

Kingston Churches Housing Association

The Caring Professionals

SAFEGUARDING VULNERABLE ADULTS AND CHILDREN FROM ABUSE POLICY AND PROCEDURE

INTRODUCTION

This document sets out our detailed policy and procedure on responding to safeguarding of vulnerable adults and children from abuse or neglect. It provides a structured detailed response strategy for action by sheltered and housing staff.

Kingston Churches Housing Association will not tolerate any form of abuse towards any vulnerable individual. We are committed to provide a safe place for every tenant and their children to live. We believe that vulnerable adults and children should never experience abuse of any kind. We have a responsibility to promote the welfare of everyone who lives in our properties, to keep them safe and to practice in a way that protect them.

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1. AIM

The aim of this policy and procedure is to:

1. Set the values, principles, and policies of all work to safeguard vulnerable adults and children from abuse
2. Defines our procedure to be followed if abuse is suspected
3. Defines the different types and signs of abuse to safeguard vulnerable adults and children and indicate the possible causes
4. How to tackle the abuse to safeguard vulnerable tenants and their children within legal framework to safeguard them
5. Prevent harm and reduce the risk of abuse and neglect
6. Raise awareness so communities can play a role alongside professionals
7. Everyone has the right to live in a safe environment free from abuse and neglect.
8. We provide accessible information, advice, on how to raise a concern and support the vulnerable person.

2. POLICY STATEMENT

- 2.1 The purpose of this policy statement is to protect vulnerable adults and children who receive Kingston Churches Housing Association services from harm.

We will ensure all staff and contractors who visit tenants in their own home are:

- Aware of identifying and how to report any safeguarding concerns
- Can identify the types of abuse to vulnerable adults and children
- Aware of where abuse can occur and who the perpetrators of abuse are
- Can report concerns internally
- Aware of the Whistleblowing Policy and Procedure

Additionally, Sheltered and Housing staff are required to be aware of the six principles of safeguarding as detailed in the Care Act 2014.

- 2.2 All staff should establish the existence of abuse and contact an abuse officers employed by the social services and the police in the local area and attend multi-agency training opportunities.
- 2.3 We are committed to safeguard vulnerable adults and children by following the Care Act 2014 and will work with social care to prevent any abuse. We have a key role to safeguard everyone along with social care, health, and the police. We are well placed to ensure all staff understand their individual responsibility to tenants and must act accordingly.
- 2.4 The Care Act 2014 gives local authorities the power to carry out an assessment of anyone who appears to require care and support, regardless of their likely eligibility for state funded care. Focusing on the person's needs and how this impacts their wellbeing, and the outcomes they want to achieve

Vulnerable adults and children with care and support needs are most at risk of harm, abuse, and neglect. These include:

- Those with learning disabilities
- Those with mental health problems
- The Older Person
- Those with physical disabilities
- Those who have visual and sensory impairment
- Those who rely on others for care and support

- 2.5 Abuse is any behaviour that deliberately or unknowingly causes a person harm or endangers their life and has violated a persons' human rights by another person. It may consist of a single or repeated act, or lack of appropriate action, occurring in a relationship, where there is an expectation of trust, and which causes harm or distress to a person.

3. DEFINITION OF TYPES OF ABUSE

There are many different types of abuse and neglect and they vary in every circumstance to which abuse, and neglect can take place.

They can include:

Sexual
Physical
Financial or Material
Organisational abuse
Discriminatory abuse
Domestic violence
Modern slavery
Psychological abuse
Self-neglect

Acts of omission of neglect

4. THE DEFINITION OF SAFEGUARDING

- 4.1 Safeguarding means to protect a vulnerable adult right to live in safety, free from abuse and neglect and for a child is to promote their welfare, protecting them from abuse to prevent impairment of their health and development to ensure they grow up in circumstances of safe and effective care.
- 4.2 Significant harm is that a person is ill-treated, for example people with impaired hearing or sight.

5. PRINCIPLES OF SAFEGUARDING VULNERABLE PEOPLE FROM ABUSE

The principles to safeguard vulnerable adults and children from abuse are:

5.1 Empowerment

The principles to safeguard vulnerable adults and children from abuse are:

To protect tenants and their children we must make them aware of how to recognise and report abuse to staff, police, or social services.

We offer support to enable them to make their own decisions on the care and treatment they receive.

Complying with the Mental Health Act 2007 which ensures any decision made on behalf of a vulnerable person has been assessed as lacking capacity (to make that decision) is made in their best interest.

This act gives health professionals the powers in certain circumstances to detain and access and treat people with mental disorders in their interest of health or for public safety.

