



CARE HOUSING ASSOCIATION SAFEGUARDING POLICY

Implementation Date	15/10/2020
Reviewed	July 2023 by Rachael Kaminski (Operations Manager)
Last Committee Review Date	10/07/2023
Review Due	July 2026

1. Policy Statement

Care Housing Association (Care) is committed to its responsibility to keep its customers, staff, contractors and directors safe from harm. There are a number of routes through which concerns raised in relation to our customers will be most appropriately handled, including via health and safety procedures, tenancy management, complaints, and whistleblowing. Our safeguarding policy relates to adults who are being abused or neglected by others, are neglecting themselves or who are at risk of being abused or neglected by others. We believe that living a life that is free from harm and abuse is a fundamental right of every person. We recognise too that safeguarding those at risk of abuse is everyone's responsibility.

Specifically, we aim to:

- Develop a culture that does not tolerate any abuse, and which encourages people to raise concerns.
- Respond promptly and proportionately to reports of abuse, to make the necessary referrals and engage the appropriate authorities.

2. Scope

This Safeguarding Policy is an over-arching policy, applying across our business. It is important that all staff, directors, contractors, support provider partners and involved tenants are aware that we all have a responsibility to act on concerns of abuse or neglect.

Care's core business is the provision of specialist housing for adults requiring support, therefore this policy is to safeguard vulnerable adults, though we recognise that our staff, tenants and directors may be in contact with children.

This policy applies to the protection of adults at risk of abuse across all tenures, as well as to staff, contractors, sub-contractors and agents working for Care.

3. Legal Context

This policy has been developed in response to legislation and guidelines including the following:

- Public Interest Disclosure Act 1998
- Crime and Disorder Act 1998

- The Human Rights Act 1998
- No Secrets – Department of Health 2000
- The Mental Capacity Act 2005 (and supporting Code of Practice 2016 and amendment 2018)
- Safeguarding Vulnerable Groups Act 2006
- Equality Act 2010
- Protection of Freedoms Act 2012
- Care Act 2014
- Making Safeguarding Personal 2014
- Sexual Offences Act 2014
- Data Protection Act 2018

4. Key Principles

Our policy and supporting procedures are based on the six key principles which underpin safeguarding:

- Prevention – it is always preferable 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
- Empowerment – people being supported and encouraged to make their own decisions
- Partnership – local solutions through working with relevant agencies and communities
- Accountability – accountability and transparency in delivering safeguarding

4.1 What is Abuse?

Abuse is the violation of an individual's human and civil rights by any other person or persons. Abuse can occur in any relationship and may result in significant harm to the person subjected to it. Abuse may consist of a single act or repeated acts, and it can be intentional or unintentional. There are many types of abuse – see Appendix 1 for further information. Specific examples of abusive behaviours, and guidance on spotting signs of possible abuse or neglect, are contained within the Safeguarding Procedures & Guidance of Local Safeguarding Adults Boards (SAB).

4.2 Safeguarding Adults

This means:

- Protecting the rights of adults to live in safety, free from abuse and neglect.
- People and organisations working together to prevent and stop both the risks and experience of abuse or neglect.
- People and organisations making sure that the adult's wellbeing is promoted including, where appropriate, taking fully into account their views, wishes, feelings and beliefs in deciding on any action.
- Recognising that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances and therefore potential risks to their safety or wellbeing.
- Recognising that a person might have limited knowledge of what is and what isn't abusive, especially if persuaded through abusive practice and potential power imbalance.
- Recognising the dangers and existence of acquiescence amongst adults at risk, whereby someone might want to be seen to 'say the right thing' so as not to upset another person.

The SAB must lead adult safeguarding arrangements across its locality and oversee and coordinate the effectiveness of the safeguarding work of its member and partner agencies. Housing providers are a key partner.

4.3 An adult at risk is any person who is aged 18 years or over and at risk of abuse or neglect because of their needs for care and or support. The provisions for safeguarding adults at risk of abuse or neglect contained within the Care Act 2014, apply to an adult who meets the following three criteria:

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

An adult at risk may be someone who:

- has a physical disability and/or sensory impairment
- has a learning disability
- has mental health needs, including dementia or a personality disorder
- has an acquired brain injury
- is dependent on others to maintain their quality of life
- has a long-term illness or condition
- lacks the mental capacity to make particular decisions and is in need of care and support
- has alcohol or drug addiction
- is subject to domestic abuse

It is important to be clear that just because a person has a disability or is old or frail, they are not automatically 'at risk'. The extent to which someone is at risk will be determined by a range of factors including personal characteristics (e.g. mental capacity, ability to communicate, degree of physical dependency) and factors associated with their situation (e.g. extent of support network, access to information).

