



Safeguarding Adults Policy

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1. Scope

This policy applies to all employees and workers of Torus, including secondees into and out of the organisation, board members, volunteers, trainees, contractors, and temporary workers, including those working on a bank or agency contract.

For ease of reference, all employees and workers who fall under these groups will be uniformly referred to as 'staff' in this document.

2. Policy Statement

2.1 Torus recognises that safeguarding adults at risk is a shared responsibility, with the need for effective joint working between statutory and non-statutory agencies, and professionals with different roles and expertise.

2.2 Responsibilities for safeguarding are enshrined in legislation. This policy has been informed by all relevant guidance (statutory and non-statutory) that seeks to protect adults at risk including:

- Care Act 2014
- Care and Support Statutory Guidance (updated 2016)
- The Human Rights Act 1998
- Handling Cases of Forced Marriage Ministry of Justice 2009
- Protection of Freedoms Act 2012
- The Equality Act 2010
- Mental Capacity Act 2005 (see appendix 5 for more detailed information)
- General Data Protection Regulations (GDPR) 2018
- Crime and Disorder Act 1998
- Serious Crime Act 2015
- Housing Act 1996
- The Government's policy statement on adult safeguarding 2013

2.3 Torus takes all concerns and allegations of abuse, neglect and harm seriously. Safeguarding means protecting an adult's right to live safely, free from abuse and neglect. It is about people and organisation's working together to prevent and stop both the risks and experience of abuse or neglect, whilst at the same time making sure the adult's wellbeing is promoted including where appropriate having regard to their views, wishes and feelings and beliefs.

2.4 Abuse can take many forms. It may occur via neglect of a person, by inflicting harm, or failing to act to prevent harm. It is behaviour that either deliberately or unknowingly causes harm, endangers life, or infringes on a person's rights. Appendix 1 gives detailed definitions of 'at risk', 'harm' and 'abuse' and categories of abuse.

2.5 The Government's policy statement on adult safeguarding 2013 sets out six principles for safeguarding adults. This policy is rooted in those principles, the underpinning aim is to achieve good outcomes for adults at risk, based upon a culture of acceptable risk (including a person's right to make the "wrong" decision). Whilst they are not legal duties, these principles do represent best practice. They also provide a foundation for achieving good outcomes.

The six principles are detailed within Appendix 2 .

2.6 This policy sets out Torus responsibilities to safeguarding adults and how the organisation will ensure that Safeguarding becomes everyone's responsibility and that the principles of Making Safeguarding Personal (MSP) are adopted across the Group structure. If adults at risk are to be effectively protected from abuse/harm, then Torus needs to ensure this commitment is explicitly understood, embedded into the strategic framework, and implemented into operational practices throughout the Group.

The Principles of Making safeguarding personal are detailed within Appendix 3

3. Implementation

3.1 Torus will seek to keep adults at risk safe by:

- Ensuring a structured and systematic approach to safeguarding adults at risk with clear lines of accountability
- Providing clarity regarding roles and responsibility from 'Board to Floor' in safeguarding adults at risk
- Adopting safeguarding adults at risk practices through procedures and a code of conduct for all staff and volunteers
- Having robust systems in place to manage any allegations against staff and volunteers appropriately
- Having effective complaints and whistleblowing measures in place
- Monitor the effectiveness of safeguarding policies, procedures and practice through a series of audits and case reviews
- Embedding safe working practices, including recruitment, vetting and barring procedures
- Ensuring everyone in the organisation understands their role and responsibilities in relation to safeguarding and is provided with appropriate support to recognise, identify and respond to signs of abuse, neglect or other safeguarding concerns relating to adults at risk
- Ensure staff are aware of how and when to raise safeguarding concerns using appropriate escalation procedures where relevant to their role
- Offering staff training and continuing professional development so that staff are competent to undertake their roles and responsibilities, and understand those of other professionals and organisations in relation to safeguarding adults at risk
- Ensure effective interagency working and information sharing practices
- Ensuring appropriate action is taken in the event of an incident or concern being raised and support provided to those who raise or disclose the concern
- Providing effective management for staff and volunteers through providing supervision, support, training and quality assurance measures
- Recording and storing information safely and securely
- Valuing, listening to and respecting the views of adults making safeguarding personal (MSP) '*Nothing about me without me*' (Appendix 3)
- Sharing concerns, along with relevant information, with agencies who need to know, and involving adults at risk and their families and carers appropriately

4 Safeguarding Responsibility

4.1 The Board

The Board has ultimate responsibility for ensuring that this policy and associated procedures are in place and complied with to protect adults at risk.

