

Safeguarding Adults at Risk Policy

Statement of policy

Smart Works Charity recognises its responsibilities to protect and safeguard the welfare of all adults at risk involved in activities conducted by Smart Works or at Smart Works facilities in accordance with the Care Act 2014.

Smart Works will do its utmost to ensure the safety and protection of all adults at risk involved with Smart Works activities whilst under the supervision of our staff and volunteers. We expect all staff, volunteers and Trustees to comply with this policy.

At Smart Works we are committed to ensuring that people at risk who use our services are not abused and that our working practices minimise the risk of such abuse. All staff, volunteers and trustees have a duty to identify abuse and report it.

This Policy should be read in-full, including all six appendices.

Principles

The guidance given in the policy and procedures is based on the following principles:

- All adults, regardless of age, ability or disability, gender, race, religion, ethnic origin, sexual orientation, marital or gender status have the right to be protected from abuse and poor practice and to participate in an enjoyable and safe environment. This is in line with the Smart Works Equality Policy.
- The rights, dignity and worth of all adults will always be respected.
- We recognise that ability and disability can change over time, such that some adults may be additionally vulnerable to abuse, in particular those adults with care and support needs
- We all have a shared responsibility to ensure the safety and well-being of all adults and will act appropriately and report concerns whether these concerns arise within Smart Works, for example, inappropriate behaviour of a staff member or volunteer, or in the wider community.
- All allegations will be taken seriously and responded to quickly in line with Smart Works' Safeguarding Adults at Risk Policy and Procedures.
- Smart Works recognises the role and responsibilities of the statutory agencies in safeguarding adults and is committed to complying with the procedures of the Local Safeguarding Adults Boards.

The six principles of adult safeguarding

The Care Act 2014 sets out the following principles that should underpin safeguarding of adults:

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

Making Safeguarding Personal

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

Wherever possible discuss safeguarding concerns with the adult to get their view of what they would like to happen and keep them involved in the safeguarding process, seeking their consent to share information outside of the organisation where necessary. For more guidance, see Appendix 2.

Wellbeing Principle

The concept of wellbeing is threaded throughout the Care Act. Wellbeing is different for each of us however, the Act sets out broad categories that contribute to our sense of wellbeing. By keeping these themes in mind, we can all ensure that adult participants can take part in activities and the Smart Works' interview and dressing service fully:

- 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 (including over care and support provided and the way they are provided)
- Participation in work, education, training or recreation
- Social and economic wellbeing
- Domestic, family and personal domains
- Suitability of the individual's living accommodation
- The individual's contribution to society.

Legislation

The practices and procedures within this policy are based on the principles contained within the UK legislation and Government Guidance and have been developed to complement the Safeguarding Adults Boards policy and procedures. They take the following into consideration:

- England - The Care Act 2014
- Wales - Social Services and Well Being Act 2014
- Scotland - Adult Support and Protection Act 2007
- Northern Ireland - Adult Safeguarding Prevention and Protection in Partnership 2015
- The Protection of Freedoms Act 2012
- Domestic Violence, Crime and Victims (Amendment) Act 2012
- The Equality Act 2010
- The Safeguarding Vulnerable Groups Act 2006
- England and Wales - Mental Capacity Act 2005
- Scotland - Adults with Incapacity Act 2000
- Mental Capacity (Northern Ireland) 2016
- Sexual Offences Act 1956 & 2003
- The Human Rights Act 1998
- The Data Protection Act 1998
- The General Data Protection Regulation 2016

Please note that further information on the differences between the home nations in regards to abuse or neglect definition, types of abuse and neglect and the principles of Safeguarding Adults can be

found in Appendix 3. This policy draws from across the legislation outlined above is designed for all Smart Works staff, volunteers and Trustees across the UK.

Definitions

To assist working through and understanding this policy a number of key definitions need to be explained:

Adult is anyone aged 18 or over (England and Wales) or 16 or over (Scotland).

Adult at risk is a person aged 18 or over who:

- Has needs for care and support (whether or not the local authority is meeting any of those needs);

and;

- Is experiencing, or is at risk of, abuse or neglect;

and;

- As a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of, abuse or neglect.

(The Care Act 2014, England.)

Adult in need of care and support is determined by a range of factors including personal characteristics, factors associated with their situation, or environment and social factors. For example, they could be older, have a physical or learning disability or have mental health needs. Naturally, a person's disability or frailty does not mean that they will inevitably experience harm or abuse.

In the context of safeguarding adults, the likelihood of an adult in need of care and support experiencing harm or abuse should be determined by considering a range of social, environmental and clinical factors, not merely because they may be defined by one or more of the above descriptors.

In recent years there has been a marked shift away from using the term 'vulnerable' to describe adults potentially at risk from harm or abuse.

Abuse is a violation of an individual's human and civil rights by another person or persons. See below for further explanations.

Adult safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted (Care Act 2014).

Capacity refers to the ability to make a decision at a particular time, for example when under considerable stress. The starting assumption must always be that a person has the capacity to make a decision unless it can be established that they lack capacity (MCA 2005). See Appendix 2 for further guidance and information.