4.4 Complex Safeguarding

This category is used to describe criminal activity or behaviour associated with criminality involving vulnerable adults (or children) where there is exploitation and/or a clear safeguarding concern. One example is radicalisation, or extremism, which is increasingly being included within multi-agency policy and procedures, with the aim of early identification and early intervention to divert people away from being drawn into terrorism. Care recognises that vulnerable people can be targeted by promoters of violent extremism and is aware of the government Prevent strategy. There are further examples of type of abuse in Appendix 1.

5. Care's Responsibilities

The Care Act 2014 makes it clear that the housing sector has an important contribution to make in safeguarding its customers, working in cooperation with the Local Authority and other individuals and organisations. As a provider of services to adults at risk, Care has a responsibility and duty to consider and follow Local Authority Safeguarding Policies, Procedures and Practice Guidance.

Care's Safeguarding Lead is Operations Manager, Rachael Kaminski.

- All staff will receive safeguarding training within 3 months of taking post and this will be refreshed at least every 2 years. Staff will be able to recognise signs of abuse and/or neglect and are confident to raise a concern appropriately and keep accurate records.
- All staff must be competent and safe to work with adults at risk. We will undertake the necessary Disclosure and Barring Service checks for all staff members.

- We recognise that safeguarding is a multi-agency approach which depends upon effective joint working. We recognise the lead responsibility of local authorities in coordinating safeguarding work, and our own role in alerting adult services and the police of any concerns regarding safety.
- We recognise that appropriate information sharing between organisations is essential to safeguard people at risk and we will act in accordance with agreed inter-agency information sharing protocols. Where possible, we will seek a person's consent to share information, however we cannot guarantee full confidentiality when our responsibility to safeguard adults at risk, or the public interest, is greater than our responsibility to an individual.
- We recognise that abuse may be committed by a member of staff, family member or by others who are in a trusting relationship with a vulnerable person.
- We will ensure that contractors and sub-contractors are willing to work in accordance with this policy.
- We will cooperate with any investigations and contribute to whatever actions are necessary to safeguard the person at risk.
- We will appoint a 'safeguarding lead' to provide help and advice to staff and act as a lead on safeguarding issues. They will support staff when making referrals to outside agencies, if necessary, monitor progress and response of referrals, challenge decisions, where appropriate, and support staff to close the concern at an agreed point.
- We will notify the relevant Local Authority Safeguarding Team if abuse is identified or suspected.

5.1 Support for Staff

Reporting alleged abuse and witnessing adults at risk in abusive or neglectful situations can be distressing and traumatic for staff. Line managers should ensure that staff have support and opportunity to de-brief and discuss their experiences and concerns.

Occasionally, there may be tenants who are 'at risk' who make distressing or vexatious allegations that staff have in some manner abused or neglected them. This is rare and it is important to remember that the person making the allegation may be influenced by a mental health issue or cognitive impairment. However, when it does happen it is important for the tenant and staff that it is dealt with by contacting the Local Authority safeguarding officer and discussing the situation, explaining why you believe the report to be untrue and any evidence you have, and seeking their advice as to how to proceed. In these cases, it is vital to ensure that detailed records are maintained as to the type of complaint made, which staff it involved and action taken. Staff who are lone workers can be particularly vulnerable to allegations of this nature. This is considered in Care's Lone Worker Policy.

5.2 Mental Capacity

Capacity and consent are central themes in safeguarding. Every adult has the right to make their own decisions and a person is assumed to have capacity to do so unless it is proved that they do not. The Mental Capacity Act 2005 sets out a clear test for whether a person lacks capacity to take a particular decision at a particular time. If there are concerns that a person being abused lacks mental capacity, a referral must be made to their social worker or adult services so a Mental Capacity Assessment can be undertaken.

5.3 Consent and Confidentiality

Information may be shared without consent if it is to prevent or detect a crime or when the enquiry is urgent and seeking consent will cause delay which could lead to significant harm.

6. Raising a Concern

Employees of Care should refer to Care's Safeguarding Procedure and inform Care's safeguarding lead of any concerns or reports. If there is immediate risk the police should be contacted first, and then the SAB.

Care is responsible for making a referral in accordance with the local area procedures. Each locality has a Local SAB and a multi-agency policy and procedure, providing the local framework for partner organisations to work together, enabling a consistent approach when responding to safeguarding concerns. Procedures and terminology may vary between local authority areas, and staff must know where to find the policy and processes in place in the areas where they operate. The procedural format for referral will be available on the local authority website.

