOSE

This procedure outlines our approach to preventing and reducing the risk of harm to adults who are experiencing, or are at risk from, abuse or neglect.

This procedure has been developed to ensure both Broadland staff and customers are able to identify safeguarding concerns in their role or community.

## 2. KEY STAFF RESPONSIBILITIES

Please see Safeguarding Policy and process flowchart (Appendix 1) for further details.

## 3. DEFINITIONS

NSAB – Norfolk Safeguarding Adults Board

## 4. RELATED DOCUMENTS

| RELVANT KEY LEGISLATION AND RELATED DOCUMENTS: (not limited to)                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Legislation                                                                                                                                                                                                                                                              | Documents                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Equality Act 2010<br>Housing Act 1996<br>Human Rights Act 1998<br>Care Act 2014<br>Mental Capacity Act 2005<br>Modern Slavery Act 2015<br>Data Protection Act 1998 and General<br>Data Protection Regulation 2018<br>Domestic Abuse Act 2021<br>Sexual Offences Act 2003 | Anti- Social Behaviour Policy<br>Hoarding Policy<br>Domestic Abuse Policy (tenants)<br>Domestic Abuse Policy (employees)<br>Allocations Policy<br>Confidential Reporting & Whistleblowing<br>Policy<br>Recruitment Policy & Procedure<br>Professional Boundaries Policy<br>Equality, Diversity and Inclusion Policy<br>Complaints Policy<br>Repairs Policy<br>Tenancy Agreement<br>No Secrets – Dept of Health 2000<br>NSAB – Norfolk Multi Agency Safeguarding<br>Adults Policy |

## 5. OBJECTIVES

5.1 The objectives of adult safeguarding are to:

- 5.1.1 stop abuse or neglect wherever possible.
- 5.1.2 prevent harm and reduce the risk of abuse or neglect to adults with care and support needs.
- 5.1.3 respond sensitively and in a consistent manner to all reported incidents of abuse and neglect, in accordance with this policy.
- 5.1.4 safeguard adults in a way that supports them in making choices and having control about how they want to live to achieve the outcomes they want.
- 5.1.5 promote an approach that concentrates on improving the quality of life for the adults concerned.
- 5.1.6 ensure access to all types of justice in all appropriate circumstances.
- 5.1.7 raise public awareness so that communities as a whole, alongside professionals, play their part in preventing, identifying and responding to abuse and neglect.
- 5.1.8 provide information, support and training 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.
- 5.1.9 provide information and training that assists in the recognition of abuse and the early identification of any services which are failing to ensure the safety of adults.
- 5.1.10 to seek continuous improvement of policy, procedures and practice in relation to safeguarding, using feedback from service users, staff and participating agencies
- 5.1.11 address what has caused the abuse or neglect.

## 6 KEY SAFEGUARDING PRINCIPLES

6.1 The government has established six principles that should underpin all adult safeguarding work and describe the individual outcomes that should result. These principles are set out in the Care Act (2014) and organisations must adhere to them when delivering their adult safeguarding function. These are:

- **Empowerment** – Presumption of person led decisions and informed consent.

- **Prevention** – It is better to take action before harm occurs.
- **Proportionality** – Proportionate and 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.

## 7 MAKING SAFEGUARDING PERSONAL

- 7.1 Organisations should commit to the principles of **Making Safeguarding Personal**, a project developed by the Local Government Association and the Association of Directors of Adults Social Services.
- 7.2 The aim of Making Safeguarding Personal is to ensure that safeguarding is person-led, and outcome focused. It engages the adult 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 their quality of life, wellbeing and safety.
- 7.3 In discharging their responsibilities, organisations will:
- Work with adults (and their advocates or representatives if they lack capacity) at the beginning to identify the outcomes they want to achieve.
  - Review with the adult at the end of the safeguarding activity to what extent their desired outcomes have been achieved.
  - Develop a range of clear, well-defined and appropriate responses that focus on supporting the adult to meet their desired outcomes and reduce the risk of recurrence of abuse.
  - Record and review the outcomes in a way that can be used to inform practice and account to the Norfolk Safeguarding Adults Board.
- 7.4 Examples of the kind of outcomes that people might want are:
- to feel safer
  - to maintain a key relationship
  - to get new friends
  - to have help to recover

- to have access to justice, or an apology, or to know that disciplinary or other action has been taken.
- to know that this won't happen to anyone else.
- to maintain control over the situation
- to be involved in making decisions
- to have exercised choice
- to be able to protect themselves in the future.
- to know where to get help.

