**ADULT SAFEGUARDING POLICY & PROCEDURES**

The Learn to Live 19-25 is committed to safeguarding and promoting the welfare of young adults and expect all staff and volunteers to share this commitment.

 **What is safeguarding?**

Safeguarding is a term we use to describe how we protect adults and children from abuse or neglect. It is an important shared priority of many public services, and a key responsibility of local authorities.

Safeguarding is about protecting certain people who may be in vulnerable circumstances. These people may be at risk of abuse or neglect due to the actions (or lack of action) of another person. In these cases, it is vital that public services work together to identify people at risk, and put steps in place to help prevent abuse or neglect.

# Our areas of responsibility

Safeguarding is everyone’s responsibility. We know how important it is for organisations to work together and create shared strategies to protect people. We are committed to taking action quickly, effectively and professionally when abuse takes place.

Learn to Live 19-25 is committed to creating a culture of zero-tolerance of harm to adults which necessitates: the recognition of adults who may be at risk and the circumstances which may increase risk; knowing how adult abuse, exploitation or neglect manifests itself; and being willing to report safeguarding concerns.

This extends to recognising and reporting harm experienced anywhere, including within our activities, within other organised community or voluntary activities, in the community, in the person’s own home and in any care setting.

We are committed to best safeguarding practice and to uphold the rights of all adults to live a life free from harm from abuse, exploitation and neglect.

**What is abuse?**

Abuse and neglect take many forms. Abuse can lead to a violation of someone’s human and civil rights by another person or persons. Abuse can be physical, financial, verbal or psychological. It can be the result of an act or a failure to act.

It can happen when an adult at risk is persuaded into a financial or sexual exchange they have not consented to, or can’t consent to. Abuse can occur in any relationship and may result in significant harm or exploitation.

Abuse is illegal. The adults who lack capacity are protected by law the same as everyone else. If it is suspected that a crime against a client/adult has been committed, it should be referred to the police. Sometimes, an urgent referral is made for the safety of the adult at risk and/or to preserve evidence.

Abuse is a misuse of power and control that one person has over another. Where someone is dependent on another, there is the possibility of abuse or neglect unless enough safeguards are put in place.

Abuse can fall into the following categories:

# Physical

This includes assault, hitting, slapping, pushing, giving the wrong (or no) medication, restraining someone or only letting them do certain things at certain times.

# Domestic

This includes psychological, physical, sexual, financial or emotional abuse. It also covers so called ‘honour’ based abuse and violence and forced marriage.

# Sexual including sexual exploitation

This includes rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, taking sexual photographs, making someone look at pornography or watch sexual acts, sexual assault or sexual acts the adult didn’t consent to or was pressured into consenting.

# Psychological

This includes emotional abuse, threats of harm or abandonment, depriving someone of contact with someone else, humiliation, blaming, controlling, intimidation, putting pressure on someone to do something, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or support networks.

# Financial or material

This includes theft, fraud, internet scamming, putting pressure on someone about their financial arrangements (including wills, property, inheritance or financial transactions) or the misuse or stealing of property, possessions or benefits.

# Cuckooing

Cuckooing is a form of crime in which drug dealers take over the home of a vulnerable person in order to use it as a base for drug dealing.

**County Lines**

Some vulnerable adults are recruited via "debt bondage", whereby they enter county lines to pay off drug debts. The term "county lines" refers to the phone numbers, or lines, dedicated to this activity. The practice is also known by those involved as "going country" or "out there".

**Female Genital Mutilation**

Staff need to be aware of FGM practices and the need to look for signs and other indicators. There are 4 types:

* Partial/total removal of clitoris
* Partial/total removal of clitoris and labia minora
* Narrowing of vagina
* Procedures, including pricking, piercing, incising, cauterising and scraping the genital area.

# Modern day slavery

This covers slavery (including domestic slavery), human trafficking and forced labour.

