



## 1. Purpose

1. To protect the Service User's right to live in safety, free from abuse and neglect.
2. To ensure Suffolk County Council Safeguarding Policy and Procedure is understood by all staff at Concorde Care in The Community and that Suffolk County Council safeguarding procedures dovetail with the service's policy and procedure.
3. To set out the key arrangements and systems Concorde Care in The Community has in place for safeguarding and promoting the welfare of adults at risk, and to ensure compliance with local policies and procedures.
4. To have a clear, well-publicised policy of zero-tolerance of abuse within Concorde Care in The Community.

To meet the legal requirements of the regulated activities that Concorde Care in The Community is registered to provide:

- Serious Crime Act 2015 Section 76
- Domestic Violence, Crime and Victims Act 2004
- The Counter Terrorism and Security Act 2015
- The Modern Slavery Act 2015
- Anti-social Behaviour, Crime and Policing Act 2014
- The Criminal Justice and Courts Act 2015 Section 20-25
- Public Interest Disclosure Act 1998
- Protection of Freedoms Act 2012 (Disclosure and Barring Service Transfer of Functions) Order 2012
- The Care Act 2014
- Care Quality Commission (Registration) Regulations 2009
- Equality Act 2010
- Human Rights Act 1998
- Mental Capacity Act 2005
- Safeguarding Vulnerable Groups Act 2006
- The Health and Social Care Act 2008 (Regulated Activities) (Amendment) Regulation 2012



## 2. Scope

1. The following roles may be affected by this policy:
  - All staff
2. The following Service Users may be affected by this policy:
  - Service Users
3. The following stakeholders may be affected by this policy:
  - Family
  - Advocates
  - Representatives
  - Commissioners
  - External health professionals
  - Local Authority
  - NHS



## 3. Objectives

1. To ensure that all staff working for, or on behalf of Concorde Care in The Community, understand their responsibilities in relation to safeguarding adults at risk and know who to escalate concerns to within Concorde Care in The Community.
2. To manage the safety and well-being of adults in line with the six principles of safeguarding.
3. To identify lessons to be learned from cases where adults have experienced abuse or neglect.
4. Concorde Care in The Community aims to support and empower each adult to make choices, to have control over how they want to live their own lives, and to prevent abuse and neglect occurring in the future which is a key underpinning principle of Making Safeguarding Personal (MSP) Concorde Care in The Community intends to take this approach with all safeguarding concerns.



## 4. Policy

1. Everybody has the right to live a life that is free from harm and abuse. Concorde Care in The Community recognises that safeguarding adults at risk of abuse or neglect is everybody's business. Concorde Care in The Community aims to ensure that all adults at risk of abuse or neglect are enabled to live and work, be cared for and supported in an environment free from abuse, harassment, violence or aggression. Concorde Care in The Community safeguarding policies and procedures will dovetail with Suffolk County Council multi-agency policy and procedures, which we understand take precedence over Concorde Care in The Community policy and procedures. Concorde Care in The Community will ensure that Suffolk County Council policies and procedures are reflected within our own policy and procedure and that this is shared with all staff and is accessible and available for staff to follow.

2. We aim to provide services that will be appropriate to the adult at risk and not discriminate because of disability, age, gender, sexual orientation, race, religion, culture, or lifestyle. We will make every effort to enable Service Users to express their wishes and make their own decisions to the best of their ability, recognising that such self-determination may well involve risk.

3. Concorde Care in The Community will follow the six principles as set out in guidance to the Care Act 2014 and this will inform practice with all Service Users:

- **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.