## 8 WHAT IS ABUSE?

The Care Act (2014) does not set out a specific definition of abuse.

This section considers the different types, patterns of abuse and neglect including the different circumstances in which they may take place. However, it is important to consider each individual case as abuse and neglect does take many forms.

The following statements are not intended to be an exhaustive list but rather a guide to the sort of behaviours which could give rise to a safeguarding concern. To be considered as a safeguarding concern the adult must meet the criteria set out in the Care Act (2014).

### Who could be abused or at risk?

The safeguarding duties apply to an adult over 18 years of age who:

- has needs for care and support (whether or not the local authority is meeting any of those needs) **and**;
- is experiencing, **or** at risk of, abuse or neglect; **and**;
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

Where someone over 18 is still receiving children's services, for example in an education setting until the age of 25, and a safeguarding issue is raised the matter should be dealt with through adult safeguarding arrangements. Children's safeguarding and other relevant partners should be involved as appropriate. The level of needs is not relevant, and the young adult does not need to have eligible needs for care and support under the Care Act.

### Forms of Abuse and Neglect

Abuse and neglect can take many forms. It may be an isolated incident, a series of incidents or a long-term pattern of behaviour. Abuse and neglect could:

- affect one person or many more.

- be deliberate or the result of negligence or ignorance.

Exploitation, in particular, is a common theme in abuse and neglect. The degree or lack of intent will inform the response.

Abuse and neglect can happen anywhere including:

- In a person's own home and/or other people's homes
- In public places or in the community
- At work
- Schools and colleges of further education
- In hospitals, surgeries or other health centres
- Care homes
- Day centres.

### Patterns of abuse

Patterns of abuse and neglect vary and include:

- **Serial** abusing in which the perpetrator seeks out and 'grooms individuals by obtaining their trust over time before the abuse begins – sexual abuse commonly falls into this pattern as do some forms of financial abuse and radicalisation.
- **Long-term** abuse in the context of an ongoing family relationship such as domestic violence between spouses or generations or persistent psychological abuse; or
- **Opportunistic abuse**, such as theft occurring because money or jewellery has been left lying around.
- **Situational abuse** which arises because pressures have built up and/or because of difficult or challenging behaviour neglecting a person's needs because the carer has difficulties. These could be debt, alcohol or mental health related or the specific demands resulting from caring for a vulnerable person.

### Categories and types of Abuse

The main forms of abuse and neglect are generally classified under the following ten headings. This should not be considered a definitive list, but an illustrative guide as to the sort of behaviour which could give rise to a safeguarding concern:

- **Physical abuse**

The non-accidental infliction of physical force that results (or could result) in bodily injury, pain or impairment.

- **Domestic Abuse**

- Behaviour of a person ('A') towards another person ('B') is 'domestic abuse' if –

(a) A and B are each aged 16 or over and are personally connected to each other and

(b) the behaviour is abusive.'

- **Sexual abuse**

Direct or indirect involvement in sexual activity without consent. This could also be the inability to consent, pressure or inducement to consent or take part.

- **Psychological (emotional) abuse**

Acts or behaviour which impinge on the emotional health of, or which causes distress or anguish to individuals. This may also be present in other forms of abuse.

- **Financial or material abuse**

Unauthorised, fraudulent obtaining and improper use of funds, property or any resources of an adult at risk from abuse.

- **Modern slavery**

Encompasses slavery, human trafficking, 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.

- **Discriminatory abuse**

Discriminatory abuse exists when values, beliefs or culture result in a misuse of power that denies mainstream opportunities to some groups or individuals.

