

Safeguarding Adults at Risk of Abuse or Neglect Policy			
Last Reviewed	April 2025	Next Review	April 2026
Responsible Officer	Director of Operations		

Policy Statement: Freebridge believe that safeguarding is everyone's responsibility. We are committed to taking a person-led and outcome-focused approach. We believe that everybody has the right to live their life free from violence and abuse. Freebridge is committed to taking all reasonable measures to safeguard all adults at risk, who live in our accommodation.

We are not an investigative or intervention agency; however, our staff and contractors are in regular contact with our customers and are therefore in a position to potentially observesigns of abuse and to alert the appropriate agencies. Freebridge shall work with statutory and partner agencies to proactively prevent abuse and/or neglect and ensure that any such abuse is responded to promptly and effectively.

Policy Detail:

Safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted, including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances.

The Care Act 2014 defines that safeguarding duties apply to an adult who:

- Has needs for care and support (whether or not the local authority is meeting any of those needs);
- Is experiencing, or is at risk of, abuse or neglect, and
- Is a result of those needs is unable to protect himself or herself against the abuseor neglect or the risk of it.

What is abuse?

Abuse is any behaviour towards a person that causes them harm, risks their life orviolates their rights. It can happen to anyone.

Incidents of abuse can be a one off or multiple and may affect one person or more. Abuse may also be intentional or unintentional or happen because of a lack of knowledge. Abuse can be an act of neglect or an omission (something that doesn't happen) or a failure to act.

Abuse can take many forms as shown in the list at Appendix One – Definitions. There may also be patterns of abuse and neglect which vary including:

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

General Responsibilities

It is the responsibility of:

- every member of staff to be aware of, and have a basic understanding, to look for signs of abuse and neglect and know how to raise and report internally.
- every member of customer-facing staff to be aware of, and have a clear understanding of safeguarding; also to remain alert, and respond appropriately, to indications of possible abuse and neglect.
- the Director of Operations, acting as Freebridge's Designated Officer and the Head of Housing & Community Management as deputy designated officer, for the implementation of this policy.
- the Designated Officers to maintain an up-to-date awareness and understanding of good practice, and the legislative & regulatory requirements which may impact this policy and the service provided; and
- members of Leadership Team to maintain an overview of safeguarding practises, and an awareness of the operation of the policy.

We shall:

- Make our role and responsibilities towards safeguarding adults at risk clear to customers, partners and staff
- Make sure that safeguarding the health and wellbeing of all adults in our communities remains our highest priority
- Remain alert to, and take seriously all potential safeguarding issues, reporting anything of concern
- Share and analyse information with other agencies and professionals to inform assessment
- Work jointly with statutory and partner agencies to proactively prevent abuse and/or neglect and ensure that any such abuse is responded to promptly and effectively; and
- Learn from professional challenge in ensuring the safety and wellbeing of adults

By taking a proactive approach, we aim to:

- Stop abuse or neglect wherever possible;
- Prevent harm and reduce the risk of abuse or neglect to adults with care and support needs;
- Safeguard adults in a way that supports them in making choices and having control about how they want to live;

- Promote an approach that concentrates on improving life for the adults concerned;
- Raise public awareness so that communities as a whole, alongside professionals play their part in preventing, identifying and responding to abuse and neglect;
- Provide information and support in a variety of ways to help people understand the different types of abuse, how to stay safe and what to do to raise a concern about the safety or well-being of an adult; and
- Address what has caused the abuse or neglect.

Our commitment

We shall adhere to the six key principles as defined in the Care Act 2014:

- 1. **Empowerment** People being supported and encouraged to make their owndecisions and informed consent.
- 2. **Prevention** It is better to act before harm occurs.
- 3. **Proportionality** The least intrusive response appropriate to the risk presented.
- 4. **Protection** Support and representation for those in greatest need.
- 5. **Partnership** Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.
- 6. **Accountability** Accountability and transparency in delivering safeguarding.

Recruitment

We will take appropriate legal advice to decide what level of Disclosure and Barring Service checks should apply to all roles across the organisation. The requirement for a DBS check is clearly stated in any job advertisement and all applicants are required to complete a rehabilitation of offenders form which is reviewed prior to job offers being made. More information on our recruitment and selection procedures, relating to DBS, can be found in our recruitment policy.

All offers of employment will be made subject to a satisfactory Disclosure and Barring Service check. Any volunteers working with us will be required to agree to the same level of check, decided appropriate for the position they are volunteering for, that a paid member of staff would be.

We will also undertake quarterly checks of staffing and job role changes within the organisation, to make sure that all post holders continue to have the right level of check.

We ask staff to keep us informed of any changes to their circumstances which could affect their Disclosure and Barring Service check results, and checks will be renewed every three years. Our Employee Handbook provides more information.