Types of Abuse and Neglect

There are different types and patterns of abuse and neglect, and different circumstances in which they may take place. The Care Act 2014 identifies the following as an illustrative guide and is not intended to be exhaustive list as to the sort of behaviour which could give rise to a safeguarding concern:

- **Self-neglect** – this covers a wide range of behaviour: neglecting to care for one's personal

hygiene, health or surroundings and includes behaviour such as hoarding.

- **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.
- **Domestic Abuse and coercive control** – including psychological, physical, sexual, financial and emotional abuse. It also includes so called 'honour' based violence. It can occur between any family members.
- **Discriminatory Abuse** – discrimination is abuse which centres on a difference or perceived difference particularly with respect to race, gender or disability or any of the protected characteristics of the Equality Act.
- **Organisational Abuse** – 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. 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.
- **Physical Abuse** – including hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions.
- **Sexual Abuse** – including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault, or sexual acts to which the adult has not consented or was pressured into consenting.
- **Financial or Material Abuse** – including theft, fraud, internet scamming, coercion in relation to an adult's financial affairs or arrangements, including in connection to wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.
- **Neglect** – including ignoring medical or physical care needs, failure to provide access to appropriate health social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.
- **Emotional or Psychological Abuse** – this includes threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks.

Not included in the Care Act 2014 but also relevant:

- **Cyber Bullying** – this can occur when someone repeatedly makes fun of another person online, or repeatedly picks on another person through emails or text messages, or uses online forums with the intention of harming, damaging, humiliating or isolating another person. It can be used to carry out many different types of bullying (such as racist bullying, homophobic bullying, or bullying related to special educational needs and disabilities) but instead of the perpetrator carrying out the bullying face-to-face, they use technology as a means to do it.

- **Forced Marriage** – this 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 a third party in identifying a spouse. The Anti-social Behaviour, Crime and Policing Act 2014 make it a criminal offence to force someone to marry. The forced marriage of adults with learning disabilities occurs when the adult does not have the capacity to consent to the marriage.
- **FGM** - Female genital mutilation (FGM) is the partial or total removal of the external female genitalia for non-medical reasons. It's also known as female circumcision or cutting. FGM is often performed by someone with no medical training who uses instruments such as a knife, scalpel, scissors, glass or razor blade.
- **Mate Crime** – a 'mate crime' as defined by the Safety Net Project as 'when vulnerable people are befriended by members of the community who go on to exploit and take advantage of them. It may not be an illegal act but still has a negative effect on the individual.' Mate Crime is carried out by someone the adult knows and often happens in private. In recent years there have been a number of Serious Case Reviews relating to people with a learning disability who were murdered or seriously harmed by people who purported to be their friend.
- **Radicalisation** – the aim of radicalisation is to attract people to their reasoning, inspire new recruits and embed their extreme views and persuade vulnerable individuals of the legitimacy of their cause. This may be direct through a relationship, or through social media. For more detail on this, and the Prevent Strategy refer to Appendix 4.

Signs and indicators of abuse and neglect

Abuse can take place in any context and by all manner of perpetrator. Abuse may be inflicted by anyone in the organisation who comes into contact with the adult at risk. This might include staff members, Trustees, volunteers or any other person on site at the time.

There are many signs and indicators that may suggest someone is being abused or neglected. These include but are not limited to:

- Unexplained bruises or injuries – or lack of medical attention when an injury is present.
- Person has belongings or money going missing.
- Someone with an unkempt appearance.
- They may self-harm.
- They may have a fear of a particular group or individual.
- They may express extreme political or religious views
- They may tell you / another person they are being abused – i.e. a disclosure. This could include a range of different abuses. For example, fear of a partner, forced marriage, slavery etc.

What to do if you have a concern, or if someone raises concerns with you

- It is not your responsibility to decide whether or not an adult has been abused. It is, however, everyone's responsibility to respond to and report concerns.
- If you are concerned someone is in immediate danger, contact the police on 999 straight away. Where you suspect that a crime is being committed, you must involve the police.
- If you have concerns and/or you are told about possible or alleged abuse, poor practice or wider welfare issues you must report this to the Smart Works Safeguarding Officer in your

centre. Or, if the Safeguarding Officer is implicated, then report to the CEO or Safeguarding Lead on the Smart Works Charity Board.

- When raising your concern with the Safeguarding Officer, remember the “Making Safeguarding Personal” principles. It is good practice to seek the adult’s views on what they would like to happen next and to inform the adult you will be passing on your concern.
- It is important when considering your concern that you keep the person informed about any decisions and action taken, and always consider their needs and wishes.

