

# Safeguarding Adults at Risk Policy

This policy will be reviewed on a yearly basis. This version replaces earlier dated versions.

Living Leadership will amend this policy, following consultation, where appropriate.

Date of last review: June 2021

#### 1. Definitions

#### 1.1 Adult at risk

Living Leadership recognises the following definition of an adult at risk of abuse or neglect (derived from the United Kingdom Care Act 2014):\*

any person who is aged 18 years or over who has needs for care and support, who is experiencing, or at risk of, abuse or neglect and as a result of their care needs - is unable to protect themselves.

This definition can include any individual at some time or times of life. A person may be at risk temporarily or permanently and to variable degrees.

Factors that contribute to risk include disabilities, old age, health issues, bereavement, addictions and dependencies, past abuse or trauma, operating in a different cultural or language context and detainment in lawful custody.

#### 1.2 Abuse

Abuse is any violation of an individual's dignity, human rights or civil rights by another person or persons. There are various forms of abuse, including physical, sexual, psychological, material, discriminatory and institutional. Definitions and indicators of these forms of abuse are found in the Appendix to this policy.

### 2. Living Leadership's Safeguarding Officer

The Trustees of Living Leadership have appointed Claire Reynolds as the Charity's Safeguarding Coordinator.

She can be contacted by:

Email: <a href="mailto:safeguarding@livingleadership.org">safeguarding@livingleadership.org</a>
Phone: 07870 658095

<sup>\*</sup> The Care Act 2014 is available here: http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted



#### She is responsible for:

- Receiving reports of concerns (see Section 3);
- Reviewing this policy on an annual basis;
- Ensuring that Living Leadership staff and associates have appropriate training and background checks as needed.

### 3. Reporting concerns

If any individual working for or in the name of Living Leadership ...

- has a general concern about someone's well-being;
- sees or hears something that could be abusive;
- is told that something has happened or is happening to them, or to an adult at risk, which could be abusive;

... he or she must act quickly and decisively by:

- Contacting police or emergency services if the person is in imminent danger of harm;
- Reporting the concern to the Safeguarding Coordinator (see Section 2) within 24 hours.

If the Safeguarding Coordinator is not available or is implicated in the concern, contacting any of the Trustees through the Head of Ministry Operations: <a href="mailto:hmo@livingleadership.org">hmo@livingleadership.org</a>.

### 4. Procedures When a Concern is Reported

The Safeguarding Coordinator will:

- Contact the Emergency Services, informing them of any suspicions, if the adult at risk is in immediate danger or has sustained a serious injury and the person reporting the concern has not already done so.
- Where possible, discuss the concerns with the adult at risk who disclosed the concern, giving due regard to their rights to privacy and to lead an independent life.
- Contact the local body with statutory responsibility to investigate allegations of abuse for advice.
- Notify the Executive Director and/or the Trustees.



### 5. Handling Disclosures

If someone discloses to you abuse they have experienced or witnessed, always:

- Listen, taking what is said seriously;
- **Reassure**, telling them that they have done the right thing by telling you, without expressing any doubts about the truthfulness of the disclosure;
- Remain Calm, no matter how difficult it is to listen to what is being disclosed, without showing shock, alarm, disbelief or disapproval;
- **Be honest** by not promising full confidentiality or offering false reassurance;
- Do not probe beyond what you need to know to report the matter;
- Request their consent to share information, seek help and pass on their contact details and make sure they understood that you will report the concern even without consent;
- **Document everything** that the person has told you, in their own words, as soon as possible after the disclosure, including the time, date, place and your name and signature. The original document must be passed on to the Safeguarding Coordinator along with the person's contact details if they have consented to sharing them;
- **Keep confidentiality** between you, the person and the Safeguarding Coordinator and any emergency services you contact (share information only on a 'need to know' basis);
- Never approach the alleged abuser or carry out your own investigation into the allegation or suspicion of abuse.



## **Appendix: Categories of Abuse**

The following table describes the different categories of abuse and some of their key indicators.

| Category | Definition  | Includes   | Key indicators  |
|----------|---|--|---|
| Physical | Inflicting pain or physical injury, which is either caused deliberately or through lack of care.  | Hitting, slapping and beating Shaking, pinching and pushing Kicking, burning and hair pulling Squeezing, suffocating, poisoning and using inappropriate restraint Giving inappropriate medication  | Cuts, lacerations, puncture wounds, open wounds, welts Bruising and discolouration- particularly if there is a lot of bruising of different ages Black eyes, burns, broken bones and skull fractures If the person is seen to have injuries that recur or are in the same place on more than one occasion or are without plausible explanation Any injury that has not been properly cared for Poor skin condition or poor skin hygiene Loss of hair, loss of weight and change of appetite Insomnia or unexplained paranoia, anxiety Person flinches at physical contact and/or keeps fully covered, even in hot weather Person appears frightened or subdued in the presence of a particular person or people |
| Sexual   | Involvement in sexual activities to which the person has not consented, or does not truly comprehend, and so cannot give informed consent. It may occur where the other party is in a position of trust, power or authority and | Rape, sexual assault or sexual acts to which the person has not consented, could not consent or was pressured into consenting Indecent assault, incest, being forced to touch another person in a sexual manner without consent Making sexual remarks, suggestions and teasing Indecent exposure, being forced to watch pornographic material or sexual acts | Emotional distress Mood changes Expressions of feelings of guilt or shame Itching, soreness or lacerations Bruises around the breast or genital areas Difficulty in walking or sitting Unexplained vaginal or anal bleeding Unexplained venereal disease or genital infections Disturbed sleep patterns Torn, stained or bloody underclothing Significant changes in sexual behaviour or outlook  |



