



Older People Active Lives

# Safeguarding Adults Policy and Procedures



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<b>Document control table</b>	
Document title	Adult Safeguarding Policy and Procedures
Version	April 2024
Responsible committee	HR Committee
Author	HR Committee
Date effective from	1st April 2024
Date last amended/reviewed	24 <sup>th</sup> September 2025
Review date	August 2027 (or immediately upon change of legislation)
Who this document applies to:	Staff, trustees and volunteers

## **1 Policy Statement**

OPAL will attempt at all times to provide a safe and welcoming environment for members, volunteers and staff in which they can feel able to express and share concerns about abuse and or a fear of harm, or the potential for abuse or harm, and in which they can expect to have such concerns heard and taken seriously.

(Note that it is the responsibility of Adult Social Care, part of Cheshire West and Chester Borough Council, to co-ordinate a response to Adult Abuse allegations.)

## **2 Local Authority Safeguarding Response**

- It is the legal responsibility of OPAL to recognise, report and record safeguarding concerns. Once a safeguarding concern has been raised to the Local Authority, they are responsible for deciding if an enquiry is necessary and they will co-ordinate the response.
- OPAL may be asked to carry out or assist with enquiries, for example where it relates directly to a person using the service or an employee or volunteer. The person appointed to work with the local authority must have the requisite skills, knowledge and experience to carry out the tasks required. If the organisation is asked to undertake an enquiry, advice and guidance must be sought from the Local Authority worker involved with reference also to the appropriate Line Manager/ trustee.
- OPAL may also be invited to:
  - attend a safeguarding adults meeting
  - submit a written report
  - attend or supply information to a Safeguarding Adults Review
- Once a local authority takes on the safeguarding concern, it becomes their responsibility to manage. Our role will be to implement any action they require of us. However, if the local authority does not deem the concern to meet their safeguarding thresholds, it is our responsibility to monitor the situation and report any continuing or new concerns.

## **3 Introduction**

This policy and the procedure flowing from it will enable OPAL to demonstrate its commitment to keeping safe the adults at risk with whom it works. Whilst all adults are potential victims of crime or abuse, not all are vulnerable. The majority are capable of protecting themselves and only a proportion will be in need of protective intervention.

In the context of the legislation, specific adult safeguarding duties apply to any adult who in England:

- Has care and support needs, and
- Is experiencing, or is at risk of, abuse or neglect, and
- Is unable to protect themselves from either the risk of, or the experience of abuse or neglect, because of those needs.

Abuse can happen anywhere: in a person's home, in the street, in a residential or nursing home, in a day centre, a hospital or any place where vulnerable people might be. Sometimes abuse is intentional, but sometimes it is unintentional where someone thinks they are helping but are doing so in the wrong way.

#### 4 Definitions

To assist working through and understanding this policy and its procedures, a number of key definitions need to be explained:

- **Adult at Risk** as defined by the Care Act is “a person aged 18 or over who is in need of care and support regardless of whether they are receiving them, and because of those needs are unable to protect themselves against abuse or neglect”. In recent years there has been a marked shift away from using the term ‘vulnerable’ to describe adults potentially at risk from harm or abuse.
- **Abuse:** The Care Act states the following regarding abuse: “Local authorities should not limit their view of what constitutes abuse or neglect, as they can take many forms and the circumstances of the individual case should always be considered”. The Society will apply this statement when considering abuse. (See appendix A for types of abuse across England)
- **Adult** is anyone aged 18 or over.
- **Adult safeguarding** is protecting a person's right to live in safety, free from abuse and neglect.
- **Support or care provider** is someone who provides care for a person with care and support needs. If a carer is being abused or harmed, intentionally or unintentionally, by the adult they care for then a safeguarding response is required.
- **Section 42: Duty to Enquire** is initiated by local authorities in England when professionals have assessed a case as meeting the threshold to conduct a safeguarding intervention.

