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## Safeguarding Adults: Statement and Policy

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Last revised - Nov 2022

Safeguarding is everyone's business. It is about being proactive in all that we do as a charity to prevent and reduce abuse.

The STAR – Steps to Active Recovery policy surrounding the safeguarding of vulnerable adults is based on both our Christian ethos and takes account of changes introduced in the 2014 Care Act.

STAR works directly with churches and organisations wishing to run addiction work. STAR is responsible for the safeguarding of STAR employees and STAR volunteers, and the churches/organisations are responsible for their staff, volunteers, members and guests. STAR core leads of churches and organisations will be accountable to the church/organisation safeguarding lead.

In order to monitor that the best safeguarding methods are in place, STAR will:

- ask to see the church's safeguarding policy when completing a Memorandum of Understanding (MOU).
- meet with the safeguarding lead as part of STAR support stage so that they understand any specific issues arising with safeguarding.
- ensure that any STAR employee or volunteer should still feel able to report any concerns to their line manager wherever they are working (ie. on a church site)

This policy deals specifically with the abuse of service users, whether by a carer/relative, employee/volunteer or by other service users.

### **1) Aims and Principles**

1.1 The aims of adult safeguarding are 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 accessible 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;
- ★ address what has caused the abuse or neglect;
- ★ assist the person concerned to achieve their desired outcomes.

1.2. The following six Person Centred principles (from the Care Act 2014) apply to all sectors and settings including care and support services. The principles should inform the ways in which professionals from statutory agencies and STAR staff and volunteers work with adults:



- ★ **Empowerment:** wherever possible, clients should be supported and encouraged to make their own decision; it should be assumed that decisions are made by the people concerned or with their informed consent.
- ★ **Prevention:** wherever possible the aim of staff and volunteers will be to take action before harm occurs and ensure that there is early engagement with all relevant people.
- ★ **Proportionate:** all response should be appropriate to the risk presented, and where possible the least intrusive response should be ensured.
- ★ **Protection:** support and representation should be given to ensure protection for those in greatest need.
- ★ **Partnership:** local solutions should be sought through those services which are already working with the individual's communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.
- ★ **Accountability:** there should always be transparency and accountability ensured in the delivery of safeguarding

## 2) Definitions

2.1. The definition of an Adult at Risk (under section 42 of 2014 Care Act) is:

- ★ Aged 18 and over
- ★ Has needs for care and support (whether or not the Local Authority is meeting any of those needs), and
- ★ Is experiencing, or at risk of abuse and/or neglect, and
- ★ As a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

Adults at risk under this definition may include: older people; people with mental health needs, learning disabilities, a long term illness or physical impairments; people with alcohol or substance dependency; family carers providing assistance to a vulnerable adult; victims of domestic harm etc. This could include volunteers working with STAR who could be included in the above definition of adults at risk.

2.2. Harm is defined as:

- ★ A single act or a repeated act;
- ★ An act of neglect or a failure to act;
- ★ Multiple acts, for example, an adult at risk may be neglected and also financially harmed
- ★ Self-neglect

The various types of harm and neglect are listed in Appendix 1.

When considering incidents of potential or actual abuse of adults, certain values and the rights of individuals are of particular relevance and these are listed in the Appendix 2.

## 3) Underlying principles

3.1. Employees/volunteers should not wait until an incident occurs to put these principles into practice. Doing nothing is not an option; acting positively may prevent risks arising. Options available are listed in section 5.



- 3.2. Sometimes, it will not be obvious or clear whether a situation could be considered abusive or criminal or meet other definitions of concern. If in any doubt, then the employee or volunteer must talk to their line manager so that guidance is sought about whether action is warranted.
- 3.3. All STAR employees and volunteers working with vulnerable adults require an understanding of the basic safeguarding. This will be done through training.
- 3.4. There is an expectation that line managers and employees/volunteers providing services to vulnerable adults will co-operate fully in any adult protection investigation/assessment and comply with any recommendations of an adult protection plan.
- 3.5. Service users have the right to be treated with respect by employees/volunteers, part of whose task is to encourage users to express views and consider the implications of their action or choices. Within the limitations of their personal circumstances, service users should be helped to arrive at their own solution to problems.
- 3.6. It should not be assumed that in any set of circumstances where predisposing factors are present, there is actual harm occurring. The important point is that a discussion takes place or a referral leads to gathering of information and then a detailed assessment to define the risk and agree necessary action.
- 3.7. It is understood that the interests of the carers and service users are not necessarily the same and that different perspectives may have to be respected and if possible reconciled if satisfactory solutions to particular problems are to be formed.