How to respond to a concern

- **Reassure the person concerned, listen to what they are saying and remain calm**
 - Do not show shock or disbelief
 - Tell the client that the information will be treated seriously
 - Don’t start to investigate or ask detailed or probing questions
 - Don’t promise to keep it a secret
 - Remember to “Make Safeguarding Personal”. Discuss your safeguarding concerns with the adult, obtain their view of what they would like to happen, but inform them it’s your duty to pass on your concerns to your Safeguarding Officer.
- **Make a note of what the person has said using his or her own words as soon as practicable**
 - Complete an Incident Form and submit to the Smart Works Safeguarding Officer in your centre immediately or within 24 hours if this is not possible.
 - Describe the circumstances in which the disclosure came about.
 - Take care to distinguish between fact, observation, allegation and opinion. It is important that the information you have is accurate.
 - Be mindful of the need to be confidential at all times. This information must only be shared with your Safeguarding Officer and others on a need-to-know basis.
- **If the matter is urgent and relates to the immediate safety of an adult at risk, then contact the emergency services if necessary and inform a member of staff immediately.**

Roles and responsibilities of those within Smart Works

Smart Works is committed to having the following in place:

- A Safeguarding Officer and Deputy in every Smart Works centre to support staff, volunteers and trustees with safeguarding issues and training.
- A Safeguarding Lead on each Smart Works centre’s Board of Trustees to oversee safeguarding issues and work in tandem with the Overall Safeguarding Lead.
- An Overall Safeguarding Lead on the Smart Works Charity Board to oversee safeguarding issues across the organisation, working closely with the Safeguarding Leads and Officers in every centre to produce and disseminate guidance and resources to support the policy and procedures.
- A clear line of accountability within the organisation for work on promoting the welfare of all adults.
- Procedures for dealing with allegations of abuse or poor practice against members of staff, trustees and volunteers.
- A Case Referral Group that effectively deals with issues, manages concerns and refers to a disciplinary panel where necessary (i.e. where concerns arise about the behaviour of someone within Smart Works).

- A Disciplinary Panel will be formed as required for a given incident, if appropriate.
- Arrangements to work effectively with other organisations to safeguard and promote the welfare of adults, including arrangements for sharing information.
- Appropriate whistle blowing procedures and an open and inclusive culture that enables safeguarding and equality and diversity issues to be addressed.
- Clear codes of conduct are in place for staff, trustees and volunteers.

Safeguarding Officers

HQ/London

Role	Name and Contact information
Safeguarding Officer	Rosemary Ashworth, Director of Service Delivery rosemary.ashworth@smartworks.org.uk 07837753008
Deputy Safeguarding Officer(s)	Sophie Rutherford, Head of London Service Delivery Sophie.Rutherford@smartworks.org.uk 0207 288 1770
Safeguarding Lead on Smart Works Charity Board	Natalie Abou-Alwan, Trustee Natalie.Abou-Alwan@smartworks.org.uk
Local Safeguarding Lead on Smart Works centre Board	N/A in London as the Smart Works Charity Board covers the London centres

Birmingham

Role	Name and Contact information
Safeguarding Officer	Ann Powell, Centre Manager Ann.Powell@smartworks.org.uk 0121 643 8109
Deputy Safeguarding Officer(s)	Cheryl Whittingham, Centre Manager cheryl.whittingham@smartworks.org.uk 0121 643 8109
Local Safeguarding Lead on Smart Works Birmingham Board	Victoria Camfield, Trustee victoria.camfield@smartworks.org.uk

Scotland

Role	Name and Contact information
Safeguarding Officer	Beth Reid, Centre Manager beth.reid@smartworks.org.uk 0131 5167787
Deputy Safeguarding Officer(s)	Caroline Levack, Volunteer Coordinator Caroline.levack@smartworks.org.uk 0131 5167787
Local Safeguarding Lead on Smart Works Scotland Board	Janine Watson, Trustee Janine.watson@smartworks.org.uk

Leeds

Role	Name and Contact information
Safeguarding Officer	Kate Murphy, Service Delivery Officer Kate.murphy@smartworks.org.uk 0113 234 6503
Deputy Safeguarding Officer(s)	Emily Zadok, Service Delivery Officer Emily.zadok@smartworks.org.uk 0113 234 6503
Local Safeguarding Lead on Smart Works Leeds Board	Helen Oldham, Chair Helen.oldham@smartworks.org.uk

Manchester

Role	Name and Contact information
Safeguarding Officer	Claire Goodman, Client Delivery Lead Claire.goodman@smartworks.org.uk 0161 974 0669
Deputy Safeguarding Officer(s)	Victoria Cronquist, Business Manager and Corina Herhenteris, Comms and Office Lead Victoria.cronquist@smartworks.org.uk corina.herhenteris@smartworks.org.uk 0161 974 0669
Local Safeguarding Lead on Smart Works Manchester Board	Sheena Bedi, Trustee Sheena.bedi@smartworks.org.uk

Newcastle

Role	Name and Contact information
Safeguarding Officer	Helen Boyd, Centre Manager helen.boyd@smartworks.org.uk 0191 255 1906
Deputy Safeguarding Officer(s)	Sarah Lou Murrah, Referral and Outreach Lead sarahlou.murray@smartworks.org.uk 0191 255 1906
Local Safeguarding Lead on Smart Works Newcastle Board	Julie Cuthbertson Julie.cuthbertson@smartworks.org.uk

Reading

Role	Name and Contact information
Safeguarding Officer	Audrey Kirk, Service Delivery Manager Audrey.kirk@smartworks.org.uk 01189 594245
Deputy Safeguarding Officer(s)	Anna Fowler, Development and Fundraising Manager anna.fowler@smartworks.org.uk 01189 594245
Local Safeguarding Lead on Smart Works Reading Board	Claire Murdoch, Trustee Claire.murdoch@smartworks.org.uk

These contact details are displayed in communal areas in both centres and also included in the Safeguarding Training which all staff, volunteers and trustees must complete.

