

# Live Well • North East

Empowering **people**. Enriching **lives**.

## Policies and Procedures

### **Live Well North East's Policy on Safeguarding and Protecting Young People and Vulnerable Adults.**

Welfare Officer/Safeguarding Lead at Live Well North East:

Debra Forth.

07842528007

[debs@livewellne.co.uk](mailto:debs@livewellne.co.uk)

Live Well North East is committed to creating and maintaining an enjoyable and safe environment for all the children, young people and vulnerable adults involved in our activities. We accept a responsibility to help safeguard the welfare of children, young people and vulnerable adults and protect them from any poor practice, abuse or bullying, while providing them with the highest possible standard of care.

We are dedicated to devising and implementing policies so that everyone in Live Well North East accepts their responsibilities to safeguard children, young people and vulnerable adults from any form of harm. We expect our team to follow procedures that protect beneficiaries and report any concerns about their welfare to appropriate authorities.

The aim of the policy is to promote good practice, providing our beneficiaries with appropriate safety/protection whilst in the care of Live Well North East and to allow staff and volunteers to make informed and confident responses to specific child protection issues.

NB: A young person is defined as a person under the age of 18 (Children's Act 1989) The definition of a Vulnerable Adult, as stated by 'Who Decides – Lord Chancellors Department 1997', is: 'A Vulnerable Adult is someone who is aged 18 or over who; is or may be in need of community care services by reasons of mental health or other disability, age or illness and is or may be unable to take care of him or herself, or unable to protect him or herself against harm or exploitation'

## Policy principles

Live Well North East is dedicated to the following:

1. the welfare of the children, young people and vulnerable adults is paramount and should be the first consideration
2. all children, young people and vulnerable adults, regardless of age, ability, gender, ethnic origin, religious belief, race or sexual identity have a right to participate in a fun and safe environment with the maximum protection from abuse
3. the rights, wishes and feelings of y children, young people and vulnerable adults should always be respected
4. all reasonable steps to protect from harm, discrimination and degrading treatment will be taken
5. all members of Live Well North East have a responsibility and failure to comply may lead to disciplinary action
6. all worries and allegations of poor practice will be taken seriously and the appropriate action will be made promptly
7. all Live Well North East sessional staff and employees who work with children, young people and vulnerable adults will be recruited with careful consideration to their suitability, and will be provided with the proper guidance and training in child protection and safeguarding procedures and good practice
8. working in partnership with parents and carers is essential for the safeguarding and protection of beneficiaries

9. confidentiality should be upheld in line with legislation and government guidance.

## Government guidance and legislation

Live Well North East's safeguarding policy and procedures are based upon principles within UK, international legislation and government guidance. Below is an overview of relevant legislation and guidance. We all have a legal and moral obligation and responsibility to contribute to making Live Well North East a safe and child-friendly place to be. Our policies and procedures take into account the following:

1. The Children Acts 1989 and 2004
2. The Protection of Children Act 1999
3. The Police Act 1997
4. The Criminal Justices and Court Services Act 2000
5. The Rehabilitation of Offenders Act 1974
6. The Data Protection Act 1998
7. Every Child Matters 2003
8. "Caring for the young and vulnerable" - Home Office guidance for preventing the abuse of trust 1999
9. The 'What to do if you are worried a child is being abused' - 2006
10. Working Together to Safeguard Children - 2006
11. The UN Convention on the Rights of the Child - 1990
12. The Human Rights Act 1998
13. The Safeguarding Vulnerable Adults Act 2006
14. Information sourced from the Royal Pharmaceutical Society of Great Britain, 'Guidance on the protection of Vulnerable Adults', August 2005

## Promoting good practice

Live Well North East acknowledges that good practice is essential when working with children, young people and vulnerable adults. To provide beneficiaries with the best possible experience and opportunities all of our staff must operate within an accepted ethical framework. Below is a list showing what is meant by good practice and poor practice, so that employees and volunteers are able to identify whether poor practice and possible abuse may be taking place.