Training

We shall:

- Brief all new staff on safeguarding awareness & our own procedures within 3 months.
- Provide refresher training <u>every 2 years</u> for all customer-facing staff in all relevant aspects of safeguarding

Contractors

We will:

- Ask contractors working on our behalf to have their own policies and procedures in place (or agree to comply with ours)
- Provide information to support their staff to report any concerns they have directly to our Designated Officers
- Ask contractors to evidence that they have appropriate procedures in place to assess what Disclosure and Barring Service checks they do on their own staff, and to carry out those checks if decided necessary

Working with Partners and the Local Safeguarding Adult Board

In promoting and raising awareness of safeguarding, we shall:

- Work with Norfolk Safeguarding Adults Board and residents to make sure that they are aware of how to report any concerns they have.
- Participate in Multi-Agency Public Protection Arrangements and Multi Agency Risk Assessment Conferencing case conferences as appropriate, as well as engaging with Professionals Strategy meetings where new concerns arise.
- Recognise the role of the Norfolk Safeguarding Adults Board in ensuring multi- agency cooperation and are signatories to the Norfolk Safeguarding Adults Board's Multi-Agency Safeguarding Policy.
- Engage with the Local Safeguarding Adults Partnership for the West Norfolk locality, via partnership meetings and other appropriate events, in order to ensure we remain aware of, and implement, best practice at all times.

Reporting

Where concerns arise regarding possible abuse, neglect or risk of significant harm toadults,

We shall:

- Work with statutory agencies, the Local Authority's Adult Social Care Team (Adult Community Services), and in cases of immediate risk to life or on suspicion of a criminal offence, with Norfolk Constabulary, to ensure their involvement with the adult at risk.
- Support staff to take a person-centred approach in listening, accurately recordingand reporting all concerns, and consulting with the Adult Social Care Team when in doubt.
- Maintain comprehensive and easily accessible procedures for all customer-facing staff to support them in making referrals to the Local Authority's Multi-Agency Safeguarding Hub (MASH) via Norfolk Adult Social Services.

Our Director of Operations is the organisation's Designated Officer, with the Head of Housing & Community Management as deputy for Safeguarding, and is responsible for:

- Providing advice and guidance to staff in relation to potential safeguarding concerns
- Work closely with the Local Authority's Adult Social Care Team to ensure that referrals are dealt with robustly and that communication between organisations is effective

- Promoting safeguarding awareness across the organisation, and those procedures and current knowledge remain up to date and relevant.
- Reporting any allegations regarding the conduct of staff or contractors, promptly to the Local Authority's Adult Social Care Team (via the Multi Agency Safeguarding Hub) and ensuring cooperation with any subsequent investigation.

Alternatively, staff can raise their own concerns directly via our <u>Whistleblowing Policy</u>. We understand that raising concerns can be difficult for staff and will also signpost to the Whistleblowing Charity - Public Concern at Work – for further advice and support.

We also understand that involvement in cases of abuse and neglect can be distressing for staff, and will provide all appropriate support throughout their involvement, including access to our Employee Assistance Programme.

Information Sharing

We understand the importance of treating all information with care and we will make sure that our staff follow all relevant legislation when handling data.

We have a responsibility to report all safeguarding concerns, with the welfare of the vulnerable person being of highest importance. Where we feel that an individual has capacity to agree to a referral being made to the Adult Social Care Team we will always seek permission in the first instance. However, we shall:

- Never agree to confidentiality, as even without consent, if the level of risk of harm to the individual
 is significant, we will always make a referral.
- Always try to work closely and openly with families of adults at risk to advise them of and discuss our concerns. Whenever possible our staff will inform families of any referrals that they have made to the Adult Social Care Team.

However, this may not be possible, especially when the individual concerned does not agree to family members being advised, or when we have concerns regarding abuse or harm being perpetrated by a member of the individual's family.

Appendix One – Definitions

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

Physical abuse

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

Domestic violence

Incident or 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 sexuality. Domestic abuse is not just about partners, but all family relationships including forced marriage.

Sexual abuse

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

Psychological (emotional) abuse

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

Financial or material abuse

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

Modern slavery

Encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.

Discriminatory abuse

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

Organisational (Institutional) abuse

Institutional abuse occurs where the culture of the organisation (such as a care home) places emphasis on the running of the establishment and the needs of the staff above the needs and care of the adult, including neglect and poor care practice within an institution or specific care setting, such as a hospital or care home, for example, or in relation to care provided in one's own home from domiciliary services. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor

professional practice as a result of the structure, policies, processes and practices within an organisation.

Neglect and acts of omission

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

Self-neglect

Self-neglect is unlikely to be a safeguarding issue, however agencies must assess concerns raised undertheir statutory duties; having consideration for an individual's right to choose their lifestyle, balanced with their mental health or capacity to understand the consequences of their actions. This refers to a person forwhom there is a concern about their mentally competence for the situation in which they find themselves.

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

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

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