4.4 Concorde Care in The Community understands the importance of working collaboratively to ensure that:

- The needs and interests of adults at risk are always respected and upheld
- The human rights of adults at risk are respected and upheld
- A proportionate, timely, professional and ethical response is made to any adult at risk who may be experiencing abuse
- All decisions and actions are taken in line with the Mental Capacity Act 2005
- Each adult at risk maintains:
  - Choice and control
  - Safety
  - Health
  - Quality of life
  - Dignity and respect

4.5 Our robust governance processes will make sure that staff working for and on behalf of Concorde Care in The community recognise and respond to the main forms of abuse which are set out in the Care Act 2014 Statutory Guidance Chapter 14, which is not an exhaustive list but an illustration as to the sort of behaviour that could give rise to a safeguarding concern:

- Physical abuse
- Domestic violence
- Sexual abuse
- Psychological abuse
- Financial or material abuse
- Modern slavery
- Discriminatory abuse
- Organisational abuse

- Neglect and acts of omission
- Self-neglect

**4.6** Concorde Care in The Community is committed to the principles of 'Making Safeguarding Personal' and aims to ensure that safeguarding is person-led and focused on the outcomes that Service Users want to achieve. We will engage Service Users in a conversation about how best to respond to their safeguarding situation in a timely way that enhances involvement, choice and control as well as improving quality of life, well-being and safety.

#### **4.7 Registered Manager's Responsibilities**

- To establish the facts about the circumstances giving rise for concern
- To identify sources and level of risk
- To ensure information is recorded and that the Suffolk County Council Adult Safeguarding Team is contacted to inform them of the concern or harm
- If a Service User is at immediate risk of harm, the manager will contact the Police. The CQC will also be informed
- In all cases of alleged harm, there will be early consultation between the Nominated Manager, Suffolk County Council and the Police to determine whether or not a joint investigation is required. We understand that it may also be necessary to advise the relevant Power of Attorney, if there is one appointed. In dealing with incidents of potential harm, people have rights which must be respected and which may need to be balanced against each other
- The wishes of the person harmed will be taken into account whenever possible. This may result in no legal action
- Documentation of any incidents of harm in the Service User's file and using body maps to record any injuries
- Follow Suffolk County Council policy guidelines where applicable
- Report any incidents of abuse to the relevant parties
- Work with multi-agencies
- Advise and support staff
- Ensure staff are trained to enhance knowledge
- Actively promote the "Whistleblowing" policies

#### **4.8 The Care Worker's Responsibilities**

- To be able to recognise and report incidences of harm
- To report concerns of harm or poor practice that may lead to harm
- To remain up to date with training
- To follow the policy and procedures
- To know how and when to use the Whistleblowing procedures
- To understand the Mental Capacity Act and how to apply it in practice

#### **4.9 General Principles**

- We will have robust recruiting and safer staffing policies in place to make sure that our staff are fit to work with adults at risk and are compliant with national safe recruitment and employment practices, including the requirements of the Disclosure and Barring Service
- A named safeguarding lead will be in place that is responsible for embedding safeguarding practise and improving practice in line with national and local developments. At Concorde Care in The Community this person is
- Any staff member who knows or believes that harm is occurring will report it to their line manager as quickly as possible, or if they feel they cannot follow the regular reporting procedure, they should use the Whistleblowing process
- Concorde Care in The Community will work collaboratively with other agencies, including liaison in relation to the investigation of allegations and will ensure its procedures dovetail with Suffolk County Council multi-agency procedures
- Concorde Care in The Community will use incident reporting, root cause analysis, lessons learned and auditing to determine themes to improve care practice

- We will have a learning and development strategy which specifically addresses adult safeguarding. We will provide training on the identification and reporting of harm, as well as training on the required standards in relation to procedures and processes should something need to be reported
- Concorde Care in The Community recognise our responsibilities in relation to confidentiality and will share information appropriately
- We will have a zero tolerance on harm
- We will work in partnership with other agencies to ensure that concerns or allegations of abuse are appropriately referred for investigation to the most appropriate agency
- We will ensure that any action that is taken is assessed, proportionate and reflective of risk presented to the people who use the services
- We will report any incidents in line with our regulatory requirements
- Concorde Care in The Community will adhere to the Code of Conduct for Care Workers
- There is a clear, well-publicised Whistleblowing policy and procedure in place that staff know how to use