## **Good practice:**

All people at Live Well North East should adhere to the following actions:

1. always be publicly open when working with children, young people and vulnerable adults
2. avoid any unobserved situations and encourage open communication
3. treat all equally and with respect and dignity
4. promote fairness and confront and deal with bullying
5. always put the welfare of the person first
6. keep an appropriate distance between yourself and the person; any intimate relationship should not be allowed
7. avoid unnecessary physical contact. Where any physical support is compulsory it should only be provided with consent and done openly
8. involve parents or guardians and carers wherever possible
9. ask for parental/carer consent if employees are required to transport people in their cars
10. request written parental/carer consent for any significant travel arrangements e.g. overnight stays
11. ensure that at residential activities adults do not enter a person's room or invite these people into their rooms
12. be a good role model, this includes not smoking or drinking alcohol in the company of young people
13. always give enthusiastic and constructive feedback rather than negative criticism
14. recognising the developmental needs and capacity of the children, young people and vulnerable adults and not risking giving up child wellbeing in order to gain other success
15. keep a record of any injury that occurs, along with details of any treatment given
16. ensure that you have consent to treat the person, in case of any emergencies
17. to ensure that the correct ratios is maintained at all times – for the protection and welfare of the children, young people and vulnerable adults and the adults involved
18. to dress in appropriate clothing for the activity.

## **Poor practice**

These actions are regarded as poor practice and should be avoided:

1. unnecessarily spending excessive amounts of time alone with a young person away from others
2. reducing a young person to tears as a form of control
3. doing things of a personal nature that the young person is able to do for themselves
4. engaging in rough, highly physical or sexual activity
5. making sexually suggestive comments to a young person
6. taking young people alone in a car on journeys
7. sharing a room with a young person
8. taking a young person to your home where they will be alone with you
9. engaging in improper touching of any form
10. allowing young people to openly use unsuitable language
11. allowing allegations made by a young person to go unchallenged, unrecorded or not acted upon.

When a case arises where it is impossible to avoid certain situations, for example transporting a young person in your car, the tasks should only be carried out with the full understanding and consent of the parent or guardian and the young person involved.

If during your care you accidentally hurt a young person, the young person seems distressed in any manner, appears to be sexually aroused by your actions or if the young person misunderstands or misinterprets something you have done, report any such incidents as soon as possible to another colleague and make a written note of it. Parents or guardians should also be informed of the incident.

### **Use of photographic/filming equipment**

Abuse doesn't just occur within the organisation; it has been found that in some cases people will use young people's events as an opportunity to take inappropriate photographs or films of children.

Live Well North East is very alert and if there are any concerns that this sort of activity is taking place then it should be reported as soon as possible. Use of any equipment that can take photographs/videos is prohibited in sessions, apart from by named persons.

### **Defining child abuse**

It is not always easy to recognise where abuse has occurred, however all adults working within Live Well North East have a duty to be watchful and respond appropriately to suspicions of poor practice, abuse or bullying. This does not mean that it is our employee's or volunteer's responsibility to make a decision as to whether the situation is poor practice, but it does mean that it is our employee's or volunteer's duty to report absolutely any concerns.

Child abuse has many forms, but essentially it is a term which describes the way in which young people can be harmed by individuals, often those they trust and know well.

Child abuse tends to be categorized into four main forms; physical, emotional, sexual or neglect that leads to injury or harm. It is most common within a relationship of trust or responsibility, where an abuse of power or breach of trust occurs. Abuse in all of its forms can affect any young person. It is so critical that any child abuse is prevented as the effects can be so destructive that if not prevented they may follow the individual into later life.

#### **Physical abuse**

This occurs when individuals deliberately inflict injuries on a young person, or knowingly do not prevent such injuries. It includes harm caused by hitting, shaking, throwing, poisoning, burning,

biting, scalding, suffocating, drowning or using excessive force. Giving young people alcohol or inappropriate drugs would also constitute child abuse, along with the failure to supervise their access to these substances.