Recruitment Checks

Where the Board is operating a policy of completing DBS checks, the recruiter will:

- obtain a basic Disclosure Barring Service (DBS) check;
- renew DBS checks every 3 years

Recruiting managers must ensure that the above checks are included into the role profile when recruiting to ensure that applicants are aware of what checks they will be required to satisfy. Checks must be completed before employment commences or before a member of staff or volunteer carries out any unsupervised activity. This must be done with their consent.

It is important to ensure that any members of staff or volunteers who have not had any checks or are still awaiting the outcome of any checks are not responsible for the supervision and care of adults at risk without being accompanied by a member of staff or volunteer who has had the relevant checks.

A basic check will contain details of convictions and conditional cautions considered to be unspent under the terms of the Rehabilitation of Offenders Act 1974. Smart Works will not automatically refuse applicants who have a criminal record as this is discriminatory. All cases should be reviewed on their own merits and applicants should be allowed to meet to discuss any record before a decision is taken on whether the job or volunteering offer is withdrawn. In addition to the above, there will be a formal recruitment and interview process for staff, trustees and volunteers.

Lone Working

Smart Works will ensure, so far as is reasonably practicable, that staff, volunteers and any other person who is required to work alone or unsupervised are protected from risks to their health and safety. Measures will also be adopted to protect anyone else affected by solitary working.

Full details are available in the **Lone Working Policy**.

Sharing the information in this Policy

Staff, Volunteers and Trustees

To ensure staff, volunteers and Trustees are aware of their Safeguarding responsibilities, the following steps are taken:

- Safeguarding is included in all staff, volunteer and Trustee inductions. This includes compulsory reading of the staff, volunteer or trustee handbook, completion of the Smart Works online safeguarding training and all new starters being directed to where they can find relevant policies on Sharepoint.
- The Smart Works online safeguarding training is reviewed annually and must be completed annually by all staff, trustees and volunteers.
- Where needed, externally provided training is accessed.

To check these steps are adhered to Safeguarding is a regular agenda point at Board Meetings and where possible completion of the steps above is tracked (eg. online training logs the date someone completed the training and staff confirm they have read the Staff Handbook in writing).

Smart Works clients

To ensure those who use our service know what to do if they are concerned about possible abuse or neglect by a staff member, volunteer or trustee information is displayed in our waiting area. This includes the photo and contact details for the Safeguarding Officer, Deputy Officer and Board Lead.

Reviewing this Policy

This policy is reviewed annually, with external advice being sought to verify approach. In 2020 The Ann Craft Trust advised on and reviewed our Safeguarding Policies and the accompanying scenarios. The Ann Craft Trust also reviewed the policy in January 2022.

Appendix 1

Incident Report Form

Safeguarding Adults at Risk: Incident Report Form		
Name of Person reporting a concern	Date	Location
Name of Adult at Risk	Address	Telephone Number
Has the adult given consent to report this allegation of abuse?		Yes/No
Do they have capacity to participate in giving their consent?		Yes/No
Has this person been informed of the action that will be taken?		Yes/No
Has this person any particular wishes relating to the reporting process?		
Are there any outcomes that this person wishes to achieve from this process?		

Details of the allegation of abuse

Please provide as much detail as possible about the allegation including:

- The circumstances in which the disclosure came about
- As much detail as possible, ideally in the adult's own words. Take care to discern between facts, opinion, observation and allegation

Signature of the author

**Name and signature of the
Safeguarding Officer this incident
was reported to**

Next steps and actions (including dates)

Appendix 2

Guidance and information

Making Safeguarding Personal

There has been a cultural shift towards Making Safeguarding Personal within the safeguarding process. This is a move from prioritising outcomes demanded by bureaucratic systems. The safeguarding process used to involve gathering a detailed account of what happened and determining who did what to whom. Now the outcomes are defined by the person at the centre of the safeguarding process.

The safeguarding process places a stronger emphasis on achieving satisfactory outcomes that take into account the individual choices and requirements of everyone involved.

“What good is it making someone safer if it merely makes them miserable?” – Lord Justice Mundy, “What Price Dignity?” (2010)

What this means in practice is that adults should be more involved in the safeguarding process. Their views, wishes, feelings and beliefs must be taken into account when decisions are made.

The Care Act 2014 builds on the concept, stating that “We all have different preferences, histories, circumstances and lifestyles so it is unhelpful to prescribe a process that must be followed whenever a concern is raised.”

However, the Act is also clear that there are key issues that should be taken into account when abuse or neglect are suspected, and that there should be clear guidelines regarding this.

<https://www.local.gov.uk/topics/social-care-health-and-integration/adult-social-care/making-safeguarding-personal>

Capacity – Guidance on Making Decisions

The issue of capacity or decision making is a key one in safeguarding adults. It is useful for organisations to have an overview of the concept of capacity.

We make many decisions every day, often without realising. We make so many decisions that it's easy to take this ability for granted.

But some people are only able to make some decisions, and a small number of people cannot make any decisions. Being unable to make a decision is called "lacking capacity".

To make a decision we need to:

- Understand information
- Remember it for long enough
- Think about the information
- Communicate our decision

A person's ability to do this may be affected by things like learning disability, dementia, mental health needs, acquired brain injury, and physical ill health.