- **Organisational (Institutional) abuse**

Institutional abuse occurs where the culture of the organisation (such as a care home) places emphasis on the running of the establishment and the needs of the staff above the needs and care of the adult, including 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 from domiciliary services. 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.

- **Neglect and acts of omission**

Ignoring or withholding physical or medical care needs which result in a situation or environment detrimental to individual(s). Ill-treatment and wilful neglect of a person who lacks capacity are now criminal offences under the Mental Capacity Act.

- **Self-neglect**

Self-neglect is unlikely to be a safeguarding issue, however agencies must assess concerns raised under their statutory duties; having consideration for an individual's right to choose their lifestyle, balanced with their mental health or capacity to understand the consequences of their actions.

This refers to a person for whom there is a concern about their mentally competence for the situation in which they find themselves.

Once identified as a situation that cannot be managed through regular case management, high risk or self-neglect situations could be managed by using elements of the safeguarding process, i.e., professional meetings.

Self-neglect is characterised as the behaviour of a person that threatens his/her own health or safety. Self-neglect generally manifests itself as a refusal or failure to provide himself/herself with adequate food, water, clothing, shelter, personal hygiene, medication (when indicated), and safety precautions.

The definition of self-neglect excludes a situation in which a mentally competent adult, who understands the consequences of his/her decisions, makes a conscious and voluntary decision to engage in acts that threaten his/her health or safety as a matter of personal choice.

Signs and Indicators of Abuse/Neglect/Human Trafficking are included in **Appendix 1**.

## **Who abuses and neglects?**

Anybody can abuse. Mutually abusive relationships involving two or more adults also exist. The abuser is frequently, but not always, known to the adult they abuse and can include:

- Spouses/partners
- Other family members
- Neighbours
- Friends
- Acquaintances

- Local residents
- People who deliberately exploit adults they perceive as vulnerable to abuse.
- Paid staff or professionals
- Volunteers and strangers

### **Why abuse occurs.**

Abuse occurs for many reasons and the causes are not always fully understood. The risk is known to be greater when:

- The person is socially isolated.
- A pattern of family violence exists or has existed in the past.
- Drugs or alcohol are being misused.
- Relationships are placed under stress.
- The abuser is dependent on the victim (for finance, accommodation or emotional support)

Where services are provided, abuse is more likely to occur where staff are:

- Inadequately trained.
- Poorly supervised and managed
- Lacking support
- Working in isolation

## **9. CARERS**

We recognise that some of the adults living in our properties, may be paid or unpaid carers for partners, family members of dependent children, which places additional responsibility and pressure on them. We will recognise when a carer approaches us for support or guidance relating to safeguarding for either themselves or the person they are caring for and ensure they have the support they need, or if appropriate we will make a safeguarding referral.

## **10. THE MENTAL CAPACITY ACT AND ADULT SAFEGUARDING.**

The Mental Capacity Act (2005) (MCA) applies to anyone over 16 who is unable to make some or all decisions for themselves.

Adults (over 18) can appoint another person to make decisions on their behalf in the event that they become unable to make their own decisions under a Lasting Power of Attorney (health and welfare property and financial affairs). Alternatively, if the person does not have capacity to do this, the Court of Protection may appoint a Deputy to



make decisions on their behalf. If an adult is believed to lack the capacity to engage in decisions about how their needs will be met, the **Mental Capacity Act Guidance** must be followed.

[Click here for the Mental Capacity Act Code of Practice.](#)

There are some decisions which can never be made on behalf of someone who lacks capacity to make the decision themselves, these are:

- Consent to marriage / civil partnership
- Consent to sexual relations
- Consent to a child being placed for adoption or the making of an adoption order.
- Discharging parental responsibility in a matter not relating to the child's property
- Treatment for mental disorder under the Mental Health Act.

## 11. DIRECTING A CONCERN TO THE APPROPRIATE SERVICE

The types and forms of abuse or neglect are broad, and it is therefore anyone who has a concern about abuse or neglect is responsible for raising this concern.