7. Equality and Diversity

Care is committed to respecting diversity in all aspects of our work and we will not tolerate any form of discrimination.

We recognise that there is the potential for impact across the characteristics of Age, Disability, Gender Reassignment, Marriage and Civil Partnership, Pregnancy and Maternity, Race, Religion or Belief, Sex or Sexual Orientation.

Where we are made aware of or identify customers with specific needs, we will be proactive in targeting our communication and support appropriately and consider any specific needs individually.

8. Monitoring

The designated officer responsible for implementation and monitoring of this policy will be the Chief Executive.

9. Commitment and Review

Care will formally review this policy every three years or as necessary dependant on legislative changes.

Appendix 1 – Types of Abuse

The Care Act 2014 encourages local authorities not to limit their view of what constitutes abuse or neglect, and to consider each case individually. The Act includes the following types of abuse, but this is not intended to be an exhaustive list.

- **Physical abuse** - including pushing, shaking, pinching, hitting, slapping, kicking, force feeding, inappropriate restraint.
- **Psychological abuse** – threats of harm or abandonment, humiliation, harassment, blaming, intimidation, controlling, deprivation of contact, isolation, verbal abuse and preventing access to information, advice or services which could help them.
- **Sexual abuse** – any sexual acts to which the adult at risk has not consented fully or could not consent or was pressured into consenting including rape, sexual assault, incest, inappropriate touching and encouragement to watch pornographic material.
- **Financial abuse** – inappropriate use of the adult at risk's financial resources or property such as theft, pressure in connection with wills or the misuse or misappropriation of property, possessions or benefits.
- **Neglect and acts of omission** – the withholding of the necessities of life such as adequate nutrition, medication and heating; failure to provide appropriate intervention or support to access health, social or educational services.
- **Discriminatory abuse** – motivated by discriminatory and oppressive attitudes including racist and sexist treatment.
- **Institutional abuse** – relates to regimes and practices such as poor care standards, inadequate staffing, insufficient knowledge within the service, unacceptable treatments such as withholding food or drink and seclusion and unauthorised use of control and restraint.
- **Self-neglect** – neglecting to care for one's personal hygiene, health or surroundings, including behaviour such as hoarding. Whether a response is required will depend on the adult's ability to protect them by controlling their own behaviour. Abusers may be relatives, friends, care workers, neighbours or any other person with a legitimate reason to have contact with the person or strangers who deliberately seek out to abuse vulnerable people. Abuse can happen anywhere.

Other types of abuse that have been acknowledged more recently include ICT abuse and types that would class as complex safeguarding.

ICT abuse: E-Safety is safeguarding all users of fixed and online devices that allow access to content and communications that could pose risks to personal safety and wellbeing e.g. PCs, laptops, mobile phones and gaming consoles. Some examples of risks associated with information and communication technology are:

1. Aggressive (violent/hateful content, bullying or harassing)
2. Sexual (pornographic or unwelcome sexual content, grooming, creating or uploading inappropriate/illegal material)
3. Values (bias, racism, unwelcome persuasions)
4. Commercial (tracking, harvesting personal information)

Complex Safeguarding:

- Domestic abuse – controlling, coercive, threatening, degrading and violent behaviour, including sexual violence, by a partner or family member or carer.
- Honour based violence – violent crime which may have been committed to protect or defend the honour of the family or community.
- Forced marriage – where one or both people do not consent to the marriage and pressure or abuse is used.

- Child sexual exploitation (CSE) – Where an individual or group take advantage of an imbalance of power to coerce, manipulate or deceive a child into sexual activity.
- County lines – When gangs and organised crime networks groom and exploit children or vulnerable adults to sell drugs. Often these individuals are made to travel across counties and use dedicated mobile phone lines.
- Serious organised crime – drug trafficking, money laundering, counterfeiting, gun crime, fraud.
- Modern slavery and trafficking – hidden crime in which people are exploited for criminal gain including labour exploitation, sexual exploitation, domestic servitude and criminal exploitation. It includes transporting, recruiting or harbouring people for the purpose of exploitation and financial gain using the threat of violence, threats or coercion.
- Female Genital Mutilation – a procedure where the female genitals are deliberately cut for no medical reason.
- Radicalisation and extremism – a process by which an individual or group come to adopt increasingly extreme political, social or religious ideals and aspirations that reject and/or undermine the status quo or reject and undermine contemporary ideas and expressions of freedom of choice.