The Board has ultimate responsibility for ensuring that an effective systems for managing any risks associated with safeguarding adults exists within Torus and that all staff working in Torus are aware of and operate within this policy.

The Board will assure itself of compliance with this policy through the accountability arrangements delegated to the safeguarding subcommittee and via an annual report prepared by the Safeguarding Officer supported by the Safeguarding workstreams. A copy of the Safeguarding Governance Structure can be found in Appendix 4

4.2 The Chief Executive

The Chief Executive (CEO) provides strategic leadership, promoting a culture of supporting good practice and excellence in relation to Safeguarding within the organisation and promotes collaborative working with other agencies.

4.3 The Chief Operating Officer

The Chief Operating Officer (COO) is the nominated Director at board level responsible for reporting to the Board on safeguarding issues, providing assurance that the organisation is meeting its safeguarding requirements on an annual basis, promoting initiatives to ensure that Torus has robust arrangements for safeguarding and providing leadership in the long term

4.4 The Safeguarding Sub Committee

The subcommittee has delegated authority to oversee and monitor the safeguarding of adults, children and young people and domestic abuse arrangements for the group and to ensure that all safeguarding functions are embedded in the governance structures of the organisation. The subcommittee is accountable for its work to the board.

4.5 Members of the safeguarding workstreams are responsible for the delivery of key priorities and will report progress to the committee on a quarterly basis

4.6 Safeguarding reports will be produced on a quarterly basis for the safeguarding committee, scrutiny and risk panel and an annual report for the board.

4.7 The Safeguarding Officer (SO)

The Safeguarding Officer will provide operational support and expert advice to support the management of safeguarding concerns, significant events and will lead the development of best practice and effectiveness of services.

All staff

4.8 All members of staff (including contractors and volunteers) have responsibility for adherence to this policy and associated procedures.

4.9 All staff are responsible for understanding the different types of abuse and reporting concerns or suspected abuse via the relevant escalation route.

4.10 All staff are responsible for recognising and responding to allegations of abuse by ensuring that they discuss their concerns with their line manager, refer their concerns or assist in the referral and

4.11 All staff should contribute to whatever actions are needed to safeguard and promote the welfare of adults at risk and take part in regularly reviewing the outcomes for the adult against specific plans and outcomes

4.12 Managers

Line managers will be responsible for:

- Contribute to the dissemination and implementation of this policy
- Ensure all staff within their department are aware of this policy and the process to be followed in the event of suspected abuse of an adult at risk
- Ensure all staff access the appropriate level of training as defined in the Torus safeguarding training strategy and training needs analysis
- Develop and promote training needs and priorities and contribute to the delivery of training for staff
- Provide/ensure provision of effective safeguarding appraisal, support, peer review and supervision for staff
- Provide routine management supervision assuring core competencies in safeguarding practice
- Manage/oversee immediate safeguarding and protection issues
- Co-ordinate referrals, safe transfer of responsibilities and support the implementation and attendance of multi-agency processes and meetings
- Co-ordinate any alternative action plans
- Make decisions about referrals to local authority Safeguarding Services and utilise escalation procedures
- Ensure staff in their areas meet mandatory training requirements in safeguarding and provide support to those making safeguarding referrals

5 Consultation/Resident Involvement

5.1 Consultation with residents, service users and operational staff has been established throughout the development of this policy at several stages and the policy content has been influenced by their feedback.

6 Diversity & Inclusion

6.1 Equality, diversity, and inclusion are important to Torus. Throughout the development of this document, due regard has been given to the need to eliminate discrimination, harassment, and victimisation, to advance equality of opportunity, and to foster good relations between people who share a relevant protected characteristic (as cited in the Equality Act 2010).

6.2 The following have also been referenced in the development of this document: European Convention on Human Rights, and the UN Convention on Rights of Persons with Disabilities.

6.3 This policy will not discriminate, either directly or indirectly, on the grounds of the nine protected characteristics (age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion and belief; sex; and sexual orientation).

7 Monitoring & Review

7.1 The Safeguarding Committee via the Safeguarding Practice and Quality Assurance Subgroup will monitor this policy through a system of audit and case review.