We provide services encouraging choice and control for tenants whilst ensuring their safety. We encourage tenants to remain active and independent within the community.

We give tenants and their relative the information on what they can expect from the association and how to complain.

By empowering tenants and supporting them we encourage tenants to make their own decisions.

5.2 [Prevention](#)

It is better to act before any harm occurs.

Educating vulnerable people to recognise abuse and understand they can say no, this will enable them to protect themselves from abuse.

All tenants and staff looking out for each other can help to prevent abuse occurring.

Staff to communicate with tenants regularly to gain their trust and this helps us to assess if any adult or child are at risk.

We encourage sheltered tenants to attend day centre and all tenants to participate in Kingston Churches tenant engagement activities, making them feel part of a community and make new friends.

5.3 [Proportionality](#)

Ensure services take each person into account when dealing with abuse. To respect each individual and assess any risks presented. Working in partnerships with local communities can create solutions to assist in preventing and detecting abuse.

Learn and understand good safeguarding practices among all partners.

Follow multi-agency procedures and respond to alerts based on good decision making. To be clear what should be treated as a complaint or safeguarding alert.

Monitor internal investigations with care and data from investigation is utilised to improve safeguarding responses.

To proportionate the least intrusive response appropriate to the risk.

5.4 [Protection](#)

Work with multi-agency partners to promote good safeguarding practice; and protect tenants who may lack capacity to make decisions and raise concerns to protect them.

Understand the circumstances including tenants' wishes, feelings and values, and consider views from others who know them.

Support those in greatest need.

5.5 [Accountability](#)

Being accountable and transparent in the way you deliver safeguarding.

Staff to be trained and competent to understand safeguarding vulnerable adults and children procedures, and to know what action to take in the event of a safeguarding alert.

Staff must understand their responsibility to raise concerns about poor practice, abuse, coercive behaviour, neglect, or harm.

5.6 Partnership

The use of local solutions and services working with communities, housing providers have a key role to play in preventing, detecting, and reporting abuse and neglect.

Increased awareness will reduce the risk to those vulnerable to abuse. The Human Rights Act 2000 places a duty on public agencies to intervene proportionately to protect the rights of citizens.

6. **HOW WE WORK TO PREVENT HARM AND ABUSE**

- 6.1 We work with other organisations to prevent and risk and harm to safeguard vulnerable adults and children from abuse. Scheme Managers in sheltered housing, and any other staff who suspects abuse is occurring within a Kingston Churches property, will respect our resident's views and wishes. We will work with our residents to establish abuse and how to keep them safe.

Vulnerable Adults and children have the right to live in safety and free from harm. We will promote awareness of adult and child safeguarding to ensure we take a proactive approach. We will implement our policy and procedures if we notice a concern.

If there is an immediate risk to a child or vulnerable adult, you must immediately contact the police.

6.2 Freedom from abuse

We take abuse extremely seriously and this document is based on our belief that every vulnerable adult and children residing in a Kingston Churches property has the right to live free from abuse.

6.3 Types of abuse

There are 10 types of abuse of vulnerable adults: physical, psychological/emotional, sexual, financial/material, neglect, domestic abuse/coercive control, modern slavery, discriminatory, organisational, and self-neglect.

6.4 Collaboration with other agencies

We have a duty of care to spot early signs of abuse or neglect to keep adults and their children safe from harm. Protecting vulnerable people from abuse is a complex process. We identify when someone is with care and support needs, they are at risk of abuse. Staff will carry out an assessment and action on abuse must always be in co-operation and collaboration with other agencies, including the social services, doctors, and the police.

We will work in partnership to co-ordinate responses. We work with line managers and other agencies, and with our tenants and multi-agencies to our set guidelines for recognising and intervention in cases of suspected and established abuse.

6.5 Confidentiality

Staff must respect confidentiality and not divulge any information given in confidence unless justified by a risk assessment to vulnerable adults and children and comply with the GDPR (General Data Protection Regulation) by conducting regular risk assessments.

6.6 Risk and Protection

We acknowledge individuals' right to live independently sometimes involves a degree of risk. When a tenant chooses to accept this risk, their wishes should be respected within the context of their capacity to anticipate and understand the risk. We work with other agencies to safeguard vulnerable people to protect them from harm and exploitation making constructive use of the law.

We provide support for all tenants and their family unit who may be at risk of abuse and neglect. Abuse can happen anywhere, including their home.

Adults and children become at risk do so for a variety of reasons. These may include: dementia, learning disabilities and/or autism, physical or sensory impairments, mental health need, misuse of substances/alcohol, long term illness or condition, frailty to older age and the inability to make day to day decisions and is in need of extra care and support.