The Mental Capacity Act 2005 (MCA) states that every individual has the right to make their own decisions and provides the framework for this to happen.

The MCA is about making sure that people over the age of 16 have the support they need to make as many decisions as possible.

The MCA also protects people who need family, friends, or paid support staff to make decisions for them because they lack capacity to make specific decisions.

Our ability to make decisions can change over the course of a day.

Here are some examples that demonstrate how the timing of a question can affect the response:

- A person with epilepsy may not be able to make a decision following a seizure.
- Someone who is anxious may not be able to make a decision at that point.
- A person may not be able to respond as quickly if they have just taken some medication that causes fatigue.

In each of these examples, it may appear as though the person cannot make a decision. But later in the day, presented with the same decision, they may be able to at least be involved.

The MCA recognises that capacity is decision-specific, so no one will be labelled as entirely lacking capacity. The MCA also recognises that decisions can be about big life-changing events, such as where to live, but equally about small events, such as what to wear on a cold day.

To help you to understand the MCA, consider the following five points:

1. Assume that people are able to make decisions, unless it is shown that they are not. If you have concerns about a person's level of understanding, you should check this with them, and if applicable, with the people supporting them.
2. Give people as much support as they need to make decisions. You may be involved in this – you might need to think about the way you communicate or provide information, and you may be asked your opinion.
3. People have the right to make unwise decisions. The important thing is that they understand the implications. If they understand the implications, consider how risks might be minimised.

4. If someone is not able to make a decision, then the person helping them must only make decisions in their “best interests”. This means that the decision must be what is best for the person, not for anyone else. If someone was making a decision on your behalf, you would want it to reflect the decision you would make if you were able to.
5. Find the least restrictive way of doing what needs to be done.

Remember:

- You should not discriminate or make assumptions about someone’s ability to make decisions, and you should not pre-empt a best-interests decision merely on the basis of a person’s age, appearance, condition, or behaviour.
- When it comes to decision-making, you could be involved in a minor way, or asked to provide more detail. The way you provide information might influence a person’s ultimate decision. A person may be receiving support that is not in-line with the MCA, so you must be prepared to address this.

Consent and Information Sharing

Staff, trustees and volunteers should always share safeguarding concerns in line with their organisation's policy, usually with their safeguarding officer in the first instance, except in emergency situations. As long as it does not increase the risk to the individual, the staff member, trustee or volunteer should explain to them that it is their duty to share their concern with their safeguarding officer.

The safeguarding officer will then consider the situation and plan the actions that need to be taken, in conjunction with the adult at risk and in line with the organisation's policy and procedures and local safeguarding adults board policy and procedures.

To make an adult safeguarding referral you need to call the local safeguarding adults team. This may be part of a MASH (*Multi-Agency Safeguarding Hub*). A conversation can be had with the safeguarding adults team without disclosing the identity of the person in the first instance. If it is thought that a referral needs to be made to the safeguarding adults team, consent needs to be sought from the adult at risk.

Individuals may not give their consent to the sharing of safeguarding information with the safeguarding adult's team for a number of reasons. Reassurance, appropriate support and revisiting the issues at another time may help to change their view on whether it is best to share information.

If they still do not consent, then their wishes should usually be respected. However, there are circumstances where information can be shared without consent such as when the adult does not have the capacity to consent, it is in the public interest because it may affect other people or a serious crime has been committed. This should always be discussed with your safeguarding lead and the local authority safeguarding adults team.

If someone does not want you to share information outside of the organisation or you do not have consent to share the information, ask yourself the following questions:

- Is the adult placing themselves at further risk of harm?
- Is someone else likely to get hurt?
- Has a criminal offence occurred? This includes: theft or burglary of items, physical abuse, sexual abuse, forced to give extra money for lessons (financial abuse) or harassment.
- Is there suspicion that a crime has occurred?
- Are there children in the household? If yes, then a referral to the Children's Safeguarding team needs to be made.

If the answer to any of the questions above is 'yes' - then you can share without consent and need to share the information.

When sharing information there are seven Golden Rules that should always be followed.

1. Seek advice if in any doubt
2. Be transparent - The Data Protection Act (DPA) is not a barrier to sharing information but to ensure that personal information is shared appropriately; except in circumstances where by doing so places the person at significant risk of harm.
3. Consider the public interest - Base all decisions to share information on the safety and well-being of that person or others that may be affected by their actions.
4. Share with consent where appropriate - Where possible, respond to the wishes of those who do not consent to share confidential information. You may still share information without consent, if this is in the public interest.
5. Keep a record - Record your decision and reasons to share or not share information.

6. Accurate, necessary, proportionate, relevant and secure - Ensure all information shared is accurate, up-to-date and necessary, and share with only those who need to have it.
7. Remember the purpose of the Data Protection Act (DPA) is to ensure personal information is shared appropriately, except in circumstances where by doing so may place the person or others at significant harm.

Appendix 3

Adult at risk of abuse or neglect definition for home nations

Safeguarding legislation has moved away from the term ‘vulnerable adult’, instead using the term ‘adult at risk’. This term illustrates that it is the circumstances affecting people with care and support needs that causes them to be at risk of abuse or neglect.