7.2 This policy document is due for review in two years unless new legislation, a Local Safeguarding Adults Board(s) directive or learning from a serious incident requires earlier review.

Definitions

Safeguarding means protecting a person’s right to live in safety, free from abuse and neglect.

An adult at risk is someone who may need care because of a physical, learning or other disability, or because of their age or an illness. This definition also applies to an adult who is unable to take care of him or herself properly, or who is unable to protect him or herself from significant harm or exploitation.

Some groups of people are particularly vulnerable to harm and exploitation, and it is important that their needs are carefully considered:

- those with disabilities
- those living away from home
- asylum seekers
- victims of domestic abuse
- those who may be singled out due to their religion or ethnicity
- those who may be exposed to violent extremism.

Safeguarding means protecting the adult’s right to live in safety and free from abuse and neglect and promoting the adult’s wellbeing. Safeguarding duties apply to an adult at risk as defined in Section 42 of The Care Act 2014 which is:

- has needs for care and support (whether or not the authority is meeting any of those needs)
- is experiencing, or at risk of abuse and neglect
- as a result of their needs for care and support unable to protect themselves from the abuse or neglect or risk of it

Definitions of harm: Adults

<p>Physical Harm</p>	<p>Any physical contact that results in discomfort, pain, or injury. Examples of physical harm include:</p> <ul style="list-style-type: none"> • assault, rough handling, hitting, slapping, punching, pushing, pinching, shaking, bruising, or scalding • exposure to excessive heat or cold • a failure to treat sores or wounds • inappropriate use of medication (e.g., under- or overuse of medication, or the use of un-prescribed medication) • the use of inappropriate sanctions the unlawful or inappropriate use of restraint or physical interventions • the deprivation of liberty
<p>Sexual harm and exploitation</p>	<p>Examples of sexual harm and exploitation can include the direct or indirect involvement of the vulnerable adult in sexual activity or relationships that:</p> <ul style="list-style-type: none"> • they do not want or have not consented to • they cannot understand, and cannot consent to, since they lack the mental capacity • they have been coerced into because the other person is in a position of trust, power, or authority, e.g., a care worker. <p>Sexual harm can involve bruising or injury to the anal, genital, or abdominal area, and the transmission of STD. It also includes inappropriate touching. Being forced to watch sexual activity is also a form of sexual exploitation.</p>

<p>Psychological and emotional harm</p>	<p>This is behaviour that causes mental distress or has a harmful effect on an individual’s emotional health and development. It can include:</p> <ul style="list-style-type: none"> • mocking, coercing, bullying, verbal attacks, intimidation, or harassment • demeaning, disrespectful, humiliating, racist, sexist, or sarcastic comments, shouting, swearing or name-calling • excessive or unwanted familiarity • the denial of basic human and civil rights such as self-expression, privacy, and dignity • negating the right of the vulnerable adult to make choices • undermining the individual’s self-esteem • isolation and over-dependence that has a harmful effect on the person’s emotional health, development, or well-being • the use of inflexible regimes and lack of choice.
<p>Neglect</p>	<p>Neglect occurs when a person’s well-being is impaired because his or her care or social needs are not met.</p> <p>Examples of neglect include:</p> <ul style="list-style-type: none"> • the failure to allow access to appropriate health, social care and educational services • the failure to provide adequate nutrition, hydration or heating, or access to appropriate medication • ignoring medical or physical needs, e.g., untreated weight loss, or a lack of care that results in pressure sores or uncharacteristic problems with continence • poor hygiene, e.g., lack of general cleanliness or soiled clothes not being changed • the failure to address the vulnerable individual’s requests. <p>Neglect can be intentional or unintentional.</p> <p>Intentional neglect can include:</p> <ul style="list-style-type: none"> • willfully failing to provide care • willfully preventing the vulnerable adult from getting the care they need • being reckless about the consequences of the person not getting the care they need <p>Unintentional neglect can include:</p> <ul style="list-style-type: none"> • a carer failing to meet the needs of the adult at risk because they do not understand their needs • a carer lacking knowledge about the services that are available • a carer’s own needs preventing them from being able to give the care the person needs • an individual being unaware of, or lacking an understanding of, the possible effect on the adult at risk of a lack of action
<p>Self-neglect</p>	<p>This covers a wide range of behaviour concerning a person’s personal hygiene, health or surroundings and includes behaviour such as hoarding. It should be noted that self-neglect may not prompt a section 42 enquiry. An assessment should be made on a case-by-case basis. A decision on whether a safeguarding response is needed will depend on the person’s ability to protect themselves by controlling their own behaviour. There may come a point when they are no longer able to do this without external support.</p>