## Emotional abuse

Emotional abuse can be described as repetitive emotional ill treatment of a young person, which is likely to cause harsh and permanent unfavourable effects on the child's emotional development. Examples can be telling a child that they are a waste of time, making them feel insignificant and unwelcome or calling them names and bullying them.

It could also be classed as constantly criticising a child and expecting too much of them. As a result it may cause a young person to be anxious and scared of being continually shouted at, teased or threatened, which in turn can make the young person lose self-confidence and become much more reserved.

## Sexual abuse

This can occur when adults, both male and female, use children to meet their own sexual needs. This includes any sexual contact, showing young people pornography or talking to them in a sexually overt manner. This can occur if there is any inappropriate physical contact with the young people, which in many cases may go unnoticed.

## Neglect

Neglect occurs when adults fail to meet a young person's physical or mental needs, which then in turn results in serious harm to their growth or health. An example of neglect would be failing to provide a person's basic needs such as food, water, shelter, protection, medical care, etc. Or in sports this could be exposing the young person to unbearable heat or cold.

## Signs of abuse

As mentioned previously it is not always easy to recognise a situation where abuse may occur or has already taken place. Most people are not experts in such detection however it is important to remember that it is not the responsibility of those working in Live Well North East to decide that child abuse is occurring. It is their responsibility to act on any concerns. Some of the signs that a child is being abused, which should be looked out for, may include one or more of the following:

another young person or adult expresses concern about the welfare of a young person 2. difficulty in making friends 3. unexplained changes in a young person's behaviour e.g. bad tempered, upset, quiet, reserved, clingy, tearful and reluctance 4. unexplained or suspicious injuries 5. an injury for which an explanation seems inconsistent 6. mistrust of adults, particularly those with whom a close relationship would normally be expected 7. the young person describes what appears to be an abusive act involving them 8. inappropriate sexual awareness 9. engaging in sexually explicit behaviour 10. being prevented from socialising with others 11. displaying variations in eating patterns including over eating or loss of appetite 12. losing weight for no apparent reason 13. becoming increasingly dirty or unkempt 14. a shortage of money or frequent loss of belongings.

1.

### **How to respond to any suspicions**

There are many ways in which we may become aware of the possible occurrence of child abuse, mainly through some of the ways listed above, or even witnessing it occur. In some cases it may be reported to us or we may be directly informed by the young person affected. It is important to remember that no matter how you have been made aware, it is not the responsibility of any of Live Well North East's employees or volunteers to make the decision as to whether a child is actually being abused, it is simply your responsibility to act on any concerns by contacting the appropriate authorities so that the correct and necessary action can be taken to protect the young person.

If you are directly informed by the young person then it is important that you respond carefully. Do not act frightened as this will only make matters worse. Support the child and listen carefully to show that you are taking them seriously, however do try to avoid questioning them, as it can be argued that in some cases the child has been led by any words and ideas suggested during questioning.

The main priority is the safety of the young person. If any medical attention is needed you must call an ambulance immediately. Ensure that the child knows that you will need to tell other people in order to stop the abuse continuing.

Make certain that you record all information straight away and report the incident as soon as possible to Live Well North East's welfare officer. Information recorded should be very thorough and should be made at the time of the concern, detailing all the facts and not including your own opinions. The record should include the following:

1. child's details e.g. name, age, address, phone number, etc.
2. the nature of the allegation, including the dates, times, etc.
3. a description of the signs, for example any visible injuries or indirect signs
4. details of the witnesses
5. an account of what the child has said
6. who the alleged abuser is if known
7. who was consulted, give details.

Live Well North East expects its members to talk about any concerns they may have about the welfare of a child immediately with Emma Pattison/Debra Forth. If this person is not available then you should seek advice from NSPCC, local social services department or the Police, whose telephone numbers can be found in your local directory.

