



Safeguarding Adults

Barnabas Safe and Sound adhere to the guidance set out in the North Tyneside and Northumberland Multi Agency Adult Safeguarding Policy. The 48 page document can be found here:

<https://www.northumberland.gov.uk/NorthumberlandCountyCouncil/media/Health-and-social-care/Care%20support%20for%20adults/safeguarding%20adults/Northumberland-and-North-Tyneside-Safeguarding-Adults-Information-Sharing-Agreement.pdf>

A summary of the above policy

Introduction

This multi-agency policy sets out the agreement signed up to by all partner agencies and organisations and is evidenced within the Terms of Reference/Constitution of the Safeguarding Adults Board (SAB). It demonstrates collaborative work in recognising and addressing the rights of people at risk of harm who require support to be protected from abuse and mistreatment. The Policy and accompanying procedures will continue to be subject to review and development in line with Government guidance.

To ensure a consistent approach individual internal safeguarding policies, procedures and practice across our partner agencies whether statutory, independent or voluntary, should integrate with this policy and associated procedures.

This Policy is developed in accordance with The Care Act 2014 The Act will, for the first time, set out a clear legal framework for how local authorities and other parts of the health and care system should protect adults at risk of abuse or neglect.

The SAB in both North Tyneside and Northumberland agree to adhere to the following Care Act principles which underpin all adult safeguarding work, therefore so will Barnabas Safe and Sound:



- Empowerment – People being supported and encouraged to make their own decisions and informed consent. *“I am asked what I want as the outcomes from the safeguarding process and these directly inform what happens.”*
- Prevention – It is better to take action before harm occurs. *“I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help.”*
- Proportionality – The least intrusive response appropriate to the risk presented. *“I am sure that the professionals will work in my interest, as I see them and they will only get involved as much as needed.”*
- Protection – Support and representation for those in greatest need. *“I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want.”*
- Partnership – Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse. *“I know that staff treat any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me.”*
- Accountability – Accountability and transparency in delivering safeguarding. *“I understand the role of everyone involved in my life and so do they.”*

The Policy

The Policy relates to all adults who require safeguarding and applies to all agencies in contact with them. Safeguarding means protecting an adult’s right to live in safety, free from abuse and neglect. It encompasses all activity which enables an adult to retain independence, well-being and choice, and is about preventing abuse and neglect, as well as promoting good practice for responding to concerns on a multi-agency basis. With the emphasis on supporting adults to access services of their own choice there is a duty to ensure protection for adults who do not have the mental capacity to protect themselves. We recognise that people have complex lives, and being safe is only one of the things that they may want for themselves. We believe that professionals should work with the adult at risk to establish what being safe means to them and how that can be best achieved. A balance of choice, positive risk taking and protection is the kind of personalised approach NTSAB and NSAB aim to achieve

Making Safeguarding Personal

Making Safeguarding Personal is a sector led initiative in response to findings from Peer Challenges, No Secrets consultation and other engagement and is led by the Local Government Association. North Tyneside and Northumberland SAB’s are committed to implementing a Making Safeguarding Personal Approach. This includes:

- Involving adults at risk and their families/carers in safeguarding in the outset of safeguarding activity



- Making sure adults at risk and their families/carers receive information which allows them to understand the process, so that they can make informed choices about the outcomes they would like to achieve
- Making sure adults at risk and their families/carers are supported to enable them to participate fully in discussions and meetings
- Ensuring that adults at risk are offered advocacy services as appropriate to their needs.
- Working at all times in accordance the Mental Capacity Act 2005 and Mental Capacity Act Code of Practice.
- Seeking the consent of the adult at risk unless he or she lacks capacity about the safeguarding interventions; there is a wider public interest or a concern that a crime has been or maybe committed. In these circumstances there is an overriding duty of care to them or to others in particular children and consent can be overridden.

Types of Abuse

- Physical abuse – including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.
- Domestic violence – including psychological, physical, sexual, financial, emotional abuse; so called ‘honour’ based violence.
- 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.
- 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.



- Self Neglect – This was added as a new category of abuse in the Care Act 2014, the definition of which is as follows: “this covers a wide range of behaviour neglecting care for ones personal hygiene, health or surroundings and includes such behaviour such as hoarding”. See guidance produced by North of Tyne January 2016. It will be Barnabas Safe and Sounds policy to follow this if an incident occurs, or to prevent an incident from getting worse.