#### 4.10 Prevention – Providing Information to Support Service Users

- Concorde Care in The Community will support Service Users by providing accessible, easy to understand information on what abuse is and what signs to look out for. This will include Service Users’ rights and how to get help and support if they need it through the Care Plan process. We will comply with the Accessible Information Standards
- All Service Users will receive a copy of the Service User’s Handbook and have access to the Complaints Policy and Procedure and be given information on how to escalate any concerns to the Commissioner, CQC, advocacy or Local Government and Social Care Ombudsman should they not be satisfied with the approach taken by Concorde Care in The Community

#### 4.11 Prevention – Raising Awareness

- Staff will need to be trained and understand the different patterns and behaviours of abuse as detailed in the Care Act Chapter 14 and Concorde Care in The Community will ensure that they are able to respond appropriately
- Concorde Care in The Community will ensure all staff are trained on the Whistleblowing Policy and Procedure
- During induction training, all employees will complete the “Understanding Abuse” workbook as part of the Care Certificate



## 5. Procedure

### 1. Responding to Disclosure, Suspicion or Witnessing of Abuse

Where an adult at risk discloses or discusses potential abuse or harm the staff member must be able to:

- **Recognise:** Identify that the adult at risk may be describing abuse, even when they may not be explicit
- **Respond:** Stay calm, listen and show empathy
- **Reassure** them that it will be taken seriously and explain that there is a duty to report the issues internally and what may happen next
- **Record:** Write up notes of the conversation clearly and factually as soon as possible
- **Report** in a timely manner to the appropriate people and organisations

### 5.2 Responding to a Disclosure

**Remember you are not investigating. Do:**

- Stay calm and try not to show shock
- Listen very carefully
- Be sympathetic
- Be aware of the possibility that medical evidence might be needed

Tell the person that:

- They did a good/the right thing in telling you

- You are treating the information seriously
- It was not their fault

Explain that you must tell your line manager and, with their consent, your manager will contact Suffolk County Council Safeguarding Adults Team and/or the Police, the Nominated Manager must be informed. Concorde Care in The Community will, in specific circumstances, need to contact Suffolk County Council Adult Safeguarding Team without their consent but their wishes will be made clear throughout.

If a referral is made but the adult at risk is reluctant to continue with an investigation, record this and bring this to the attention of the Suffolk County Council Safeguarding Adults Team. This will enable a discussion on how best to support and protect the adult at risk. However, a professional case discussion will still need to take place and must be recorded appropriately.

### **5.3 Responding to Abuse or Neglect – What to do**

Concorde Care in The Community must ensure that staff:

- Address any immediate safety and protection needs
- Assess any risks and take steps to ensure that the adult is in no immediate danger
- Where appropriate, call 999 for the emergency services if there is a medical emergency, other danger to life or risk of imminent injury, or if a crime is in progress. Where a crime is suspected of being committed, leave things as they are wherever possible.
- Call for medical assistance from the GP or other primary healthcare service if there is a concern about the adult's need for medical assistance or advice. Care Workers can call the NHS111 service for medical help or advice when the situation is not life-threatening or its out of hours
- The adult may feel frightened, so the Care Worker must ask whether they want the Care Worker to arrange for someone they feel comfortable with to stay with them
- Concorde Care in The Community will consider if there are other adults or children with care and support needs who are at risk of harm, and take appropriate steps to protect them
- The Care Worker will support and encourage the adult to contact the Police if a crime has been or may have been committed
- The Care Worker will contact their line manager as soon as possible for inform them of the incident or concern
- The Nominated Manager will be informed and contacted as soon as possible

### **5.4 Decision-Making Pre-Referral to the Suffolk County Council Adult Safeguarding Team**

The Nominated Manager or the Safeguarding Lead will usually lead on decision-making. Where such support is unavailable, consultation with another more senior staff will take place.

In the event that these are unavailable, advice must be taken from Suffolk County Council. Staff should also take action without the immediate authority of a line manager:

- If discussion with the manager would involve delay in an apparently high-risk situation
- If the person has raised concerns with their manager and they have not taken appropriate action (whistleblowing)

Concorde Care in The Community will ensure that staff are aware of Suffolk County Council reporting procedures and timescales for raising adult safeguarding concerns.