NB: If there is any doubt, you must report the incident, as it may be just one of a series of other incidents which together cause concern.

### **Internal inquiries and suspension**

Emma Pattison/Debra Forth will make an instant decision, potentially after a conversation with Debra Forth/Emma Pattison about whether the accused should be momentarily suspended until further police and social services inquiries. Irrespective of the Police or social services inquiries, Live Well North East will review all individual cases in order to make a decision as to whether the accused person can return and how it would carefully be handled. The welfare of the child will however remain of paramount importance throughout.

### **Recruiting people who will be working with children and vulnerable adults**

It is important that all reasonable steps are taken to prevent unsuitable people from working with children. This applies equally to paid, volunteer, full time and part time staff. To ensure unsuitable people are prevented from working with children the following points should be taken into consideration when recruiting:

1. all staff and volunteers should complete an application form. The application form will elicit information about the applicants past and a self-disclosure about any criminal record
2. all staff and volunteers, where relevant should undertake an enhanced level DBS/will provide their CRB which will be verified. This information will be treated confidentially, sensitively and in accordance with the Data Protection Act 1998.
3. two confidential references, including one regarding previous work with children should be obtained
4. evidence of identity, for example passport or driving licence with photo
5. a check should be made that the application form has been completed in full, including sections on DBS
6. their qualifications should be confirmed
7. the job requirements and responsibilities should be clarified
8. child protection procedures are explained and training needs identified e.g. basic child protection

In addition to pre-selection checks, the safeguarding process includes training after recruitment to help staff and volunteers to:



1. analyse their own practice against what is deemed good practice, and to ensure their practice is likely to protect them from false allegations 2. recognise their responsibilities and report any concerns about suspected poor practice and/or abuse 3. respond to concerns expressed by a child 4. work safely and effectively with children.

Live Well North East will comply with the new requirements of the Independent Safeguarding Authority and ensure that they are aware of the legal expectations of them:

## Confidentiality

Every effort should be made to make sure that confidentiality is maintained for everyone that is concerned in any allegations. Information should be handled on a need to know basis only. This includes the following people:

1. Debra Forth 2. Emma Pattison 3. the young person's parents or guardians 4. the person making the allegation 5. social Services and the Police 6. the alleged abuser (and parents if the alleged abuser is a child)

All information will be stored in a secure place with limited access to designated people, in line with data protection laws.

If you are a professional and want to make a referral to First Contact please use



the [Children's Services Referral Form](#).

The **Thresholds Document 2018** may be a useful reference tool. Please email your completed form to [firstcontact@durham.gov.uk](mailto:firstcontact@durham.gov.uk)

First Contact aims to get families the support they need, when they need it, from the right service. The will help you provide them with the details they need. For further guidance see [First Contact Service Guidance for Professionals](#)

For a **Poster Version** of the Thresholds Document ( 0-19 Levels of Need) click on the link.

## **Local Authority Designated Officer (LADO) Allegations Against Staff or Volunteers**

To contact the Local Authority Designated Officer (LADO)  
Please email [CYPSLADOSecure@durham.gov.uk](mailto:CYPSLADOSecure@durham.gov.uk) or call **03000 268835**

Alternatively you can use the [LADO notification form](#) and email the referral to the Local Authority Designated Officer.

The Allegations Against Staff or Volunteers procedures can be found on our [Multi-Agency Child Protection Procedures](#).

### **Safeguarding Adults**

Who does this policy safeguard? This policy and accompanying procedural guidance is intended to safeguard any adult who:

is aged 18 or over; and - has needs for care and support (whether or not those needs are being met); and - is experiencing, or is at risk of, abuse or neglect; and - as a result of those needs is unable to protect him or herself against the abuse or neglect or the risk of it

These adults may previously have been defined as a “vulnerable adult” or an “adult at risk”. The adult experiencing, or at risk of abuse or neglect will hereafter be referred to as the adult/adults throughout this policy and procedures.