Discrimination	Discrimination on the grounds of race, faith or religion, age, disability, gender, sexual orientation and political views, along with racist, sexist, homophobic or ageist comments or jokes, or comments and jokes based on a person's disability or any other form of harassment, slur or similar treatment. Excluding a person from activities on the basis they are 'not liked' is also discriminatory abuse, for example, hate crime.
Institutional harm	<p>Examples of institutional harm can include:</p> <ul style="list-style-type: none"> • an observed lack of dignity and respect in the care setting • the enforcement of rigid routines • processes and tasks being organised to meet the needs of staff rather than those in their care • disrespectful language and attitudes
Financial or material abuse	<p>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. Internet scams, postal scams and doorstep crime are more often than not targeted at adults at risk and all forms of financial abuse. These scams are becoming more sophisticated and elaborate. For example: internet scammers can build very convincing websites. People can be referred to a website to check the caller's legitimacy but this may be a copy of a legitimate website. Postal scams are mass-produced letters which are made to look like personal letters or important documents. Doorstep criminals call unannounced at the adult's home under the guise of legitimate business and offering to fix an often-non-existent problem with their property. Sometimes they pose as police officers or someone in a position of authority</p> <p>In all cases this is financial abuse and the adult at risk can be persuaded to part with large sums of money and in some cases their life savings. These instances should always be reported to the local police service and local authority Trading Standards Services for investigation.</p> <p>These scams and crimes can seriously affect the health, including mental health, of an adult at risk. Agencies working together can better protect adults at risk.</p>
Domestic abuse	<p>Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between people aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass but it is not limited to:</p> <ul style="list-style-type: none"> • psychological • sexual (including female genital mutilation) • financial • emotional • forced marriage • honour-based violence <p>A new offence of coercive and controlling behaviour in intimate and familial relationships was introduced in the Serious Crime Act 2015. The offence imposes a maximum of five years imprisonment. The offence closes the gap in the law around patterns of coercive and controlling behaviour during a relationship between intimate partners, former partners who still live together, or family members, sending a clear message that it is wrong to violate the trust of those closest to you, providing better protection to victims experiencing continuous abuse allowing for earlier identification, intervention and prevention.</p>

<p>Modern slavery</p>	<p>Slavery, servitude and forced or compulsory labour. A person commits an offence if:</p> <ul style="list-style-type: none"> • The person holds another person in slavery or servitude and the circumstances are such that the person knows or ought to know that the other person is held in slavery or servitude, or • The person requires another person to perform forced or compulsory labour and the circumstances are such that the person knows or ought to know that the other person is being required to perform forced or compulsory labour <p>There are many different characteristics that distinguish slavery from other human rights violations, however only one needs to be present for slavery to exist. Someone is in slavery if they are:</p> <ul style="list-style-type: none"> • Forced to work – through mental or physical threat • Owned or controlled by an “employer”, usually through mental or physical abuse or the threat of abuse • Dehumanised, treated as a commodity or bought and sold as property • Physically constrained or has restrictions placed on his/her freedom of movement • Subject to human trafficking <p>Contemporary slavery takes various forms and affects people of all ages, gender and race. Adults who are enslaved are not always subject to human trafficking. Recent court cases have found homeless adults promised paid work opportunities, enslaved and forced to work and live in dehumanising conditions, and adults with a learning difficulty restricted in their movements and threatened to hand over their finances and work for no gains.</p> <p>From 1 November 2015, specified public authorities have a duty to notify the Secretary of State of any person identified in England and Wales as a suspected victim of slavery or human trafficking, under <i>Section 52 Modern Slavery Act 2015</i>.</p>
<p>Radicalisation</p>	<p>Radicalisation is comparable to other forms of exploitation, such as grooming and child sexual exploitation. Radicalisation’s aim is to attract people to another way of reasoning, inspire new recruits and embed extreme views and persuade vulnerable people of another cause’s legitimacy. This may be through face-to-face encounters or through social media.</p> <p>There are a number of factors that may make a person susceptible to exploitation by violent extremists. None of these factors should be considered in isolation but in conjunction with the individual circumstances.</p>
<p>Hate Crime</p>	<p>A hate crime is described as ‘any hate incident which constitutes a criminal offence perceived by the victim or any other person, as being motivated by prejudice or hate’. Some offences are clear such as robbery and assault. However, less obvious incidents such as verbal abuse, harassment and threats of intimidation may also be criminal offences</p>

Principles of Adults Safeguarding

The Government's policy statement on adult safeguarding 2013 set out six principles for safeguarding adults. Whilst they are not legal duties, these principles do represent best practice. They also provide a foundation for achieving good outcomes.