<p>England (Care Act 2014)</p> <p>An "adult at risk" is an individual aged 18 years and over who:</p> <p>(a) has needs for care and support (whether or not the local authority is meeting any of those needs)</p> <p>(b) Is experiencing, or at risk of, abuse or neglect</p> <p>(c) 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.</p>	<p>Wales (Social Services and Well Being Act 2014)</p> <p>An "adult at risk" is an individual aged 18 years and over who:</p> <p>(a) Is experiencing or is at risk of abuse or neglect,</p> <p>(b) Has needs for care and support (whether or not the authority is meeting any of those needs)</p> <p>and</p> <p>(c) As a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it.</p>
<p>Scotland (Adult Support and Protection Act 2007)</p> <p>An “Adult at risk” is an individual aged 16 years and over who:</p> <p>(a) Is unable to safeguard their own well-being, property, rights or other interests,</p> <p>(b) Is at risk of harm, and</p> <p>(c) Because they are affected by disability, mental disorder, illness or physical or mental infirmity, is more vulnerable to being harmed than adults who are not so affected.</p>	<p>NI (Adult Safeguarding Prevention and Protection in Partnership 2015)</p> <p>An Adult at Risk of Harm is a person aged 18 or over, whose exposure to harm through abuse, exploitation or neglect may be increased by their personal characteristics and/or life circumstances.</p> <p>Personal characteristics may include, but are not limited to, age, disability, special educational needs, illness, mental or physical frailty or impairment of, or disturbance in, the functioning of the mind or brain. Life circumstances may include, but are not limited to, isolation, socio-economic factors and environmental living conditions.</p> <p>An ‘adult in need of protection’ is a person aged 18 or over, whose exposure to harm through abuse, exploitation or neglect may be increased by their:</p>

	<p>A) personal characteristics AND/OR</p> <p>B) life circumstances AND</p> <p>C) who is unable to protect their own well-being, property, assets, rights or other interests; AND</p> <p>D) where the action or inaction of another person or persons is causing, or is likely to cause, him/her to be harmed.</p> <p>In order to meet the definition of an 'adult in need of protection' either (A) or (B) must be present, in addition to both elements (C), and (D).</p>
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Types of Abuse and Neglect

Abuse is a violation of an individual's human and civil rights by another person or persons.

There are different types and patterns of abuse and neglect and different circumstances in which they may take place. Each Home Country defines categories of adult abuse and harm as follows:

Categories of Abuse / Harm

England (Care Act 2014)	Wales (Social Services and Well Being Act 2014)
Physical	Physical
Sexual	Sexual
Emotional/Psychological/Mental	Psychological
Neglect and acts of Omission	Neglect
Financial or material abuse	Financial
Discriminatory	
Organisational / Institutional	
Self-neglect	
Domestic Abuse (including coercive control)	
Modern slavery	
Scotland (Adult Support and Protection Act 2007)	NI (Adult Safeguarding Prevention and Protection in Partnership 2015)
Physical	Physical
Psychological	Sexual violence
Financial	Psychological / emotional
Sexual	Financial
Neglect	Institutional
	Neglect
	Exploitation
	Domestic violence

	Human trafficking Hate crime
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There are additional definitions which, while not included in legislation, are also relevant. These are:

- Cyber Bullying
- Forced Marriage
- Mate Crime
- Radicalisation

Principles of Safeguarding Adults for each home nation

England (Care Act 2014)	Wales (Social Services and Well Being Act 2014)
<p>The Act's principles are:</p> <ul style="list-style-type: none"> ● Empowerment - People being supported and encouraged to make their own decisions and 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. 	<p>The Act's principles are:</p> <ul style="list-style-type: none"> ● Pay attention to what people want. ● Remember people's dignity. ● Think about each person. Think about their culture, beliefs and language. ● Support people to be part of decisions about their life. ● Expect adults to know what is best for themselves. ● Support adults to be as independent as possible.
Scotland (Adult Support and Protection Act 2007)	NI (Adult Safeguarding Prevention and Protection in Partnership 2015)
<p>The Act's principles are:</p> <p>The overarching principle underlying Part 1 of the Act is that any intervention in an individual's affairs should provide benefit to the individual, and should be the least restrictive option of those that are available which will meet the purpose of the intervention.</p> <p>This is supported by a set of guiding principles which, together with the overarching principle, must be taken</p>	<p>The Act's principles are:</p> <ul style="list-style-type: none"> ● A Rights-Based Approach – To promote and respect an adult's right to be safe and secure; to freedom from harm and coercion; to equality of treatment; to the protection of the law; to privacy; to confidentiality; and freedom from discrimination. ● An Empowering Approach – To empower adults to make informed choices about their lives, to maximise their opportunities to participate in wider society, to keep themselves

account of when performing functions under Part 1 of the Act. These are:

- The wishes and feelings of the adult at risk (past and present);
- The views of other significant individuals, such as the adult's nearest relative; their primary carer, guardian, or attorney; or any other person with an interest in the adult's well-being or property;
- The importance of the adult taking an active part in the performance of the function under the Act;
- Providing the adult with the relevant information and support to enable them to participate as fully as possible;
- The importance of ensuring that the adult is not treated less favourably than another adult in a comparable situation;

and

- The adult's abilities, background and characteristics (including their age, sex, sexual orientation, religious persuasion, racial origin, ethnic group and cultural and linguistic heritage).

safe and free from harm and enabled to manage their own decisions in respect of exposure to risk.