This definition includes those at greater risk to a range of abuses because of physical, mental, sensory, learning or cognitive disabilities or illnesses, substance misuse or brain injury. It includes the carers, family and friends of those people, who provide care to them on an unpaid basis. It includes those adults who purchase their own care through personal budgets, those who fund their own care; and those whose care is funded by local authorities and/or health services.

Where someone is aged 18 or over but is still receiving children’s services and a safeguarding issue is raised, the matter should be dealt with through this policy and procedure.

Abuse and neglect can take many forms. Professionals should not be constrained in their view of what constitutes abuse or neglect, and the circumstances of an individual case should always be considered.

Abuse may be: □ A single act or repeated acts; □ an opportunistic act or a form of serial abusing where the perpetrator seeks out and “grooms” individuals; □ an act of neglect or a failure to act; □ multiple in form (many situations involve more than one type of abuse); □ deliberate or the result of negligence or ignorance; □ a crime.

For the purposes of this policy, abuse is categorised as follows:

□ Discriminatory Including forms of harassment, bullying, slurs, isolation, neglect, denial of access to services or similar treatment; because of race, gender and gender identity, age, disability, religion or because someone is lesbian, gay, bisexual or transgender. This includes racism, sexism, ageism, homophobia or any other form of hate incident or crime.

□ Domestic abuse or violence Including an incident or a pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse, by someone who is, or has been, an intimate partner or family member regardless of gender or sexual orientation. This includes psychological/emotional, physical, sexual, financial abuse; so called ‘honour’ based violence, forced marriage or Female Genital Mutilation (FGM). □ Financial or material Including theft, fraud, internet scamming, exploitation, coercion in relation to an adult’s financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits. □ 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. □ Neglect and acts of omission Including ignoring medical, emotional or physical care needs, failure to access appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating. □ Organisational (sometimes referred to as institutional) 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 a person’s own home. This may range from one off incidents to on-going ill treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation. □ Physical Including assault, hitting, slapping, pushing, burning, misuse of medication, restraint or inappropriate physical sanctions. □ Psychological (sometimes referred to as emotional)

Including threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber-bullying, isolation or unreasonable and unjustified withdrawal of services or support networks. □ Sexual Including rape, indecent exposure, sexual assault, sexual acts, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts to which the adult has not consented or was pressured into consenting. It also includes sexual exploitation which is exploitative situations, contexts and relationships where the person receives “something” (e.g. food, accommodation, drugs, alcohol, mobile phones, cigarettes, gifts, money) or perceived friendship/relationship as a result of them performing, and/or another or others performing sexual acts. □ Self-neglect Includes a person neglecting to care for their personal hygiene, health or surroundings; or an inability to provide essential food, clothing, shelter or medical care necessary to

maintain their physical and mental health, emotional wellbeing and general safety. It includes behaviour such as hoarding.

The response to the concern of abuse or neglect will be proportionate to the level of harm that has occurred or may occur. There is a Risk Threshold Tool which explains the types of response that can be expected.

The seriousness of harm, or extent of the abuse, is not always clear at the point of concern or referral. All reports of suspicions or concerns should be approached with an open mind.

Abuse can be perpetrated by anyone and can occur in any relationship. More often, people are abused by someone who is well known to them.

Abusers may be:  Spouses/partners  Other family members  Neighbours  Friends  
 Acquaintances  Local Residents  People who deliberately exploit adults they perceive as vulnerable to abuse  Paid staff or professionals  Volunteers  Strangers.

Abuse often occurs where the person who is abusing is in a more powerful position than the person who is being abused. In some instances, the abuser themselves may be at risk of, or vulnerable to, abuse.

Abuse can take place anywhere, including in people's own homes, in the homes of their family or friends, in a public place, in care settings such as hospitals or care homes, at places of work or education.

#### 4. Principles

Guiding principles and values Safeguarding adults 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.