## **5 National Legislation and Guidance**

The statutory framework for adult safeguarding in England is set out in the Care Act 2014 and related statutory guidance and regulations. The Care and support statutory guidance states that 'all workers need to be vigilant about adult safeguarding concerns'. All safeguarding practice will be underpinned by the six safeguarding principles:

*Empowerment* - people being supported and encouraged to make their own decisions and give informed consent for raising safeguarding concerns.

*Prevention*- it is better 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.

*Partnership* - local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.

*Accountability* - accountability and transparency in safeguarding practice.

The practices and procedures within this policy are based on the principles contained within UK legislation and guidance and take the following into consideration:

- The Care Act 2014
- Social Services and Wellbeing (Wales) Act 2014
- Mental Capacity Act 2005
- The Protection of Freedoms Act 2012
- Domestic Violence, Crime and Victims (Amendment) Act 2012
- The Equality Act 2010
- The Safeguarding Vulnerable Groups Act 2006
- Sexual Offences Act 2003
- The Human Rights Act 1998
- The Data Protection Act 1994 and 1998
- Adult Safeguarding: Prevention and Protection

The Types of Abuse are outlined in Appendix A

## **6 Responsibilities of OPAL**

1. OPAL acknowledges its duty to act appropriately in response to any allegations; reports or suspicions of abuse and to pass relevant information onto Adult Social Care (see Section 7 Procedures).

2. OPAL will ensure that the OPAL Policy and Procedure regarding Safeguarding is available to all trustees, volunteers, staff, people who receive OPAL Services, and carers/ families.
3. OPAL will ensure that staff, volunteers, trustees and Club Committee members are provided with up to date information and training opportunities.
4. Staff and volunteer recruitment will include DBS checking, in line with guidance from our advisors, and the taking up of references.
5. OPAL will undertake to update its Safeguarding Policy and procedure at least annually taking account of any changes Adult Social Care Services have advised or introduced.
6. Should an allegation of abuse be made against an OPAL member of staff, volunteer or trustee, then the OPAL Board will consider the need to ask that they no longer be directly involved until the outcome of any investigation is known.
7. In the event of a disclosure or the suspicion of abuse OPAL will do all possible to respect the confidentiality of all parties including the individual member, the family and the person the allegation is made against.
8. Where possible the permission of the individual person receiving the OPAL Service will be obtained prior to making a referral concerning suspected abuse, but where this is not possible a referral will still need to be made.
9. The individual person will be supported in such a way through the process so that their right to independence and decision making is upheld even though this may involve the bearing of a degree of risk.

## **7 Procedures**

Frequently the first sign or report of abuse is made to a volunteer, member of staff or a Trustee and it is the responsibility of that person who first sees, hears, is told about, or suspects abuse to ensure that it is reported in a timely and effective way to the Advice and Contact Team (ACT) within Adult Social Care.

## **8 Steps to be taken – also see Appendices B, C and D**

1. Make sure the person who is the subject of any allegation is safe and not in need of urgent medical treatment.
2. Inform the Organiser, or if not contactable the Key Volunteer, OPAL Manager or a trustee. If the allegation is against either of these personnel, inform one of the other Organisers or any trustee.
3. If there is evidence of a criminal act e.g. a physical assault, theft, neglect or a sexual assault, the Police will need to be contacted, any evidence preserved, and a

note taken of anything said at the time (such a note should include the date and time and be signed by the person making the note).