- **A Person-Centred Approach** – To promote and facilitate full participation of adults in all decisions affecting their lives taking full account of their views, wishes and feelings and, where appropriate, the views of others who have an interest in his or her safety and well-being.

- **A Consent-Driven Approach** – To make a presumption that the adult has the ability to give or withhold consent; to make informed choices; to help inform choice through the provision of information, and the identification of options and alternatives; to have particular regard to the needs of individuals who require support with communication, advocacy or who lack the capacity to consent; and intervening in the life of an adult against his or her wishes only in particular circumstances, for very specific purposes and always in accordance with the law.

- **A Collaborative Approach** – To acknowledge that adult safeguarding will be most effective when it has the full support of the wider public and of safeguarding partners across the statutory, voluntary, community, independent and faith sectors working together and is delivered in a way where roles, responsibilities and lines of accountability are clearly defined and understood. Working in partnership and a person-centred approach will work hand-in-hand.

Appendix 4

The Prevent strategy and Safeguarding vulnerable people from extremism

The Prevent strategy is part of the UK Counter Terrorism Strategy (CONTEST) published by the Government in 2011.

Prevent has three main objectives to:

- respond to the ideological challenge of terrorism
- support vulnerable people and prevent people from being drawn into terrorism
- work with key sectors and institutions and address risks

It focuses on early intervention before any illegal activity takes place. The aim is to reduce the likelihood of individuals who support a violent extremist ideology of becoming terrorists.

Indicators

There is no single profile of a person likely to become involved in extremism and the process of radicalisation is different for every individual.

Radicalisers use normal social processes such as loyalty, self-perception, and fear of exclusion to influence others. Signs that an individual may be being groomed into extremism could be:

- expressing extreme political or religious views
- individuals becoming withdrawn and stopping participating in their usual activities
- expressing feelings of anger, grievance or injustice
- discussing a new group of friends who have an extremist ideology
- using language that supports 'us and them' thinking
- possessing or discussing searching for extremist literature online.

Reporting concerns and making a Prevent referral

How to report concerns about a child or adult at risk of extremism.

1. Make safe

If there is immediate danger then contact the emergency services on 999

2. Inform the Safeguarding Officer

Inform the Safeguarding Officer using the Incident Form (Appendix 1)

3. Refer

The Safeguarding Officer or Deputy, will make a referral to the appropriate body:

- Local council Prevent Team. These are specific to your area.

Islington, North London

To make a referral from our North London centre, call the Prevent team. For children call 020 7527 7400 (9am to 5pm, Monday to Friday) or 020 7226 0992 (out of hours and weekends). You can also email prevent@islington.gov.uk.

For Adults, call 020 7226 0992 (9am to 5pm, Monday to Friday) or 020 7226 0992 (out of hours and weekends). You can also email prevent@islington.gov.uk.

Kensington & Chelsea, West London

To make a referral in West London, call the Prevent Team on 020 8753 5727 or email prevent3@rbkc.gov.uk

Birmingham

To make a referral in Birmingham, call 0121 303 7682 or 07557 203290. You can also email Waqar Ahmed, Prevent Manager (waqar.ahmed@birmingham.gov.uk)

Edinburgh

To make a referral in Edinburgh, call 0131 200 2324 or email socialcaredirect@edinburgh.gov.uk

Leeds

To make a referral in Leeds, call 0113 535 0810 or email prevent@leeds.gov.uk

Greater Manchester

To make a referral in Greater Manchester, call 0161 234 1489 or email the Manchester Prevent and Community Cohesion Coordinator Samiya Butt on s.butt@manchester.gov.uk.

Newcastle

To make a referral in Newcastle, you should [complete this Prevent Referral Form](#). If you have any questions whilst filling in the form, call: Prevent Coordinator, Joe Hogan 0191 277 7072 or 07710 845366 or Prevent Education Officer, Gail Forbes 0191 277 2066 or 07817 549 718 or email prevent@newcastle.gov.uk

Reading

To make a referral in Reading, email prevent@thamesvalley.pnn.police.uk or call Susan Powell, Local Authority Lead on 07881 856 801.

- If you are concerned about extremism in a school or organisation that works with children you should contact call 020 7340 7264. You can also email counter.extremism@education.gov.uk.

Appendix 5

Defensible Decision Making

A defensible decision is one that will withstand scrutiny with hindsight. Importantly, it is not a *defensive* practise where you are 'covering your back', but instead justifies our decision making, evaluating all the evidence and options available, and recording all the information properly.

A defensible decision:

- Is evidence based, using all the information available
- Thoroughly evaluates and analyses the information
- Has weighed up different outcomes and options
- Evidences the rationale for the decision, including anyone consulted
- Follows policy and legislation
- Is recorded in a way that evidences all the above

Recording a defensible decision:

- Follow the steps outlined in the Smart Works Safeguarding policy, including using the Incident Report Form to record any allegations of abuse
- A written record is crucial
- Cover what has been decided and also why
- How have you come to this decision?
- What information have you used in making the decision?
- What other options are there and why did you not consider them to be viable?