#### **4) Risk, Disclosure and Confidentiality**

- 4.1. Adults have the right to make their own decisions and to exercise choice. These rights are however not unconstrained and must be assessed alongside a consideration of the importance of the freedom of others and the risks others may be exposed to. Sometimes there are legal constraints (e.g. mental health legislation), where an individual cannot safely exercise choice for themselves.
- 4.2. It is the responsibility of the employee/volunteer to ensure that the proper account is taken of the individual's capacity to evaluate risk for him or herself and to decide whether the individual is able to act appropriately having evaluated the risk. It must be recognized that the right to autonomy can involve risk and where the service user chooses to stay in risky situations, these will be discussed with Social Services so that they can decide how to proceed.
- 4.3. When an individual has the capacity to make an informed decision regarding their personal circumstances, and where risk has been identified but the individual does not wish to accept the intervention, then that individual's wishes will generally be respected. It is the responsibility of Social Services to make this assessment and where there is any doubt, they should be consulted.
- 4.4. Where the situation appears to include elements of serious crime, risk or harm to the individual or to others, there is an overwhelming responsibility to intervene and set aside the fact that the information was provided in confidence.
- 4.5. The decision to pass on information without the consent of a service user will not be taken lightly. Decisions about breaching confidentiality need to be made between the project lead, the line manager and the nominated trustee (see below for details), taking into account the capacity of the individual to understand the consequences of his/her action or inaction and the reasonableness of the decision with regard to the circumstances.
- 4.6. If it should be necessary to breach confidentiality, every effort should be made to inform the service user beforehand where this does not put the vulnerable adult at risk.



4.7. It will always be necessary to monitor and re-examine situations in the light of changing circumstances, and the general rule should be to actively secure the care of the individual or alleviate risks whenever possible.

4.8. Some service users may fear reprisals or not understand the seriousness of what has occurred, and therefore they may require support, whether or not they have consented to the disclosure taking place.

## **5) Responsibilities for raising a concern**

If you are an employee or volunteer and you suspect abuse, or you are being told about alleged abuse, you should:

5.1. Always seek permission to share the information given – however, it may not always be possible to respect the individual's wishes for confidentiality. You will need to over-ride this if:

- a) There is a risk of harm
- b) It is in the public interest
- c) There are child welfare issues
- d) Consent has been given only under duress
- e) There is a serious criminal offence

5.2. First of all, listen carefully to what the person reporting the alleged abuse is saying, accept this without challenge, ask questions to establish the basic facts, and reassure them that the matter will be taken seriously; then reassure them that they will be involved in decisions about what will happen.

5.3. If the person reporting the abuse is not the at-risk adult concerned, then you should not take the initiative in discussing the matter with the client; you should simply follow the appropriate actions described below

5.4. Do not get the person to justify what they are saying, nor promise that you'll keep what they say a secret, nor be judgemental; do not contact the alleged abuser.

5.5. Ensure that the individual allegedly being abused is safe from harm or further abuse, and then report the concern to the designated Safeguarding Lead or Director of STAR.

5.6. Working with the designated Safeguarding Lead or Director of STAR record the incident on the Record of Concern sheet; seek to recall as exactly as possible the words used by the person; state who was involved, any other witnesses, the appearance and behaviour of the person, including any injuries observed; keep the record factual, and confidential. Remember that from a legal point of view, "if it is not written down, it did not happen".

5.7. The designated Safeguarding Lead or Director will then contact the relevant social services helpdesk and pass on the Record of Concern.

5.8. Where there is physical evidence suggesting a crime may have been committed, contact the police immediately and follow their advice; try not to disturb the scene i.e. do not clean up, wash anything or throw anything away; secure the area where the incident took place and make notes of the state of the victim's clothing or any injuries observed; call the designated Safeguarding Lead or Director of STAR as soon as possible.

5.9. If the alleged abuser is also a service user, then a member of staff will need to be allocated to attend to their needs and ensure that they do not pose a risk to other vulnerable adults.



5.10. If the alleged abuser is a member of staff or a volunteer, consideration must immediately be given to protecting the vulnerable adult(s) from the possibility of further abuse until the issues have been investigated. The designated Safeguarding Lead should discuss this with the Director initially; the Director may choose to discuss this with the Chair of Trustees before following the internal staff disciplinary procedures and discussing actions with the regulatory authority.

5.11. If you have reason to believe your line manager is colluding in the abuse you should report your concerns directly to the Director or if not possible to the nominated trustee. If the nominated trustee is not available, the Chair of Trustees or another trustee should be contacted. Failing that you should report your concerns directly to the Duty Officer of the appropriate Social Services team closest to the home of the vulnerable adult. In addition to this you should consult the STAR Whistle-blowing Policy. See contact details below.