4. The Organiser/ Key Volunteer will firstly ensure all immediate needs have been dealt with.
5. The Organiser/ Key Volunteer will obtain an understanding of the facts from the person reporting the matter but must not try to discuss the allegation with the alleged perpetrator.
6. The Organiser/ Key Volunteer will ensure that the individual does meet the definition of an adult at risk. This is something that could be identified at the point of acceptance into the service when the assessment is being undertaken. It should be remembered though that people`s circumstances and presenting needs change over time so it will be necessary to build this in also to any individual reviews being undertaken.
7. The Organiser / Key Volunteer will be informed by the policy document when considering referral of a concern or incident to ACT. However, the clear advice is to refer the concern or incident to ACT if in any doubt in order that they can assess the situation and make a judgement themselves.
8. The Organiser is responsible for recording details of each referral to ACT using the Adult Safeguarding Report Form (available on OPAL Company Library).
9. Serious incidents must be reported to the Charity Commission via the Company Secretary, and to OPAL`s contract funders, e.g. Cheshire Community Action / Cheshire & Warrington Carers Trust
10. If any member of staff, volunteer or trustee believes that a safeguarding concern has not been responded to appropriately, or the concern involves a senior member of the organisation, they must escalate directly to the OPAL Manager, Safeguarding Lead, a Trustee, or directly to the Local Authority or Police. OPAL`s Whistleblowing Policy applies in such circumstances.

#### **Advice and Contact Team (ACT) contact details**

Office hours: Monday to Thursday 8.30 to 5.00 Friday 8.30 to 4.30.

Telephone number 0300 123 7034

Email [accesswest@cheshirewestandchester.gov.uk](mailto:accesswest@cheshirewestandchester.gov.uk)

Out of office hours: 01244 977277

You can also complete an online form at this link -

<https://www.livewell.cheshirewestandchester.gov.uk/Services/809/Adult-Social-Care-C>

## 9 PREVENT

All trustees, staff and volunteers should be made aware of PREVENT - a governmental initiative that aims to work with at risk individuals who may be at risk of being exploited by radical groups and subsequently drawn into terror related activity.

Changes that may arouse concern may include:

- Reports of unusual changes in behaviour, friendships or actions and requests for assistance
- Indication of vulnerable person being insistently befriended by individuals or groups with radical views
- Evidence of individuals accessing extremist material online
- Use of extremist or hate terms to exclude others or incite violence; writing or artwork promoting violent extremist messages or images

Any person who is concerned that an individual is at risk of radicalisation or may have become radicalised must contact the Safeguarding Adults Team to raise their concerns and together discuss how reliable or significant these changes are. PREVENT is a statutory duty and all public bodies have a duty to comply.

## 10. Information Sharing

OPAL recognises that information sharing is essential to safeguarding adults at risk. Information will be shared in line with the Care Act 2014, the Data Protection Act 2018 and UK GDPR. Concerns may be shared without consent where:

- the adult lacks capacity,
- a crime may have been committed,
- others may be at risk,
- or where gaining consent would increase the risk of harm.

All decisions to share, with or without consent, must be recorded along with the rationale.

Where an adult appears to have difficulty making decisions, staff must consider the principles of the Mental Capacity Act 2005. If the adult lacks capacity to consent to a safeguarding referral, OPAL will act in their best interests. Decisions must be time-specific, documented, and involve relevant others.

## 11. Record Keeping

Safeguarding records will be stored securely, separately from general records, in restricted-access digital folders. Records will be kept for a minimum of **7 years** (or longer if required by contract or statutory guidance). All entries must be factual, contemporaneous, signed and dated.

## APPENDIX A

Types of Abuse (England and Wales) Source: Adult Safeguarding: Types and Indicators of Abuse (Social Care Institute of Excellence):