Traffickers and slave masters use whatever they can to pressurise, deceive and force individuals into a life of abuse and inhumane treatment.

# Discriminatory

This includes types of harassment or insults because of someone’s race, gender or gender- identity, age, disability, sexual orientation or religion.

# Organisational

This includes neglect and poor care in an institution or care setting such as a hospital or care home, or if an organisation provides care in someone’s home. The abuse can be a one-off incident or repeated, on-going ill treatment. The abuse can be through neglect or poor professional practice, which might be because of structure, policies, processes and practices within an organisation.

# Neglect & acts of omission

This includes ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or education services, or not giving someone what they need to help them live, such as medication, enough nutrition and heating.

# Self-neglect

This covers a wide range of behaviour which shows that someone isn’t caring for their own personal hygiene, health or surroundings. It includes behaviour such as hoarding.

Abuse can take many forms. It might not fit comfortably into any of these categories, or it might fit into more than one. Abuse can be carried out by one adult at risk towards another. This is still abuse and should be dealt with. The adult at risk who abuses may also be neglecting him/herself which could also be reason for a safeguarding referral.

**Peer on Peer Abuse** (including sexual violence and sexual harassment)

19-25 staff recognise that vulnerable adults are also vulnerable to physical, sexual and emotional abuse by their peers. This is most likely to include, but not limited to: bullying (including cyber bullying), physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm; sexual violence and sexual harassment; and initiation/hazing type violence and rituals.

Such abuse is always taken seriously and the same safeguarding procedures apply in respect of any student who is suffering or likely to suffer significant harm. Staff are aware that they must never tolerate or dismiss concerns relating to peer on peer abuse and must not pass it off as ‘banter’ or ‘just having a laugh’.

 The DSL ensures that, through training, staff and Directors have an understanding of the range of peer on peer abuse, including sexual violence and sexual harassment, and are aware of how to recognise and manage such issues.

Staff are made aware that such incidents and/or behaviours can occur and be associated with factors outside of the setting. As such, staff, and particularly the DSL, know to consider the context in which such incidents and/or behaviours occur.

Where the abuse is physical, verbal, bullying or cyber-bullying, recording of such incidents will be applied in line with the Learn to Live 19-25 Safeguarding policy. All such incidents are recorded on CPOMS.

For victims of sexual abuse, Learn to Live staff are advised to follow advice given by Social Care and external agencies. [Home - Devon Safeguarding Adults Partnership](https://www.devonsafeguardingadultspartnership.org.uk/)

# Up skirting

The Voyeurism (Offences) Act, which is commonly known as the Up skirting Act, came into force on 12 April 2019. ‘Up skirting’ is where someone takes a picture under a person’s clothing (not necessarily a skirt) without their permission and or knowledge, with the intention of viewing their genitals or buttocks (with or without underwear) to obtain sexual gratification, or cause the victim humiliation, distress or alarm. It is a criminal offence. Anyone of any gender, can be a victim.

**Who might be an abuser?**

Adults at risk can be abused by a wide range of people – anyone, in fact, who has contact with them. This includes family members, professional staff, paid care workers, other adults at risk, volunteers, other service users, neighbours, friends and associates, people who deliberately take advantage of vulnerable people, strangers and people who see an opportunity to abuse.

# Spotting signs of financial abuse

* A change of living conditions
* Selling possessions
* Being unable to pay bills, or an unexplained lack of money. • Money being taken out of an account without a reason
* Financial documents being lost without a reason.
* Someone being cut off from family, friends or their social network.
* The carer having more money to spend on things like clothes, travel or accommodation.
* Sudden changes to a bank account or how someone uses it.
* New, recent authorised signers on a client or donor's account card.
* Money being taken without permission from the adult at risk’s ATM card.
* Changes in how the ATM card is being used (such as more frequently or from different locations).
* Sudden or unexpected changes to someone’s will or other financial documents.

# Other forms of abuse

There are some things which might increase the risk of someone being abused.