### **5.5 Referral to the Suffolk County Council Adult Safeguarding Team**

Concorde Care in The Community must ensure that Suffolk County Council Safeguarding Adult referral process is followed and must collect the following information to assist with the referral. The referral process must be clearly visible with contact numbers, including out-of-hours, where staff can access the information.

The referral information will also be required for some of the CQC notification of abuse documentation. Concorde Care in The Community must use any up to date Care Plan information where possible and have the following information available where possible:

- Demographic and contact details for the adult at risk, the person who raised the concern and for any other relevant individual, specifically carers and next of kin
- Basic facts, focussing on whether or not the person has care and support needs including communication and ongoing health needs
- Factual details of what the concern is about; what, when, who and where?

- Immediate risks and action taken to address risk
- Preferred method of communication
- If reported as a crime, details of which police station/officer, crime reference number, etc.
- Whether the adult at risk has any cognitive impairment which may impede their ability to protect themselves
- Any information on the person alleged to have caused harm
- Wishes and views of the adult at risk, in particular consent
- Advocacy involvement (includes family/friends)
- Information from other relevant organisations for example, the CQC
- Any recent history (if known) about previous concerns of a similar nature or concerns raised about the same person, or someone within the same household
- Names of any staff involved

### **5.6 Documenting a Disclosure**

Concorde Care in The Community must ensure that staff:

- Make a note of what the person actually said, using his or her own words and phrases
- Describe the circumstances in which the disclosure came about
- Note the setting and anyone else who was there at the time
- When there are cuts, bruises or other marks on the skin, use a body map to indicate their location noting the colour of any bruising
- Make sure the information the Care Worker write is factual
- Use a pen with black ink so that the report can be photocopied
- Try to keep your writing clear
- Sign and date the report, noting the time and location
- Be aware that the report may be needed later as part of a legal action or disciplinary procedure

### **5.7 Informing Relevant Inspectorate**

- By law, Concorde Care In The Community must notify the Care Quality Commission without delay, incidents of abuse and allegations of abuse, as well as any incident which is reported to or investigated by the Police
- Concorde Care in The Community must notify the CQC about abuse or alleged abuse involving a person(s) using the service, whether the person(s) is/are the victim(s), the abuser(s), or both
- Concorde Care in The Community must also alert the relevant local safeguarding authority when notification is made to the CQC about abuse or alleged abuse
- The forms are available on the CQC website
- If a concern is received via the whistleblowing procedure, Concorde Care in The Community must inform the Suffolk County Council Safeguarding Team and the CQC

### **5.8 Strategy Meeting / Case Conference**

- Following the investigation or at any time during the process, a case conference with all relevant agencies may be called to make decisions about future action to address the needs of the individual
- Any agency involved in the case may ask for a case conference to be held but the final decision to hold a conference is with the Suffolk County Council Safeguarding Adults Team Manager
- Concorde Care in The Community must ensure that they attend this meeting when invited and that all relevant information about the incident is available. A timeline of events is a useful document to prepare in complex cases

### **5.9 Involve the Service User Concerned Throughout the Process**

- The process of the enquiry must be explained to the Service User in a way they will understand and their consent to proceed with the enquiry obtained, if possible
- Arrangements will be made to have a relative, friend or independent advocate present if the person so desires. The relative, friend or independent advocate must not be a person suspected of being in any way involved or implicated in the abuse

- A review of a Service User's Care Plan must be undertaken to ensure individualised support following the incident
- The individual will be supported by the service to take part in the safeguarding process to the extent to which they wish, or are able to, having regard to their decisions and opinions, and they must be kept informed of progress

#### **5.10 Desired Outcomes Identified by the Adult**

The desired outcome by the adult at risk must be clarified and confirmed at the end of the conversation(s) to:

- Ensure that the outcome is achievable
- Manage any expectations that the adult at risk may have
- Give focus to the enquiry
- Staff should support adults at risk to think in terms of realistic outcomes but should not restrict or unduly influence the outcome that the adult would like. Outcomes should make a difference to risk, and at the same time satisfy the person's desire for justice and enhance their well-being
- The adult's views, wishes and desired outcomes may change throughout the course of the enquiry process
- There should be an on-going dialogue and conversation with the adult to ensure their view and wishes are gained as the process continues, and enquiries re-planned should the adult change their views
- The Service User should be informed of the outcome of any investigation, but guidance should be sought from the Suffolk County Council Adult Safeguarding Team before any outcome is shared