<b>Type of Abuse</b>	<b>Examples</b>
1 Physical Abuse	<ul style="list-style-type: none"><li>• Assault, hitting, slapping, punching, kicking, hair-pulling, biting, pushing</li><li>• Rough handling</li><li>• Scalding and burning</li><li>• Physical punishments</li><li>• Inappropriate or unlawful use of restraint</li><li>• Making someone purposefully uncomfortable (e.g. opening a window and removing blankets)</li><li>• Involuntary isolation or confinement</li><li>• Misuse of medication (e.g. over-sedation)</li><li>• Forcible feeding or withholding food</li><li>• Unauthorised restraint, restricting movement (e.g. tying someone to a chair)</li></ul>
2 Sexual Abuse	<ul style="list-style-type: none"><li>• Rape, attempted rape or sexual assault</li><li>• Inappropriate touch anywhere</li><li>• Non- consensual masturbation of either or both persons</li><li>• Non- consensual sexual penetration or attempted penetration of the vagina, anus or mouth</li><li>• Any sexual activity that the person lacks the capacity to consent to</li><li>• Inappropriate looking, sexual teasing or innuendo or sexual harassment</li><li>• Sexual photography or forced use of pornography or witnessing of sexual acts</li><li>• Indecent exposure</li></ul>
3 Psychological or Emotional Abuse	<ul style="list-style-type: none"><li>• Enforced social isolation – preventing someone accessing services, educational and social opportunities and seeing friends</li><li>• Removing mobility or communication aids or intentionally leaving someone unattended when they need assistance</li><li>• Preventing someone from meeting their religious and cultural needs</li><li>• Preventing the expression of choice and opinion</li><li>• Failure to respect privacy</li><li>• Preventing stimulation, meaningful occupation or activities</li><li>• Intimidation, coercion, harassment, use of threats, humiliation, bullying, swearing or verbal abuse</li><li>• Addressing a person in a patronising or infantilising way</li><li>• Threats of harm or abandonment</li><li>• Cyber bullying</li></ul>

#### 4 Financial Abuse

- Theft of money or possessions
- Fraud, scamming
- Preventing a person from accessing their own money, benefits or assets
- Employees taking a loan from a person using the service
- Undue pressure, duress, threat or undue influence put on the person in connection with loans, wills, property, inheritance or financial transactions
- Arranging less care than is needed to save money to maximise inheritance
- Denying assistance to manage/monitor financial affairs
- Denying assistance to access benefits
- Misuse of personal allowance in a care home
- Misuse of benefits or direct payments in a family home
- Someone moving into a person's home and living rent free without agreement or under duress
- False representation, using another person's bank account, cards or documents
- Exploitation of a person's money or assets, e.g. unauthorised use of a car
- Misuse of a power of attorney, deputy, appointeeship or other legal authority
- Rogue trading – e.g. unnecessary or overpriced property repairs and failure to carry out agreed repairs or poor workmanship

#### 5 Organisational or Institutional Abuse

- Discouraging visits or the involvement of relatives or friends
- Run-down or overcrowded establishment
- Authoritarian management or rigid regimes
- Lack of leadership and supervision
- Insufficient staff or high turnover resulting in poor quality care
- Abusive and disrespectful attitudes towards people using the service
- Inappropriate use of restraints
- Lack of respect for dignity and privacy
- Failure to manage residents with abusive behaviour
- Not providing adequate food and drink, or assistance with eating
- Not offering choice or promoting independence
- Misuse of medication
- Failure to provide care with dentures, spectacles or hearing aids
- Not taking account of individuals' cultural, religious or ethnic needs
- Failure to respond to abuse appropriately

- 6 Neglect and Acts of Omission

  - Interference with personal correspondence or communication
  - Failure to respond to complaints
  - Failure to provide or allow access to food, shelter, clothing, heating, stimulation and activity, personal or medical care
  - Providing care in a way that the person dislikes
  - Failure to administer medication as prescribed
  - Refusal of access to visitors
  - Not taking account of individuals' cultural, religious or ethnic needs
  - Not taking account of educational, social and recreational needs
  - Ignoring or isolating the person
  - Preventing the person from making their own decisions
  - Preventing access to glasses, hearing aids, dentures, etc.
  
- 7 Self-neglect

  - Failure to ensure privacy and dignity
  - Lack of self-care to an extent that it threatens personal health and safety
  - Neglecting to care for one's personal hygiene, health or surroundings
  - Inability to avoid self-harm
  - Failure to seek help or access services to meet health and social care needs
  - Inability or unwillingness to manage one's personal affairs
  
- 8 Domestic Violence and Abuse

Domestic violence and abuse includes any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been, intimate partners or family members regardless of gender or sexuality.