1. Empowerment

Adults should be in control of their own lives and their consent is needed for decisions and actions designed to protect them. It is therefore vital that, if someone has mental capacity and is able to make their own decisions, they maintain control, and the professional's role is to support their decision making at each stage of the process. This includes taking action only with consent unless there is clear justification to act contrary to the person's wishes e.g., if they lack mental capacity, or they and/or others are in danger.

2. Protection

Policy and Procedures should provide a framework by which people can be supported to safeguard themselves from abuse/harm, or be protected where they are unable to make their own decisions about their safety (due to reasons of mental capacity)

3. Prevention

This is the primary goal, and everyone has a role in preventing abuse from occurring. This includes promoting awareness and understanding and supporting people to safeguard themselves. It also refers to organisations having systems in place to minimise the risk of abuse.

4. Proportionality

The responsibility to ensure that responses to concerns/alerts are proportional to the assessed risk and the nature of the allegation/concern. Proportional decisions need to take into account the principles of empowerment and protection. Where a person lacks the mental capacity, any decisions made on their behalf must be made in the person's "best interests" and be least restrictive to their rights and freedoms.

5. Partnerships

Working together to prevent and respond effectively to incidents or concerns of abuse. This includes working with the person to support their decision making, with relatives, friends, informal carers and other representatives (e.g., advocates) to achieve positive outcomes for the person at risk. Also working collaboratively with other agencies and for statutory agencies to value the role of non-statutory partners.

6. Accountability

Involves transparency in decision making, by individuals and organisations, ensuring that defensible decisions are made and there are clear lines of accountability. This means that organisations, their staff and partners understand what is expected of them, that they act on those responsibilities and accept collective accountability for safeguarding arrangements.

Principles of Making Safeguarding Personal

The Making Safeguarding Personal (MSP) programme has been running since 2010. It emphasises that safeguarding adults should be person centred and outcomes focused and advocates a move away from the 'process' that characterised practice under No Secrets Guidance, to being centred on conversations with people about what they think needs to happen.