Additional information - Domestic Abuse

Many people think that domestic abuse is about intimate partners, but it is clear that other family members are included and that much safeguarding work that occurs at home is, in fact is concerned with domestic abuse. This confirms that domestic abuse approaches and legislation can be considered safeguarding responses in appropriate cases

The strategic framework for the domestic abuse plan in North Tyneside is provided by the Local Safeguarding Children Board plan, the Safeguarding Adults plan and the North Tyneside Safer Partnership strategy.

From April 2013 the definition of domestic abuse was revised to: “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. This can encompass, but is not limited to, the following types of abuse:

- psychological
- physical
- sexual
- financial
- emotional

“Controlling behaviour is: a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour. “Coercive behaviour is: an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.” This definition, which is not a legal definition, includes so called ‘honour’ based violence, female genital mutilation (FGM) and forced marriage, and is clear that victims are not confined to one gender or ethnic group.

Domestic Abuse is rarely a one-off incident and should be seen as a pattern of harmful & controlling behaviour through which the abuser seeks power and control over the victim. Domestic abuse occurs across society regardless of age, gender, race, sexuality, wealth and geography. It is predominately committed by men against women, but men can be abused by women and domestic violence can occur in same sex relationships. Children are affected both directly and indirectly. There is also a strong correlation between domestic abuse and child abuse.

As abuse can occur with any member of the family, robust protection and prevention arrangements are necessary for both interfamilial and intimate or ex- partner relationships.



While the adult at risk must retain choice and control; effective multi-agency safeguarding arrangements can only be achieved when agencies share information and undertake safe risk assessments. This could involve sharing information without consent.

The abusive partner should never be informed of any disclosures.

High risk victims are identified using the CAADA DASH risk indicator check list CAADA = Coordinate action against domestic Abuse DASH = Domestic Abuse, Stalking and Harassment and Honour based violence

- For more information in Northumberland see:
<http://www.northumberland.gov.uk/default.aspx?page=7397>
- To gain more information of the risk assessment follow this link:
http://www.caada.org.uk/marac/RIC_with_guidance.pdf

Contact information:

Police emergency: 999 all other times 101

Services in Northumberland can be found at
<http://www.northumberland.gov.uk/default.aspx?page=3086>

Key Northumberland Contacts include:

Victim Support 0191 2960148

Cease24 Domestic Abuse Project 01665 606881

WHAC (Women's Health Advice Centre) 01670 853977

Sixtyeightythree (Hexham) 01434 608030

Further details can be found at: <http://www.enough.me.uk/>

Recognising and Reporting Abuse and Neglect

Workers across a wide range of organisations need to be vigilant about adult safeguarding concerns in all walks of life including, amongst others in health and social care, welfare, policing, banking, fire and rescue services and trading standards; leisure services, faith groups, and housing. GPs, in particular, are often well-placed to notice changes in an adult that may indicate they are being abused or neglected. Findings from Serious Case Reviews have sometimes stated that if professionals or other staff had acted upon their concerns or sought more information, then death or serious harm might have been prevented.

We recognise that anyone can witness or become aware of information suggesting that abuse and neglect is occurring. The matter may, for example, be raised by a worried neighbour, a concerned bank cashier, a GP, a welfare benefits officer, a housing support worker or a nurse on a ward. Primary care staff may be particularly well-placed to spot abuse and neglect, as in many cases they may be the only professionals with whom the adult has contact. The adult may say or do things that hint that all is not well. It may come in the form of a complaint, a call for a police response, an expression of concern, or come to light during a needs assessment. Regardless of how the safeguarding concern is identified,



our aim is to ensure that everyone should understand what to do, and where to go locally to get help and advice.

This should include

- knowing about different types of abuse and neglect and their signs;
- supporting adults to keep safe;
- knowing who to tell about suspected abuse or neglect; and
- supporting adults to think and weigh up the risks and benefits of different options when exercising choice and control.

Our SAB's recognise the importance of awareness campaigns for the general public and multi-agency training for all staff will contribute to achieving these objectives.

Reporting and Responding To Abuse and Neglect

We recognise that it is important to understand the circumstances of abuse, including the wider context such as whether others may be at risk of abuse, whether there is any emerging pattern of abuse, whether others have witnessed abuse and the role of family members and paid staff or professionals. The circumstances surrounding any actual or suspected case of abuse or neglect will inform the response.