Of the concerns referred to adult safeguarding, it is appropriate that some will be dealt with through contractual, managerial, complaints or disciplinary procedures. If it is unclear if adult safeguarding is the appropriate service needed, staff should seek advice either internally or with the lead agency, including the Multi-Agency Safeguarding Hub (MASH).

[Types of abuse | Norfolk Safeguarding Adults Board](#)

[SGA-Referrer-CHECKLIST-2023.pdf \(norfolksafeguardingadultsboard.info\)](#) provides a checklist of information you should have ready when calling MASH.

[RAISING-SG-CONCERN-FAQsSept-2021FINAL.docx \(live.com\)](#) provides you with a list of frequently asked questions.

[NSAB-END-TO-END-FLOW-DIAGRAM-2023.pdf \(norfolksafeguardingadultsboard.info\)](#) shows the process after you make a referral.

Equally, concerns addressed within organisations through contractual, managerial, complaints or disciplinary procedures may also require raising those concerns to the lead agency, Norfolk County Council.

If a safeguarding adult referral to the lead agency for an Adult (section 42) has been declined or redirected to another service/s and the referring agency/service feels this decision should be reviewed, they will raise this matter with the lead agency for further discussion and consideration.

## Information Sharing

Early sharing of information is the key to providing an effective response where there are emerging concerns.

Reluctance about sharing information **MUST** not stand in the way of promoting and protecting the well-being of adults at risk of abuse and neglect. There may be concerns that changes around General Data Protection Regulation (GDPR) may have made sharing of information for adult safeguarding more difficult. This is not the case.

The GDPR forms part of the data protection regime in the UK, together with the new Data Protection Act 2018 (DPA 2018). The main provisions of this apply, like the GDPR, from 25 May 2018. The law is wide-reaching and places a range of new duties and responsibilities on organisations that store data from which individuals can be identified.

The [Information Commissioners Office](#) offers detailed guidance on the new regulation.

The changes in the law do not change our practice with regard to safeguarding adults because the GDPR, like the previous legislation, allows us to share information without consent in certain circumstances. If it is deemed to be in the public interest, data may be collected, processed, shared and stored. It may be stored for longer periods in the public interest and in order to safeguard the rights and freedoms of individuals.

### Vital interests

Vitality means 'life', vital interests are a lawful basis for sharing personal data to protect someone's life, but you **MUST** check whether there is a less intrusive way to protect the person's life. You will need to document and justify your decision.

Safeguarding Adult Enquiries can only be successful if staff share and exchange all relevant information. This information must be treated as confidential at all times. Staff will be bound by the ethical and statutory codes that cover confidentiality and data protection, and must use the following principles:

- that information will only be shared on a 'need to know' basis when it is in the interests of the adult.
- confidentiality must not be confused with secrecy.
- informed consent should be obtained but, if this is not possible and other adults (and/or children) are at risk of abuse or neglect, it may be necessary

to override the requirement it is inappropriate for agencies to give assurances of absolute confidentiality in cases where there are concerns about abuse, particularly in those situations when other adults (and/or children) may be at risk.

Decisions about who needs to know and what needs to be known should be taken on a case-by-case basis, within agency policies and the constraints of the legal framework.

Problems around the disclosure of information can be avoided if the consent of the adult is obtained, provided they have mental capacity to take that decision. All actions in this respect must be clearly documented.

However, in certain circumstances disclosure may be necessary in the public interest, where a failure to disclose information may expose the adult or others to significant risk of serious harm or to prevent criminal activity.

All those providing information should take care to distinguish between fact, observation, allegation and opinion. It is important that, should any information exchange be challenged in respect of a breach of confidentiality or, for example, as a breach of the Human Rights Act, the information can be supported by appropriate evidence.

Concerns may arise within an agency as information comes to light about an adult with whom the service is already in contact. Whilst professionals should seek in general to discuss any concerns with the adult and their carers and seek agreement to share the knowledge with other relevant agencies, this should not be done where such discussion and agreement-seeking could jeopardise the safety of the adult, other individuals, or the investigation.