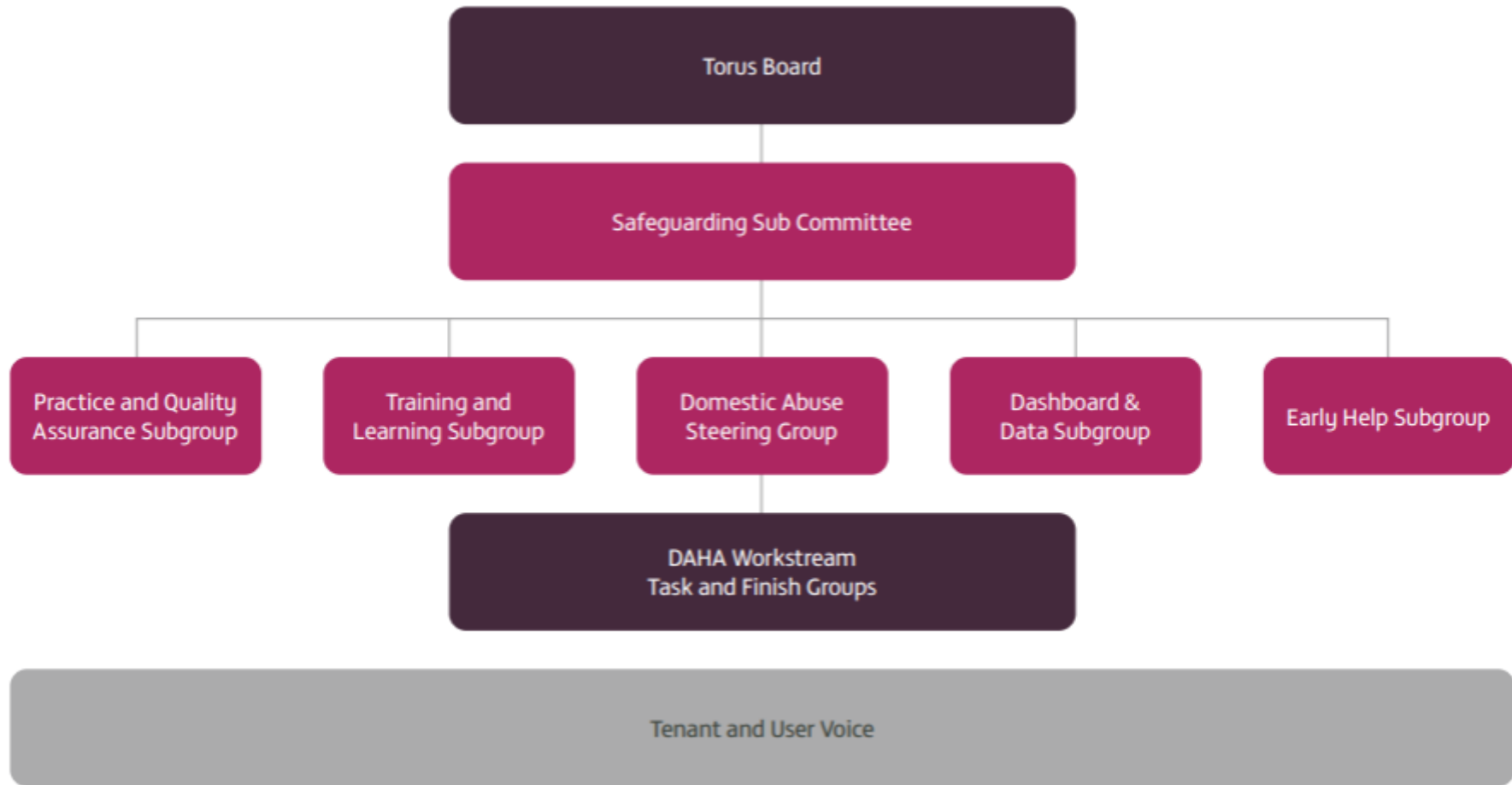
The Care Act (2014) guidance incorporated MSP as the recommended approach to safeguarding, alongside the six principles to work to in safeguarding:

- Adult safeguarding needs to be as empowering as possible. It is vital that people have as much control and choice as possible, that their preferred outcomes are addressed and that the pace, meetings and protection plans are guided by their needs and circumstances. Accessible information, advice, support and good advocacy are essential components to this.
- Having access to information and advice assists those involved in making informed choices about care and support and helps them to weigh up the benefits and risks of different options. Information and advice can enable people to keep themselves safe in the first place. However, should abuse occur people need to know what options are open to them. It is also important in terms of understanding the safeguarding process and longer-term support.
- People cannot make decisions about their lives unless they know what the options are, what the implications of those options may be and have had the chance to really consider them. They can feel disempowered (and possibly damaged) by the safeguarding process unless they know what is happening and the choices they have. Professionals leading safeguarding enquiries should take time to consider what information needs to be made available to assist people at the right times, in what format, and allow time for information to be digested.

Safeguarding Governance and Reporting Structure



Safeguarding Groups and Reporting Structure



The Mental Capacity Act

The Mental Capacity Act 2005 (MCA) is designed to protect and empower people who may lack the mental capacity to make their own decisions about their care and treatment. It applies to people aged 16 and over.

People who may lack capacity include those with:

- dementia
- a severe learning disability
- a brain injury
- a mental health illness
- a stroke
- substance or alcohol misuse
- confusion, drowsiness or unconsciousness because of an illness or treatment for an illness.

Just because a person has one of these conditions doesn't necessarily mean they lack the capacity to make a specific decision.

Five important principles underpin the Mental Capacity Act:

- It is important to assume that a person has the capacity to make a decision themselves, unless proven otherwise.
- Wherever possible, people should be supported to make their own decisions.
- A person should not be treated as lacking the capacity to make a decision just because they make what seems like an unwise decision.
- If a decision is made on behalf of someone who doesn't have capacity, it must be made in their best interests.
- Any treatment or care provided to someone who lacks capacity should be the least restrictive possible of their basic rights and freedoms.

The MCA also allows people to express their preferences for care, and to appoint a trusted person to make a decision on their behalf, should they lack capacity in the future.