The NSAB is committed to ensuring that all adults have the right to:  live their lives free from fear, violence, harassment, humiliation, degradation, abuse and neglect  be safeguarded from harm and exploitation  be protected from mistreatment and abuse; and  live an independent lifestyle and to make choices, even if some of those choices involve a degree of risk.

In recognition of this, the NSAB identifies the following principles (from the Care Act 2014) and commitments that underpin safeguarding adults work in Newcastle. We are committed to ensuring that:

□ Empowerment. We ask people what outcomes they want as a result of the safeguarding adults process and these directly inform what happens. □ Protection. We help and support people to report abuse. We support people to be involved in the safeguarding adults process to the extent to which the adult wants. □ Prevention. We can effectively identify and appropriately respond to signs of abuse and suspected criminal offences and take action before harm occurs. We make everyone aware, through provision of appropriate training and guidance, of how to recognise signs and take any appropriate action to prevent abuse occurring. □ Proportionality. We work in the best interests of the adult and undertake the least intrusive response appropriate to the risk that is presented. □ Partnership. We will work together to place the welfare of individuals above organisational boundaries. We have effective local information sharing and multi-agency partnership arrangements in place and staff understand these. □ Accountability. The roles of the agencies are clear, together with the lines of accountability. Staff understand what is expected of them and others. Agencies recognise their responsibilities to each other, act upon them and accept collective responsibility for safeguarding arrangements.

In addition to these principles, the NSAB recognises the importance of ensuring that safeguarding adults interventions are person-led and outcome-focused. This means that all partners will have regard to the views, wishes, feelings and beliefs of the adult whom the concern is about in determining what action to take.

## 5. Dealing with alleged abuse or neglect

This section does not cover the detailed procedures for responding to an allegation of abuse or neglect but does cover some of the core considerations and standards that individuals and organisations need to adhere to. Please refer to the procedures for detailed guidance.

Whenever there is concern about a risk of abuse or harm, use of this safeguarding adults policy and associated procedures will enable the risk to be assessed and owned on a multi-agency basis.

The primary focus/point of decision-making must be as close as possible to the adult, and individuals must be supported to make their own choices. The circumstances surrounding any actual or suspected case of abuse will also inform the response.

Adults should be offered support services as appropriate to their needs. This includes support to participate in all aspects of the safeguarding adults process. Under the Care Act 2014, there is a duty to provide independent advocacy for adults who have a substantial difficulty in participating in the safeguarding adults process and where there is no other appropriate adult to represent them<sup>4</sup>.

There is a presumption that adults have the mental capacity to make informed decisions about their lives. If someone has been assessed as not having mental capacity to make decisions about their safety, those decisions will be made in their best interests as set out in the Mental Capacity Act (MCA) 2005 and the MCA Code of Practice.

Where an adult who has mental capacity takes a decision to remain in an abusive situation, consideration must be given to whether the adult is making the decision free from intimidation or coercion, with an understanding of the risks involved, and with access to appropriate services should they change their mind. If it is felt that a person's decision may have been influenced by threat or coercion, and consequently lack validity, consideration will need to be given to their best interests and overriding their consent to take further action.

It is important that decisions made about safeguarding interventions at any one time are not taken to be irreversible or non-negotiable.

Sometimes an adult with mental capacity may not want action to be taken but their consent has to be overridden because: there are risks to others; there is a risk of serious harm; or a serious crime has occurred or is at risk of occurring.

Adults who have been or are at risk of abuse should be given information, advice and support in a form that they can understand and have their views included in all forums that are making decisions about their lives.

All decisions taken by professionals about a person's life should be timely, reasonable, justified, proportionate, ethical and fully recorded.

Adults have the right to privacy and confidentiality throughout the safeguarding adults process, except where there is a requirement to override this e.g. where it is needed to share the person's information to safeguard others who may be at risk. The need for an adult to be identified should be considered at each stage to ensure it is not shared unless it is absolutely necessary to do so.