We recognise safeguarding is a multi-agency approach which depends upon effective joint working. We acknowledge that the lead responsibility of social services in co-ordinating safeguarding work, and our own role in alerting the appropriate services and the policy of any concerns regarding safety. Any suspected crime will be referred to the police.

6.7 Equal Opportunities

In this policy and procedure, the Equality Act 2010 legally protects the individual from discrimination of people with ethnic origins, disabilities -

mental and physical - gender, sexuality, age, religious and cultural backgrounds.

6.8 Privacy, dignity, independence, and choice

We will respect vulnerable adults and children with regards to privacy, dignity, independence, and choice of the vulnerable person for reasons of age illness, disability, or social circumstances.

6.9 Recording

Staff must ensure that their recording of facts, incidents, risk assessments, referrals, and case discussions are all sufficient, accurate, concise, up-to-date, legible, dated, and factual evidence. Personal opinions should be kept to a minimum and backed up by factual evidence.

Records must be stored in a tenants file and stored securely in a manner that safeguards the tenants right to privacy and security. These records are available to individuals on request (not third-party information) and may be used as evidence in civil or criminal prosecutions or in disciplinary proceedings.

6.10 Staff Support

As a manager if you are unsure on how to approach an abuse of vulnerable adults related issue you must take further confidential advice from your line manager.

Staff should be given support and encouraged to share information and work with social care to be able to offer support.

We are a vital component of local multi-agency safeguarding partnerships, social care staff should promote partnership working with housing staff.

6.11 Training

Kingston Churches Housing Association will provide the appropriate training on abuse and safeguarding vulnerable adults from abuse to staff associated with vulnerable adults.

6.12 Whistleblowing

Kingston Churches Housing Association has a whistleblowing policy and staff should refer to this policy to take action where they have suspicions abuse is occurring at work. No matter what the setting, who the perpetrator is or who the victim is we will respect and not penalise those who stand up for anyone who is suspected of being abused.

7. PROCEDURE FOR TACKLING ACTUAL OR SUSPECTED ABUSE

7.1 When to use this procedure

When abuse of a vulnerable adult or child is suspected.

7.2 Procedure

Step	Action	Performance Standard
1	Contact emergency services if a vulnerable adult or child appears to be in immediate physical danger. If no immediate physical danger is apparent, proceed to step 2.	Immediately
2	<p>Discuss suspected abuse or allegation of abuse with line manager ASAP. If the line manager is not available or unlikely to be available and staff members considers the matter sufficiently urgent, they should discuss their concerns with a suitable alternative manager. The full facts and circumstances of the situation together with all available options and courses of action should be identified and discussed. A decision should be taken on the appropriateness or not of notifying the alleged abuser of the concern prior to any referral.</p> <p>Note: This and the following steps assume that neither the abused nor the suspected abuser is a KCHA employee. If the person being accused is a member of KCHA staff the procedures on harassment should be used. If the suspected abuser is a KCHA employee, the disciplinary and/or the whistle blowing procedure should be followed. If the alleged abuser is a care worker employed by another agency (private, statutory, or voluntary) the steps below should still be followed through and the appropriate manager from the agency should be notified and involved.</p>	
3	Contemporaneously or ASAP record incident, assessment and options identified and continue to maintain accurate, legible, concise, factual, and up-to-date records during all subsequent steps.	

4	If there is a suspicion of abuse or clear evidence of it a referral to Social Services should be made by phone without delay, subject to the consent of the vulnerable adult.	Within 24 hours of decision being taken to refer
5	If the vulnerable adult or child does not want the referral to be made, then their wishes should be honoured unless: - <ul style="list-style-type: none"> • They or others are in physical danger and/or • It is the opinion of staff that the vulnerable person is unable/incapable of making an informed decision for themselves 	
6	If no referral is made in line with the vulnerable persons wishes, then all other courses of action should be reviewed including utilising help-line advice services provided by other agencies and regularly monitoring the situation and reviewing by the front line worker and their line manager. Records should be kept of all decisions including to take no further action, as prescribed in step 3.	
7	The referral to Social Services should include: - <ul style="list-style-type: none"> • Personal details of the individual (name, address, age, ethnic origin, gender, religion, type of accommodation, family circumstances, support networks, physical and mental health, and any communication difficulties) • The referrer's job title and involvement • Substance of the allegation • Details of care givers • Details of alleged abuser and current whereabouts and likely movements within the next 24 hours • Specific details of any specific incidents eg dates, time, injuries, witnesses, and evidence such as bruising • Background of any previous concerns • Awareness or not/consent or not by the abused, carers, alleged abusers of the referral <p>In situations where there is obvious evidence of a criminal offence a referral to the police may be made – guidance may be sought from the person taking the referral in</p>	