#### **5.11 Disclosure and Barring Service (DBS) Referral**

There is a statutory requirement for providers of Care to refer workers to the DBS for inclusion on the DBS Vetting and Barring scheme list if they consider that the person is guilty of misconduct such that a vulnerable adult was harmed or placed at risk of harm. This requirement covers both existing employees and those who leave their employment, and whose conduct comes to light at a later date. Please see the DBS/Disclosure Policy for further procedures regarding initial employment and referral.

#### **5.12 Consent**

When reporting information that directly concerns the safety of an adult at risk of harm, consent from the Service User is not required. However, informing the Service User of your concerns and your referral is good practice unless it would put you or your colleagues at risk or it would put the adult at further risk.

When reporting to a local authority allegations or concerns about an adult at risk of harm, the Local Authority must be informed whether the Service User is aware of the report. In reporting all suspected or confirmed cases of harm, an employee has a responsibility to act in the best interests of the Service User but still operate within the relevant legislation and the parameters of the codes and standards of their practice.

#### **5.13 Confidentiality and Information Sharing**

In seeking to share information for the purposes of protecting adults at risk, Concorde Care in The Community is committed to the following principles:

- Personal information will be shared in a manner that is compliant with our statutory responsibilities
- Adults at risk will be fully informed about information that is recorded about them and as a general rule, be asked for their permission before information about them is shared with colleagues or another agency. However, there may be justifications to override this principle if the adult or others are at risk
- Staff will receive appropriate training on Service User confidentiality and secure data sharing
- The principles of confidentiality designed to protect the management interest of Concorde Care in The Community must never be allowed to conflict with those designed to promote the interests of the adult at risk
- Staff will follow the policy on Data Protection and Confidentiality and comply with the Caldicott principle

#### **5.14 Pressure Ulcers**

Pressure ulcers are costly in terms of both Service User suffering and the use of resources. If the pressure ulcer is believed to have been caused by neglect, it must be reported as an adult safeguarding concern whether the pressure ulcer was acquired in a hospital, care setting or the Service User's own home. Concorde Care in The Community must ensure staff read and follow Safeguarding Adults Protocol Pressure Ulcers and the interface with a Safeguarding Enquiry, seeking advice and further guidance where required.

Where Service Users are new to the service, any pressure ulcers must be documented on a body map and reported in line with safeguarding procedures. Treatment must also be sought from the GP.

### **5.15 Medication Errors**

Concorde Care in The Community must follow local safeguarding reporting procedures for medication errors and ensure that notifications are made to the CQC in line with statutory requirements. Concorde Care in the Community will have an open and transparent approach to medication incidents and ensure that staff follow the organisation's Medication Errors and Near Misses Policy and understand their Duty of Candour responsibilities.

### **5.16 Abuse of Trust**

- A relationship of trust is one in which one person is in a position of power or influence over the other person because of their work or the nature of their activity
- Where the person who is alleged to have caused the abuse or neglect has a relationship of trust with the adult at risk because they are; a member of staff, a paid employee, a paid carer, a volunteer or a manager, Concorde Care in The Community should invoke disciplinary procedures for employed staff as well as taking action in line with this policy
- Concorde Care in The Community must ensure a referral is made to the Disclosure and Barring Service if an employee is found to have caused harm to an individual
- If the person who is alleged to have caused harm or neglect is a volunteer or member of a community group. Concorde Care in The Community must work with adult social services to support any action under this policy
- Where the person alleged to have caused the harm is a neighbour, a member of the public, a stranger or a person who deliberately targets vulnerable people, in many cases the policy and procedures will be used to ensure that the adult at risk receives the services and support that they may need
- In all cases, issues of consent, confidentiality and information sharing should be considered

### **5.17 Allegations Against People Who Are Relatives or Friends**

There is a clear difference between unintentional harm caused inadvertently by a relative or friend and a deliberate act of either harm or omission, in which case the same principles and responsibilities for reporting to the policy apply. In cases where unintentional harm has occurred, this may be due to lack of knowledge or due to the fact that the relative's own physical or mental needs make them unable to care adequately for the adult at risk. The relative may also be an adult at risk. In this situation the aim is to protect the adult from harm, work to support the relative to provide support and to help make changes in their behaviour in order to decrease the risk of further harm to the person they are caring for. A carer's assessment will take into account a number of factors and a referral to Suffolk County Council will be made as part of the safeguarding process.