No-one should assume that someone else will pass on information which they think may be critical to the safety and wellbeing of an adult at risk of abuse or neglect. If a person has concerns about an adult's welfare and believes they are suffering abuse or neglect, they should share their concerns with the local authority as the lead agency and/or, the police if they believe or suspect that a crime has been committed.

Each agency is responsible for maintaining their own records on work with safeguarding adults cases.

## 12. ASSURANCE & MONITORING

We will ensure that cases are monitored to ensure our processes are being followed and support is given to the staff member dealing with them.

We are using data to help us ensure we are meeting our obligations; this is not an exhaustive list:

- analysis by Local Delivery Area

|                                                           |                                                             |
|-----------------------------------------------------------|-------------------------------------------------------------|
| Procedure Owner: Louise Archer<br>Directorate: Operations | Revised by: Stephani Davis<br>Verified by: Leadership Group |
|-----------------------------------------------------------|-------------------------------------------------------------|

- comparisons to areas of deprivation
- types of Safeguarding
- case reviews on unexpected deaths

The Tenancy Support & Safeguarding Manager will undertake monthly monitoring of open cases.

## **Appendix 1 Signs and Indicators of Abuse/Neglect/Human Trafficking**

The signs of abuse are not always clear. The following may, however, suggest the possibility of abuse:

- disclosures by the victim
- concern expressed by a third party
- admissions by the perpetrator
- someone expressing fears that abuse might happen
- evidence of unreported injuries
- signs of fear or distress
- injuries suggesting a possible non-accidental cause
- explanations that are incompatible with injuries presented or where conflicting explanations are given
- a history of persistent illness, infection or injury
- inappropriate use of medication
- possessions or money going missing or bills not being paid
- property being sold without the owner's consent or understanding
- sudden or unexpected removal of an individual from a care setting
- a person is uncharacteristically withdrawn, without apparent reason
- a person is found alone and at risk without adequate explanation
- a long time lapse between injury or illness and obtaining medical or other care
- abrupt or frequent changes of doctor or caring agency
- unexplained weight loss
- uncharacteristically unkempt appearance or surroundings
- agencies have repeated difficulty in gaining access to see someone
- it is made difficult to speak to a person alone without their carer/another person present
- evidence of avoidance, including regularly missed appointments, refusal of help, etc
- evidence of alcohol or other substance misuse
- signs of stress
- history of previous abuse or violence in the family
- unexplained pain, itching, infection or injury in the anal, genital or abdominal areas
- torn, stained or bloody underclothing
- multiple unrelated people living at one address living in overcrowded private rental accommodation

Signs an individual may be being led into extremism: The following may indicate that an individual is at risk of being radicalised or is being exposed to extremist views:

- Being in contact with extremist recruiters and/or spending increasing time in the company of other suspected extremists
- Loss of interest in other friends and activities not associated with the extremist ideology, group or cause
- Accessing extremist material online, including through social networking sites
- Possessing or accessing materials or symbols associated with an extremist cause
- Justifying violence to address social issues
- Graffiti symbols, writing or artwork promoting extremist messages or images

- Significant changes to appearance and/or behaviour increasingly centred on an extremist ideology, group or cause
- Changing their style of dress or personal appearance to accord with the group
- Attempts to recruit others to the group/cause
- Using insulting or derogatory names for another group

### Hate Incidents

A hate incident is any incident which is perceived by the person, or any other person as being motivated by prejudice or hatred. Hate incidents / crime can be anything from name calling, physical attack, vandalism or stealing a person's property, motivated by prejudice, hostility or hatred towards that individual because they are 'different'. It may or may not be a crime and it may or may not be linked to a safeguarding concern. There are a number of ways to report a hate incident:

- In an emergency always phone 999
- Contact the police via email: [enquiries@norfolk.pnn.police.uk](mailto:enquiries@norfolk.pnn.police.uk) or visit their website: [norfolk.police.uk](http://norfolk.police.uk)
- Going to any Norfolk County Council public building such as libraries and reporting it, where staff will be able to assist if needed
- Going to your district council, local police station or anywhere you see the 'Hate Incident Reporting Place' logo