Email chains can be used as evidence of decision making, so it is important to ensure that they always cover the rationale behind the decision.

Sources: <https://www.nottinghamshire.gov.uk/media/1739968/defensible-decision-making-ppt.pptx>

Ann Craft Trust Training session for Smart Works, September 2021

Appendix 6

Language and Phrases to use with a client making a disclosure of domestic abuse

“you were right to tell me” “you are not alone”

“there is help if and when you are ready”

“Are you aware of your local domestic abuse services and helplines and how to contact them?”

“Is your partner with you now?” “Where is your partner now?”

“Do you have children? How old are they? Where are they?”

“Would they know how to get help in an emergency / find somewhere safe?”

“What are your immediate concerns or fears?”

“Do you feel safe at the moment?” “Are there times when you don’t feel safe?”

“Do you have a safe place to go if things change?” “Could the children go with you?”

“Do you have a code word/phrase to let someone know that it is not safe to talk or to ask someone to phone the police?”

“Could you ask someone you trust to make a check-in call so you know that someone will contact you at certain times of the week?”

“Do you have a safety plan?”

Source: Ann Craft Trust Safeguarding Training for Smart Works, September 2021

Appendix 7

Local Safeguarding Teams

A full list can be found and searched using the link below- each borough in London has its own Safeguarding team. We can check client paperwork to find the borough that they live in.

Adults: <https://www.anncrafttrust.org/resources/find-your-nearest-safeguarding-adults-board/>

Children: <https://www.safecic.co.uk/your-scb-acpc/55-free-downloads-and-safeguarding-links/61-safeguarding-children-board-links>

Kensington And Chelsea:

Adult Safeguarding helpline: Tel: 020 7361 3013 (9am to 5pm) / Tel: 020 7373 2227 (out-of-office-hours) Email: socialservices@rbkc.gov.uk

Children's Social Care Contact Details where you can contact the Duty Advisor for Child Protection: 020 7361 3013 / 24 hours

Islington:

[https://www.islingtonscb.org.uk/SiteCollectionDocuments/Safeguarding Adults Quick Guide Nov 2011 public.pdf](https://www.islingtonscb.org.uk/SiteCollectionDocuments/Safeguarding_Adults_Quick_Guide_Nov_2011_public.pdf)

Adults: Islington Social Service Access Service on 020 7527 2299 (9-5), or 020 7226 0992 (outside office hours).

Children: call the Referral and Advice Team on 020 7527 7400 (9- 5) or 020 7226 0992 (outside office hours).

Birmingham:

Adults:

<https://www.bsab.org/>

CSAdultSocialCare@birmingham.gov.uk or Telephone: 0121 303 1234 (9-5) or Out of Hours team on 0121 464 9001 or email AMHPoutofhours@birmingham.gov.uk

Children:

<https://lscpbirmingham.org.uk/>

Children's Advice & Support Service (CASS) on 0121 303 1888 or via secure email; CASS@birminghamchildrenstrust.co.uk. Outside of normal office hours please call 0121 675 4806 for the Emergency Duty Team

Reading:

Adults:

<https://www.westberks.gov.uk/safeguardingadultsboard>

West Berkshire Safeguarding Adults Board, safeguardingadults@westberks.gov.uk or 01635 519056.

Children:

<https://www.berkshirerwestsafeguardingchildrenpartnership.org.uk/scp>

Berkshire West Safeguarding Children Partnership, Tel: **0118 937 3641**, 9am to 5pm, Monday to Friday (excluding bank holidays). Outside these hours, contact the Emergency Duty Service (EDS) on **01344 351999**.

Leeds:

Adults:

<https://leedssafeguardingadults.org.uk/>

Adults: Leeds Safeguarding Adults Board, Social Care 0113 222 4401 or 0113 378 0644 (Out of hours)

Children:

<https://www.leedsscp.org.uk/>

Leeds Safeguarding Children Partnership, **During office hours** (9.00am – 5.00pm) call the Duty & Advice Team on 0113 376 0336 (option 2), **Out of office hours** (evenings, weekends and bank holidays) call the Children's Emergency Duty Team (EDT) on 0113 5350600.

Manchester:

Adults and Children:

<https://www.manchestersafeguardingpartnership.co.uk/>

Manchester Safeguarding Partnership, Manchester Contact Centre **0161 234 5001** (open 24 hours a day, seven days a week) or email: mcsreply@manchester.gov.uk

Newcastle:

Adults and Children:

<https://www.newcastlesafeguarding.org.uk/report-a-concern/>

Children: Initial Response Service – 0191 277 2500, Emergency Duty Team – 0191 278 7878

Adults: complete the [online referral form](#); OR download the [Safeguarding Adults Initial Enquiry Form](#).

Edinburgh:

Adults: Adult Protection, 0131 200 2324 or socialcaredirect@edinburgh.gov.uk or 0800 731 6969 (out of hours).

Children: Social Care Direct, 0131 200 2327 or socialcaredirect@edinburgh.gov.uk

Whistleblowing

If you have serious concerns about how Smart Works have handled a safeguarding concern, you can contact the local authority safeguarding team directly.

whistleblowing@charitycommission.gov.uk

Please refer to our Complaints and Whistleblowing Procedure for further information.