### **5.18 Whistleblowing**

Whistleblowing is an important aspect of the support and protection of adults at risk of harm where staff are encouraged to share genuine concerns about a colleague's behaviour. Their behaviour may not be related to an adult at risk, but they may not be following the code of conduct or could be pushing boundaries beyond normal limits or displaying conduct which is a breach of the law, conduct which compromises health and safety or conduct which falls below established standards of practice with adults at risk.

Concorde Care in The Community has clear Whistleblowing policies and procedures in place which staff are frequently reminded about, and they must be familiar with and understand how to escalate and report concerns.

### **5.19 Abuse by Another Adult at Risk**

We recognise that we may also have responsibilities towards the person causing the harm, and certainly will have if they are both in a care setting or have contact because they attend the same place (for example, a day care centre). The person causing the harm may themselves be eligible to receive an assessment. In this situation, it is important that the needs of the adult at risk who is the alleged victim are addressed separately from the needs of the person causing the harm. It will be necessary to reassess the adult allegedly causing the harm.

### **5.20 Exploitation by Radicalisers Who Promote Violence**

Individuals may be susceptible to exploitation into violent extremism by radicalisers. Staff will be expected to follow the Radicalisation Policy and Procedure in place at Concorde Care in The Community.

### **5.21 Self-Neglect and Refusal of Care**

Concorde Care in The Community must ensure that staff understand the importance of delivering care as detailed in the Care Plan. Where a Service User refuses care this must always be documented. Where refusal occurs repeatedly it must be escalated by Concorde Care in The Community as a safeguarding concern and a request for a review of the Service User's care will be instigated.

### 5.22 Self-Funding Service Users

People who fund their own care arrangements are legally entitled to receive support if subject to abuse or neglect in exactly the same way as those supported or funded by the Local Authority. They are also entitled to the protections of the Deprivation of Liberty Safeguards process.

### 5.23 Risk Assessment and Management

Achieving a balance between the right of the individual to control their care package and ensuring adequate protections are in place to safeguard well-being is a very challenging task. The assessment of the risk of abuse, neglect and exploitation of Service Users will be integral in all assessment and planning processes. Assessment of risk is dynamic and ongoing, especially during the adult safeguarding process, and must be reviewed throughout so that adjustments can be made in response to changes in the levels and nature of risk.

### 5.24 Audit and Compliance

It is essential that the implementation of this policy and associated procedures is audited to ensure that Concorde Care in The Community is doing all it can to safeguard those people receiving its services. The audit of this policy will be completed through a systematic audit of:

- Recruitment procedures and Disclosure and Barring Checks
- Audits of incident reporting, frequency and severity
- Audit of training processes, including reviews of uptake of training and evaluations

Safeguarding concerns and incidents will be reviewed by the Senior Management Team as part of root and cause analysis with the following terms of reference:

- Review incident themes
- Reports from the lead responsible for Safeguarding within Concorde Care in The Community
- Look in detail at specific cases to determine learning or organisational learning
- Ensure implementation of the Safeguarding Policy and Procedure

### 5.25 Training and Competencies

Concorde Care in The Community will ensure that staff receive training in recognising and responding to incidents, allegations or concerns of abuse or harm as part of their induction programme. Concorde Care in The community will ensure that it benchmarks training and competencies within the Service with the framework outlined in Adult Safeguarding: Roles and Competencies for Healthcare Staff which we recognise applies to social care staff also and does not replace any local or contractual requirements but acts as a minimum benchmark.