It also includes so called 'honour' -based violence, female genital mutilation and forced marriage. Coercive or controlling behaviour is a core part of domestic violence. Coercive behaviour can include:

acts of assault, threats, humiliation and intimidation; harming, punishing, or frightening the person; isolating the person from sources of support; exploitation of resources or money; preventing the person from escaping abuse; regulating everyday behaviour
  
- 9 Modern Slavery

  - Human trafficking
  - Forced labour
  - Domestic servitude
  - Sexual exploitation, such as escort work, prostitution and pornography
  - Debt bondage – being forced to work to pay off debts that realistically they never will be able to

10 Discriminatory  
abuse

- Unequal treatment based on age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex or sexual orientation (known as 'protected characteristics' under the Equality Act 2010)
- Verbal abuse, derogatory remarks or inappropriate use of language related to a protected characteristic
- Denying access to communication aids, not allowing access to an interpreter, signer or lip-reader
- Harassment or deliberate exclusion on the grounds of a protected characteristic
- Denying basic rights to healthcare, education, employment and criminal justice relating to a protected characteristic
- Substandard service provision relating to a protected characteristic

## **APPENDIX B**

### **IMMEDIATE ACTIONS TO BE TAKEN BY THE PERSON RAISING THE CONCERN**

The person who raises the concern has a responsibility to first and foremost safeguard the adult at risk.

- Make an evaluation of the risk and take steps to ensure that the adult is in no immediate danger;
- Arrange any medical treatment. (Note that offences of a sexual nature will require expert advice from the police);
- If a crime is in progress or life is at risk, dial the emergency services – 999;
- Encourage and support the adult to report the matter to the police if a crime is suspected and not an emergency situation;
- Take steps to preserve any physical evidence if a crime may have been committed, and preserve evidence through recording;
- Ensure that other people are not in danger;
- If you are a paid employee, inform your Line Manager, or another Trustee.
- Record the information received, risk evaluation and all actions.

## **APPENDIX C**

### **IMMEDIATE ACTIONS TO BE TAKEN BY THE TRUSTEE**

Review the actions already taken.

- Clarify that the adult at risk is safe, that their views have been clearly sought and recorded and that they are aware what action will be taken;
- Address any gaps;
- Check that issues of consent and mental capacity have been addressed
- In the event that a person's wishes are being overridden, check that this is appropriate and that the adult understands why;
- Ensure appropriate referrals have been made if a child or young person is also at risk;
- If the person allegedly causing the harm is also an adult at risk, arrange appropriate care and support;
- Make sure action is taken to safeguard other people;
- Take any action in line with disciplinary procedures, including whether it is appropriate to suspend staff or move them to alternative duties;
- In addition, if a criminal offence has occurred or may occur, contact the Police force where the crime has / may occur;
- Preserve what might be forensic evidence;
- Record the information received and all actions and decisions.

**APPENDIX D**  
**SOME USEFUL DO'S AND DON'TS**

**Do:**

- act on any concerns, suspicions or doubts
- try to ensure the immediate safety of the individual
- remain calm and listen very carefully
- summarise what you have heard back to the person for clarification
- assure the person that the matter will be taken seriously
- explain the process for reporting the allegation
- seek consent to report the concern or share information
- report the allegation to your manager
- contact children's services in the local authority if a child is, or may be, at risk
- arrange support for the alleged victim of abuse or neglect

**Don't:**

- show shock or disbelief
- rush the person
- be judgemental
- probe or question - just record the facts and seek clarification where necessary
- contaminate or disturb any evidence
- jump to conclusions
- promise confidentiality – explain how and why the information might need to be shared with those who need to know
- interview witnesses - but do record any information volunteered by them
- approach the alleged abuser