|                              | uses it for sexual purposes.  | Enforced or coerced nakedness or inappropriate photography of a person in sexually explicit ways Being spied upon while a person is undertaking personal care activities  | Preoccupation with anything sexual A woman who lacks the mental capacity to consent to sexual intercourse becomes pregnant   |
|------------------------------|---|---|--|
| Psychological (or emotional) | Acts or behaviour which causes mental distress or anguish or negates the wishes of the adult. It is also behaviour that has a harmful effect on the adult's emotional health and development or any other form of mental cruelty. | Verbal abuse, mocking, coercing, threatening or controlling behaviour Bullying, intimidation, harassment or humiliation The lack of privacy or choice, denial of dignity, deprivation of social contact or deliberate isolation Making someone feel worthless, a lack of love or affection, or ignoring the person. Preventing someone from receiving services or support         | Changes in mood, attitude and behaviour  Becoming quiet or withdrawn or conversely becoming aggressive or angry for no apparent reason  Denial and hesitation to talk openly  Excessive fear or anxiety  Changes in sleep pattern  Loss of appetite  Helplessness or passivity  Confusion or disorientation  Implausible stories  Low self-esteem  Unclear or confused feelings towards an individual  |
| Material (or financial)      | The inappropriate use, misappropriation, embezzlement or theft of money, property or possessions.   | Theft, fraud or embezzlement of monies, benefits or goods Exploitation or profiteering Applying pressure in connection with wills, property, inheritance, or financial transactions The abuse of influence, power or friendship to persuade a person to make gifts or change their will Being charged excessive amounts for services (such as minor building works on a property) | Unexplained loss of money Missing personal belongings such as art, jewellery and silverware Deterioration in standard of living, not having as much money as usual to pay for shopping or regular outings Inability to pay bills, getting into debt Sudden changes in a person's finances Person unable to access their own money or check their own accounts Cheques being signed or cashed by other people without someone's consent Recent acquaintances expressing sudden or disproportionate interest in the person or their money Reluctance on the part of the family, friends or the person controlling the person's funds to pay for necessary food, clothes or other items |



| Discriminatory                    | The inappropriate treatment of a person because of their age, gender, race, religion, cultural background, sexuality or disability.   | Misuse of power that denies opportunity to some groups or individuals Ageist, racist, sexist, or abusive behaviour based on a person's disability Abuse linked to a person's sexuality Harassment, slurs or similar treatment Withholding services without the proper justification, or lack of disabled access to services and activities.   | Recent changes of deeds/title of home Inappropriate granting and/or use of Power of Attorney Sudden change or creation of a will to benefit an individual significantly Low self-esteem Withdrawal Anger Person puts themselves down in terms their gender, sexuality or disability Abuse may be observed in conversations or reports by the person of how they perceive themselves   |
|-----------------------------------|---|---|---|
| Institutional (or organisational) | The mistreatment or abuse of an adult by an organisation or individuals within an institution. It can occur through repeated acts of poor or inadequate care and neglect, or poor professional practice or ill-treatment. | Neglect and poor care practice within an institution or specific care setting such as a hospital or care home, or in relation to care provided in one's home.  The inability of an institution to safeguard people from emotional or even physical harm and neglect  Having fixed rules and routines by which people are controlled  People prevented from doing things that are their rights  No access to personal possessions or personal allowance. | Being routinely referred to in a condescending fashion Disrespectful language and attitudes Being spoken to or treated like a child A person's privacy and dignity is routinely compromised Failure to recognise the individuality of people and applying a 'one size fits all' approach to support No evidence of support services' care plans that focus on the individual's needs Premises that are regularly understaffed |
| Neglect                           | The repeated deprivation of help that an adult needs which, if  | Failing to provide access to appropriate health, social care or education services  | Person looking unkempt or dirty and had poor personal hygiene   |



withdrawn, will cause them to suffer. Neglect can be deliberate or can occur as a result of not understanding what someone's needs are

Ignoring medical or physical care needs, including not giving someone proper food or assistance with eating or drinking

Failing to intervene in behaviour which is dangerous to the adult (particularly when the person lacks the mental capacity to assess the risks to themselves and others)

Failing to provide safe, warm and comfortable environment

Deliberately withholding aids, such as walking sticks or hearing aids

Denying social, religious or cultural contacts

Denying contact with the family

Leaving alone or unsupervised

Person is malnourished, has sudden or continuous weight loss and is dehydrated

Person is dressed inappropriately for the weather conditions

Dirt, urine or faecal smells in a person's environment

Home environment does not meet basic needs (e.g. no heating or lighting)

Health and safety hazards in the living environment

Untreated medical conditions, pressure sores, rashes, lice on the person

Depression

Person and/or carer have inconsistent or reluctant contact with Health and Social Services

Callers/visitors are refused access to the person

Prolonged isolation or lack of stimulation Person who is not able to look after themselves is left unattended and so put at risk

Not being helped to the toilet when assistance is requested

**Note:** This table does not include the term 'Spiritual Abuse', which is used by some people to refer to a separate category of abuse. Living Leadership believes a more helpful way to describe behaviours that term usually denotes is 'psychological abuse in a religious context'.