## 6. Definitions

### 6.1 Enquiry

- An enquiry is any action that is taken (or instigated) by a local authority, under Section 42 of the Care Act 2014, in response to indications of abuse and neglect in relation to an adult with care and support needs who is at risk and is unable to protect themselves because of those needs
- An enquiry can also refer to similar action but not undertaken under Section 42. It should establish whether any action needs to be taken to prevent or stop abuse or neglect and if so, by whom

### 6.2 A person with Care and Support Needs

- According to the Care Act 2014; an older person, a person with a physical disability, a learning difficulty or a sensory impairment, someone with a mental health needs, including dementia or a personality disorder, a person with a long-term health condition, someone who misuses substances or alcohol to the extent that it effects their ability to manage day-to-day living

### 6.3 Safeguarding

- Safeguarding means protecting an adult's right to live in safety, without suffering abuse and/or neglect
- It is multi-agency in approach to prevent and stop both the risks and experience of abuse or neglect, whilst supporting the adult's well-being including their views, wishes, feelings and beliefs on the action to be taken where possible

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#### **6.4 Investigation**

- Investigation is a process that focuses on gathering “good evidence” that can be used as a basis for the decision as to whether or not abuse has occurred
- It must be a rigorous process and the evidence must be capable of withstanding close scrutiny, as it may later be required for formal proceedings

#### **6.5 Referral**

- Referral is when information regarding a possible safeguarding incident is passed on to another person for their direction. In the case of this policy, from the Provider to the Adult Social Care Team
- Sometimes this may be referred to as ‘reporting’

#### **6.6 Well-being**

- The Care Act 2014 defines well-being as: ‘in relation to an individual, means that individual’s well-being so far as relating to any of the following
  - Personal dignity (including treatment of the individual with respect)
  - Physical and mental health and emotional well-being
  - Protection from abuse and neglect
  - Control by the individual over their day-to-day life (including over care and support provided to the individual and the way in which it is provided)
  - Participation in work, education, training or recreation
  - Social and economic well-being
  - Domestic, family and personal relationships
  - Suitability of living accommodation
  - The individual’s contribution to society

#### **6.7 Multi-agency**

- More than one agency coming together to work for a common purpose
- This could include partners of the Local authority such as: NHS England CCGs, NHS trusts and NHS foundation trusts, Department for Work and Pensions, the police, prisons, probation services, and/or other agencies such as general practitioners, dentists, pharmacists, NHS hospitals, housing, health and care providers

#### **6.8 Caldicott Principles**

- The Caldicott Principles were developed in 1997 following a review of how patient information is protected and only used when it is appropriate to do so
- Since then, when deciding whether they needed to use information that would identify an individual, an organisation should use the Principles as a test
- The Principles were extended to adult social care records in 2000
- The Principles were reviewed in 2013

#### **6.9 Abuse**

- Abuse includes physical, sexual, emotional, psychological, financial, material, neglect, acts of omission, discriminatory and organisational abuse
- The types and behaviours of abuse are documented in the Care Act Statutory Guidance Chapter 14

#### **6.10 Adults at Risk**

- Adults at risk means adults who need community care services because of mental or other disability, age or illness, and who are, or may be unable to take care of themselves against significant harm or exploitation
- The term replaces ‘vulnerable adult’

#### **6.11 Concern**

- A concern may be any worry about an adult who has, or appears to have care and support needs, who is

subjected to, or may be at risk of abuse or neglect, and who may be unable to protect themselves from the abuse or neglect or risk of it

- A concern may be raised by anyone, and can be:
  - A direct or passive disclosure by the adult at risk
  - A concern raised by staff, volunteers, others using the service, a carer or a member of the public
  - An observation of the behaviour of the adult at risk, of the behaviour of another person(s) towards the adult at risk, or of one Service User towards another
  - Patterns of concerns or risks that emerge through reviews, audits and complaints or regulatory inspections or monitoring visits

#### **6.12 Making Safeguarding Personal**

- Making Safeguarding Personal is about person-centred and outcome-focussed practice
- It is how professionals are assured by adults at risk that they have made a difference to people by taking action on what matters to people, and is personal and meaningful to them