* Records of the client being abused before, or records of suspected abuse.
* Other members of the client’s family being abused.
* Family tensions and conflicts.

Factors which have been shown to increase the chance of abuse include:

* Organic brain injury (lower mental function due to illness)
* cognitive impairment (someone having trouble with memory, thinking skills or making decisions)
* physical, mental or emotional dysfunction, especially depression, recently losing a partner, not having friends or a social network, living alone, or not having contact with their children.

# Being aware of forced marriage

Forced marriage happens across all cultures. It’s when someone is pressured into an arranged marriage or forced to marry someone they haven’t freely chosen. It can also happen if someone lacks the mental capacity to make their own choices.

Signs of forced marriage might be:

* Someone having a brother or sister who has been forced to marry
* parents talking about marriage
* hearing talk of weddings or parties
* talk of family members coming to live with the family, or family trips overseas
* wedding photos, clothes, gifts, Mehdi henna
* unreasonable restrictions being placed on someone at home
* how much the person’s family deals with professionals who might help with organising a wedding or a visa, before a trip overseas.

# Honour based abuse and violence

Honour based abuse and violence includes: Forced marriage. Domestic **abuse** (physical, sexual, emotional or financial abuse) Sexual harassment and sexual **violence** (rape and sexual assault or threat of rape and sexual assault) Threats to **kill**.

# Roles and responsibilities

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| --- |
| **Key personnel** **The Designated safeguarding lead** (DSL) for adult protection Natalie Murphy Contact details: admin@learntolive19-25.co.uk 01392 482539 07922306142 **The Deputy designated safeguarding leads** are; Deputy manager – insert contact details Nikki Burroughs nikki.burroughs@learntolivefederation.co.uk David O’Loughlin doloughlin@learntolivefederation.co.uk  **The Board of Directors are** David O’Loughlin, Nicki Burroughs, Debbie Pritchard. Contact details: directors@learntolive19-25.co.uk  |

**The Designated Safeguarding Lead (DSL):**

* has the status and authority within Learn to Live 19-25 to carry out the duties of the post, including committing resources and supporting and directing other staff
* is appropriately trained, with regular updates
* acts as a source of support and expertise to the Learn to Live 19-25 community
* has a working knowledge of procedures
* makes staff aware of training courses and the latest policies on safeguarding
* keeps detailed written records of all concerns, ensuring that such records are stored securely and flagged on, but kept separate from, the client’s general file
* refers cases of suspected abuse to Care Direct or police as appropriate
* attends and/or contributes to conferences
* coordinates the 19-25’s contribution to safeguarding plans
* develops effective links with relevant statutory and voluntary agencies
* ensures that when a client leaves the 19-25 provision, their safeguarding file is passed to the new provision or support team (ensuring secure transit) and confirmation of receipt is obtained.
* ensures the safeguarding policy and procedures are reviewed and updated annually
* makes the safeguarding policy available publicly, on the website or by other means
* liaison with the Learn to Live Directors as appropriate.

**The deputy designated safeguarding leads:**

Trained to the same level as the DSL and, in the absence of the DSL, carries out those functions necessary to ensure the ongoing safety and protection of clients. In the event of the long-term absence of the DSL, the deputy will assume all of the functions above.

# Good practice guidelines and staff code of conduct

Good practice includes:

* treating all clients with respect
* setting a good example by conducting ourselves appropriately
* involving clients in decisions that affect them
* encouraging positive, respectful and safe behaviour among clients
* being a good listener
* being alert to changes in client’ behaviour and to signs of abuse, neglect and exploitation
* recognising that challenging behaviour may be an indicator of abuse
* reading and understanding the safeguarding policy, staff behaviour policy and guidance document on wider safeguarding issues
* being aware that the personal and family circumstances and lifestyles of some clients lead to an increased risk of abuse
* referring all concerns about client’s safety and welfare to the DSL, or, if they are in immediate danger contact the police on 999. Otherwise contact Care Direct on 0345

155 1007 or email: csc.caredirect@devon.gov.uk

# Abuse of position of trust

All Learn to Live 19-25 staff are aware that inappropriate behaviour towards clients is unacceptable and that their conduct towards clients must be beyond reproach.