## **6) Contacts**

6.1. STAR'S Vulnerable Adults Officer is a designated lead from the trustee board. Currently this role is shared between Jackie Leswell (Chair), Richard Homer (Secretary) Roger Constantine (Trustee) and Alistair Doxat Purser (Trustee), who can be contacted on 07580 303431 (Jackie Leswell).

6.2. The National Helpline – Helplines Partnership which helps to find your local safeguarding team can be contacted on 0300 330 7777

6.3. The Director of STAR – Emma Heath can be contacted on 07816 945995

6.4. Concerns may also be expressed to the Chair of STAR, Jackie Leswell, who can be contacted on 07580 303431

7. Review of this policy

This policy will be reviewed regularly by the trustees of STAR.



## **APPENDIX 1**

### **Definitions of Abuse, Harm and Neglect**

- ★ Physical abuse: including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.
- ★ Domestic violence: including psychological, physical, sexual, financial, emotional abuse; 'honour' based violence.  
Domestic abuse is about intimate partners and other family members. In 2013, the Home Office announced changes to the definition of domestic abuse: 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.  
Includes: psychological, physical, sexual, financial, emotional abuse; 'honour' based violence; Female Genital Mutilation; forced marriage. Age range now includes age 16 upwards. (Ref: Care and Support Statutory Guidance)
- ★ Forced Marriage: Although forcing someone into a marriage and/or luring someone overseas for the purpose of marriage is a criminal offence – the civil route and the use of Forced Marriage Protection Orders is still available and can be used as an alternative to entering the criminal justice system. It may be that perpetrators will automatically be prosecuted where it is overwhelmingly in the public interest to do so, however, victims should be able to choose how they want to be assisted
- ★ Exploitation by radicalisation: The Home Office leads on the anti-terrorism strategy, CONTEST, and PREVENT is part of the overall CONTEST strategy, aiming to stop people becoming terrorists or supporting violent extremism. Local safeguarding structures have a role to play for those eligible for adult safeguarding.
- ★ Sexual abuse: including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting or does not have the mental capacity to consent.
- ★ Sexual exploitation: The term "sexual exploitation" means any actual or attempted abuse of a position of vulnerability, differential power, or trust, for sexual purposes, including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another
- ★ Psychological abuse: including emotional abuse, 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 supportive networks.
- ★ Financial or material abuse: including theft, fraud, internet scamming, 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.
- ★ Discriminatory abuse: including forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion.
- ★ Organisational abuse: including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one off incidents to on-going ill-treatment.  
It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.



- ★ Neglect and acts of omission: including ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating
- ★ Self-neglect: this covers a wide range of behaviour, including neglecting to care for one's personal hygiene, health or surroundings and other self-damaging behaviour such as hoarding.

## **APPENDIX 2**

### **Rights and values**

All people have the right to:

- 1) Be treated with dignity and respect as equal human beings.
- 2) Have personal freedom to determine their own actions unless there are good reasons for imposing restrictions, or where individuals cannot take decisions to protect themselves, their assets or bodily integrity.
- 3) Live safely in a home environment without fear of physical or emotional violence or abuse in any form.
- 4) Move freely about the community without fear of physical abuse or emotional violence or harassment.
- 5) Have personal money, goods and possessions treated with respect.
- 6) Receive equal protection for themselves and their personal property through the law.
- 7) Be given access to knowledge and information in a form which can be understood to help them make informed choices about how life is lived.
- 8) Have individual sexual needs and orientation accepted and respected (where it does not infringe on the rights of others) without fear of harassment or discrimination.
- 9) Be shown respect and given support when making a complaint or seeking help as a consequence of mistreatment.
- 10) Receive appropriate medical treatment and provision.
- 11) Confidentiality and to know in advance on what basis any information might be shared with others (employees/volunteers should refer to our policy on confidentiality).
- 12) Access to information held on file subject to any restrictions under Access to Health Records and Data Protection Act 1998.
- 13) Make choices and come to decisions, and have those decisions respected.
- 14) Full information of the range of support services available from all agencies and to be given access to those services when needed.
- 15) Be free to express concerns in confidence about abuse from others without fear of adverse consequences, providing an allegation is not made maliciously.
- 16) Be presumed innocent until proven otherwise where allegations of abuse are made against them.
- 17) The support of a representative/advocate to speak on their behalf if so desired.
- 18) Access to an effective complaints or grievances procedure.
- 19) Protection and help where they are unable to take their own decisions and/or protect themselves, their assets or bodily integrity.