Achieving Best Evidence

The SAB and Barnabas Safe and Sound would expect that a worker who first becomes aware of concerns of abuse or neglect would ensure that:

- They do not show signs of shock or disbelief and should present as calm and in control.
- Emergency assistance is immediately sought, where required e.g. G. P, ambulance or Police are contacted where a crime has or may have been committed and with the consent of the victim unless: i) They lack capacity to give informed consent ii) It is a matter of public safety that overrides the need for consent iii) A third party who has witnessed the possible abuse is prepared to either contact the police or give permission for police to be contacted on his / her behalf.
- In either of the above incidences, forensic and other evidence is not contaminated.
- If possible without putting themselves at risk, attempt to separate the alleged perpetrator and victim

This means:

- Not touching anything that could provide evidence that a crime has been committed
- Where there is an allegation or signs of a physical or sexual attack, try not to allow vulnerable adult to wash, bathe, eat or drink until option of medical examination is given, but you may not be able to prevent this therefore try for MINIMUM intervention.
- Not allow anybody else to enter the area or touch anything
- Close off the area if at all possible until the police arrive



- Where possible remove all other people from scene
- If possible, keep the victim involved in what is happening and what actions are being taken.
- Not confront the alleged abuser (If they are also a vulnerable adult do make sure a member of staff ensures their safety).
- Listen carefully without asking probing questions. Encouraging open questions are:
T = Tell me about that?
E = Can you Explain that to me?
D = Describe it?
- Write down all information using, in as much as possible, the vulnerable adult's own words. (Signed and dated)
- Recording should include information on gestures and body language displayed by the vulnerable adult.
- Confirm that the issue will be taken seriously.
- Confirm what steps will be taken.
- Ensure that the vulnerable adult knows that they will be given feedback and by whom.
- Ensure that the vulnerable adult has contact details to use if they wish to report any further issues or to ask any questions that may arise.

N.B. any records may be used within future legal proceedings therefore it is imperative to state facts only. Where opinion is being given it should be recorded clearly that this is opinion rather than fact.

It is the vulnerable adult's right to gain assistance where and when they are being abused. Therefore staff should be trained in how to summon assistance from police or medical services and under what circumstances this should happen.

Responsibilities of Barnabas Safe and Sound

We must:

- Report concerns or suspicions of risk of abuse in a timely way
- Give high priority to any actions required to ensure the safety of adults who may be at risk.
- Prioritise the dignity, safety and well-being of the individual in any safeguarding action they take.
- Recognise the rights of any person alleged to have abused or neglected an adult at risk. If that person is also an adult at risk they must receive support and their needs must be addressed.
- Ensure all staff understands their role and responsibilities in regard to this policy.



- Make every effort to ensure that adults at risk are afforded appropriate protection under the law.
- Have our own internal operational procedures to complement this policy. Please see:
 - Whistleblowing policy
 - Recording sheet
 - Complaints procedure
- Ensure support to staff raising concerns by whistle-blowing and comply with the Public Interest Disclosure Act 1998.
- Ensure that staff and volunteers have access to training appropriate to responsibility and receive clinical and/or management supervision, to afford the opportunity to reflect on practice and the impact of their actions on others.

Information Sharing

Sharing information is the most important part of protecting people at risk of harm from abuse.

There is a joint Northumberland and North Tyneside Multi Agency Information Sharing Policy to facilitate the effective sharing of information between agencies (adults & children based) working with families.

The Safeguarding Adults Board hold confidentiality as key to assist partnership working, avoiding barriers to reach a consensus and accepting principles to underpin working together. To ensure clear information sharing all partners are committed to the simple process of sharing relative information and follow the “Golden Rules” taken from the HM Government Information Sharing guidance package (2008).

Seven golden rules for information sharing

1. Remember that the Data Protection Act is not a barrier to sharing information but provides a framework to ensure that personal information about living persons is shared appropriately.
2. Be open and honest with the person (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
3. Seek advice if you are in any doubt, without disclosing the identity of the person where possible.
4. Share with consent where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information. You should go ahead and share information without consent if, in your judgement, that lack of consent can be overridden in the public interest, or where a child is at risk of significant harm. You will need to base your judgement on the facts of the case.
5. Consider safety and well-being: Base your information sharing decisions on considerations of the safety and well-being of the person and others who may be affected by their actions.



6. Necessary, proportionate, relevant, accurate, timely and secure: Ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those people who need to have it, is accurate and up to date, is shared in a timely fashion, and is shared securely.

7. Keep a record of your decision and the reasons for it - whether it is share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.

(Extract from HM Government) www.ecm.gov.uk/informationsharing



Policy Reviewed 01/04/2021
By Hayley Brown