The Learn to Live 19-25 ‘Employee Handbook’ sets out our expectations of staff.

# Best Interests guidance

Every adult has the right to make their own decisions if they have the capacity to do so. We must assure that a person has the capacity to make decisions unless it can be established that the person does not.

# Statutory Principles

These aim to:

* protect people who lack capacity, and,
* help them take part as much as possible, in decisions that affect them;

**Principle One:** A person must be assumed to have capacity unless it is established that they lack capacity.

**Principle Two:** A person is not to be treated as unable to make a decision unless all practicable steps to help them to do so, have been taken without success.

**Principle Three:**

A person is not to be treated as unable to make a decision merely because they make an unwise decision.

**Principle Four**:

An act done or decision made, under this Act, for or on behalf of a person who lacks capacity must be done, or made on their best interests.

**Principle Five:**

Before the act is done, or the decision is made, regard must be had to whether the purpose for which it is needed can be as effectively achieved in a way that is less restrictive of the person’s rights and freedom of action.

# Consent & Capacity

‘a person lacks capacity in relation to a matter if at the material time he is unable to make a decision for him/herself in relation to the matter because of an impairment of, or a disturbance in the functioning of, the mind or brain’

**Step 1 –** Diagnostic test – looking for evidence. Could include;

* learning disability
* mental illness, including dementia
* brain injury, including stroke damage
* neurological damage
* intoxication – drug/alcohol use
* temporary confusional state – illness, pain etc.

 **Step 2 –** Decision – specific – can the person make this decision at this time;

* can the person understand the information relevant to decision
* retain information in their mind
* weigh that information as part of the decision making progress
* communicate their decision

**Who should assess capability?**

The person who assesses an individual’s capacity to make a decision will usually be the person who is directly concerned with the individual at the time the decision needs to be made. This means different people will be involved in assessing someone’s capacity to make different decisions at different times.

If somebody challenges an assessment, we must be able to describe the steps we have taken and have clear objective reasons for believing the person who lacks capacity to make the decision in question.

Assessments of capacity to take day to day decisions or consent to care, require no formal assessment procedures or recorded documentation. However, it is good practice for support/care workers to keep a record of the steps they take when caring for the person concerned.

\*An assessment of a person’s capacity to consent or agree to the provision of services will be part of the care planning processes for health and social care needs, and should be recorded in the relevant documentation. This includes ‘Person Centred Planning for people with Learning Disabilities’.

**PROCEDURE FOR SAFEGUARDING ADULTS AGED 18+**

If you see, hear or suspect that an adult may be at risk of abuse or neglect, you must tell someone about it. If they are in immediate danger, contact the police on 999.

To be reviewed Annually. Last reviewed April 2023.

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**Refer to DSL if concern is about a vulnerable adult**

**via CPOMs.**

**Refer to Directors if the concern is about a**

**member of staff.**

**If concerns are about staff or Directors**

 **refer**

**to LADO before taking any further**

**action.**

**Directors to note any action against concerns raised.**

**DSL to follow up**

**.**

**DSL may call**

**IAAT Team for**

**further advice**

**.**

**DSL may**

**contact Adult**

**Social services**

**to inform them**

**of concerns**

**raised.**

**DSL**

**may consider the need to**

**complete Safeguarding Adult**

**referral via Care Direct or phone**

**Devon County Council direct.**

**Care Direct team**

**decide Referral**

**meets threshold**

**.**

**S42**

**Enquiry**

**.**

**Care D**

**irect team**

**decide Referral does**

**not meets**

**threshold**

**.**

**Back to Adult**

**Social Care**

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Next review due April 2024.