#### **6.13 Modern Slavery**

- 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

#### **6.14 Significant Harm**

- Significant harm is not only ill treatment (including sexual abuse and forms of ill treatment which are not physical), but also the impairment of, or an avoidable deterioration in, physical or mental health, and the impairment of physical, intellectual, emotional, social or behavioural development

#### **6.15 Enquiry Planning / Strategy Meeting**

- Enquiry Planning / Strategy Meeting or discussion is a multi-agency discussion between relevant organisations involved with the adult at risk to agree how to proceed with the referral
- It can be face to face, by telephone or by email

#### **6.16 Honour-Based Violence**

- The terms 'honour crime', 'honour-based violence', and 'izzat' embrace a variety of crime of violence (mainly but not exclusively against women), including physical abuse, sexual violence, abduction, forced marriage, imprisonment and murder where the person is being punished by their family or their community
- They are punished for actually, or allegedly, 'undermining' what the family or community believes to be the correct code of behaviour
- In transgressing this, the person shows that they have not been properly controlled to conform by their family and this is to the 'shame' or 'dishonour' of the family
- 'Honour crime' may be considered by the perpetrator(s) as justified to protect or restore the 'honour' of a family

#### **6.17 Hate Crime**

- Hate (Race) Crime – A disability hate crime is: "Any criminal offence which is perceived, by the victim or any other person, to be motivated by a hostility or prejudice based on a person's disability or perceived disability"
- Incidents can include:
  - Physical attacks such as physical assault, damage to property, offensive graffiti and arson
  - Threat of attack including offensive letters, abusive or obscene telephone calls, groups hanging around to intimidate, and unfounded, malicious complaints
  - Verbal abuse, insults or harassment – taunting, offensive leaflets and posters, abusive gestures, dumping of rubbish outside homes or through letterboxes, and bullying at school or in the workplace

- **6.18 Forced Marriage**

- The Anti-Social Behaviour, Crime and Policing Act 2014 protects people from being forced to marry without their free and full consent as well as people who have already been forced to do so
- We will ensure that staff are reminded of the **one chance rule**: i.e., our employees may only have one chance to speak to a potential victim of forced marriage and, therefore, only one chance to save a life
- Forced marriage can involve physical, psychological, emotional, financial and sexual abuse including being held unlawfully captive, assaulted and raped
- Law enforcement agencies will also be able to pursue perpetrators in other countries where a UK national is involved under powers defined in legislation



## Key Facts - Professionals

Professionals providing this service should be aware of the following:

- Safeguarding is everybody's business. Agencies have a duty to report Safeguarding concerns to the Local Safeguarding Adults Team
- Staff of Concorde Care in The Community will report safeguarding concerns to the Registered Manager
- The Registered Manager will refer safeguarding concerns to the Local Authority Safeguarding Adults Team
- If it is suspected a crime has taken place, the reporter of the incident should call the police immediately
- Concorde Care in The Community will be led by the Local Authority Adult Safeguarding Team as to 'next steps' such as enquiries
- If the alleged victim requires immediate removal from harm or medical attention, this will be done immediately
- The Service User to whom the incident has happened, will be consulted and supported to be involved in the safeguarding process and provided with information they understand throughout
- Concorde Care in The Community is committed to supporting and protecting the well-being of Service Users through prevention of harm and reporting and dealing with incidents of abuse through a proper process



## Key Facts - People affected by the service

People affected by this service should be aware of the following:

- Concorde Care in the Community has a duty to safeguard people using their service
- Concorde Care in the Community will provide information and Care Plans to help you understand safeguarding and what to look out for
- If something happens that may be a safeguarding incident which involves you, Concorde Care in The Community will make sure you understand your choices and the next steps and are included as much as you want and can be
- If you need extra support such as an advocate, one will be provided for you
- Other agencies may be involved in getting the facts of the incident
- If it seems a crime has taken place, the police will be called immediately
- When the facts are brought together, and a way forward has been decided with your input if possible, you will be talked through the findings
- Concorde Care in The Community will have reviewed your Care Plan and worked with you to support you through the enquiry process and moving on in the future