Staff have a duty to report promptly any concerns or suspicions that an adult is being, or is at risk of being, abused. Staff should fully understand their role and responsibilities in regard to this policy and procedures and that they know how to recognise abuse and how to report and respond to it.

Where it is believed that the abuse or neglect is a crime, the Police should be notified as soon as possible.

Actions to protect the adult from abuse should always be given high priority by all organisations involved. Concerns or allegations should be reported without delay and all agencies must cooperate with each-other to protect the adult(s) concerned. Early sharing of information is key to providing an effective response where there are emerging concerns.

Any action taken to stop or prevent abuse must be lawful and proportionate to the risk. Organisations working to safeguard adults at risk should make the dignity, safety and wellbeing of the individual a priority in their actions.

As far as possible organisations must respect the rights of the person causing, or alleged to be causing, harm. If the person alleged to have caused harm is also an adult with care and support needs, then these should be taken into consideration.

Action taken under these procedures does not affect the obligations on partner organisations to comply with their statutory responsibilities, such as notification to regulatory authorities, employment legislation or other regulatory requirements.

Partner organisations will contribute to effective inter-agency working, multidisciplinary assessments and joint working partnerships in order to provide the most effective means of safeguarding adults.

Partner organisations will have information about individuals who may be at risk from abuse and may be asked to share this where appropriate, with due regard to confidentiality and information sharing protocols.

## **Roles and Responsibilities**

The adult who has been abused or is at risk of abuse In safeguarding situations the adult who has been abused, or is at risk of abuse, must be involved from the beginning of the Safeguarding Adults Enquiry (unless there are exceptional circumstances that would increase the risk of abuse). Where possible, their consent should be sought prior to the concerns being shared on a multi-agency basis. The adult's (or their representative's) opinions and desired outcomes from the safeguarding adults process must be sought and considered as part of the ongoing Safeguarding Adults Enquiry. The adult (or their representative) must be included throughout the process and at the conclusion a check must be made to establish whether their desired outcomes have been met.

Family members or friends of the adult who has been abused or is at risk of abuse Family, friends and other relevant people who are not implicated in the allegation of abuse often have an important part to play in the safeguarding adults process, and can provide valuable support to the individual. In some cases they can also assist in managing the risk.

Where the adult has mental capacity, involvement of family, friends or informal carers should be agreed with the adult themselves. If the adult does not have mental capacity, family and friends must be consulted in accordance with the principles of the MCA 2005.

The local authority has a duty to involve an appropriate person to facilitate an adult's involvement in the safeguarding adults process if it is deemed that they would have substantial difficulty in participating themselves. In most circumstances this is likely to be either a family member/friend or an advocate.

A record should be made of the decision to consult or not to consult family and friends with reasons being given and recorded.

Advocacy As part of the safeguarding adults process consideration must be given to whether the adult may benefit from the support of an independent advocate.

Where a person has "substantial difficulty" in participating in the safeguarding adults process (and there is no other appropriate person to assist them) independent advocacy must be arranged by the local authority under the Care Act 2014.

Advocates should be invited to safeguarding adults meetings (other than in exceptional circumstances e.g. where the relationship between the adult and the advocate is considered abusive), either accompanying the adult or attending on their behalf, to represent the person's views and wishes.

Front line staff/volunteers Operational staff/volunteers are responsible for identifying and responding to allegations of abuse. They need to understand what constitutes abuse or neglect and what an initial response to a suspicion or allegation should be.

Managers The roles and responsibilities of all managers are:  to ensure the alleged victim is made safe and to preserve any evidence relating to the abuse;  to ensure that any member of staff or volunteer who may have caused harm is not in contact with the alleged



victim, other service users or others who may be at risk;  to ensure that safeguarding adults referrals are raised as appropriate;  to ensure that appropriate information is provided in accordance with local policy guidance and timeframes.