	Social Services.	
8	<p>Once a referral has been made to Social Services that department should then work within their own inter-agency guidelines on abuse of vulnerable adults and children. (A copy of the Surrey Multi Agency policy is available on their website). Staff should co-operate with Social Services and, if they are involved, the police and/or doctors, in accordance with these guidelines. These guidelines may include the referrer's continued involvement through: -</p> <ul style="list-style-type: none"> • Assistance with any communication difficulties (e.g. sensory impairment, language, or speech problems) • Verbal or written clarification and implications of initial referral details • Request for further monitoring • Attendance at a case conference • Discussions with police 	
9	<p>Staff should agree a framework for working with the vulnerable adult with their line manager, whether the referral to Social Services has been made or accepted. Within this framework, staff should continue to support and ensure the safety of the vulnerable adult as well as work with other agencies towards the elimination of the abuse.</p>	
10	<p>Staff should be prepared to accept that no action, other than continued monitoring, may in some circumstances be the only option due to current legal limitations.</p>	
11	<p>The line manager should clarify the staff member's role, extent of their responsibility and provide the necessary support to the employee either directly or through an agreed other source.</p>	

8. SUPPORTING INFORMATION – WHAT IS ABUSE?

8.1 Physical Abuse

Types of Abuse	Indicators of Abuse
Physical abuse is the deliberate infliction of pain, physical harm or injury including hitting, slapping,	<ul style="list-style-type: none"> • Multiple bruising • A history of unexplained falls and/or minor injuries

<p>pinching, pushing, kicking, hair-pulling, restraint, withholding or misuse of medication.</p>	<ul style="list-style-type: none"> • Fractures not consistent with falls or explanations or the injury • Unexplained loss of hair, in clumps • Cuts that are not likely to be explained by self-injury • Finger marks • Burns not consistent with possible explanations • Excessive consumption of alcohol by the vulnerable adult or care giver • Deterioration of health without obvious cause • Increasing immobility • Over or under use of medication • Withdrawal • Flinching
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8.2 Psychological and emotional abuse

Types of Abuse	Indicators of Abuse
<p>Psychological and emotional abuse is any pattern of behaviour by another that results in the psychological harm to a vulnerable adult and may include but is not limited to: humiliation, insults, ridicule, bullying, threats, enforced isolation, coercion, lack of privacy or choice, denial of dignity.</p>	<ul style="list-style-type: none"> • Strain within the relationship • Indications that the abuser acts differently with the worker present than at other times with the vulnerable adult • An air of silence in the home when the alleged abuser is present • A general lack of consideration for the vulnerable adult's needs • Refusal to allow the vulnerable adult an opinion of their own • Denial of privacy in relation to their care, feelings, or other aspects of their life • A denial of access to the vulnerable adult, especially where the individual is in need of assistance which they are not receiving • Denial of freedom or movement eg locking the person in a room or tying them to a chair • Alterations in the psychological state, possible withdrawal or fear

8.3 Sexual abuse

Types of Abuse	Indicators of Abuse
<p>Sexual abuse is any sexual act carried out without the informed consent of a vulnerable adult and may include but is not limited to fondling, sexual intercourse,</p>	<ul style="list-style-type: none"> • Unexplained bruising around the vaginal or genital areas • Unexplained difficulties in walking • Reluctance of the person to be alone with an individual known to them

offensive or suggestive language and inappropriate touching.	<ul style="list-style-type: none"> • Unexplained behaviour change • Unexplained bleeding from vaginal or genital areas • Stained or bloody clothing
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8.4 Financial abuse

Types of Abuse	Indicators of Abuse
Financial abuse is the misappropriation of the funds of a vulnerable adult and may include misuse of finances, exploitation, theft or fraudulent use of money, embezzlement and misuse of property or possessions.	<ul style="list-style-type: none"> • Situations where, despite having a personal income/pension, the vulnerable person is without money soon after its receipt, particularly where that person is not able to spend money without assistance • Unexplained shortage of money despite a seemingly adequate income • Unexplained withdrawals from savings accounts • Unexplained disappearance of financial documents eg building society books and bank statements

8.5 Neglect

Types of Abuse	Indicators of Abuse
Neglect may be deliberate or by default where the abuser is not able to provide the care needs and may not recognise the need for that care to be given. The abuser may also be neglecting themselves.	<ul style="list-style-type: none"> • Persistent hunger • Loss of weight • Poor hygiene • Inappropriate dress • Consistent lack of supervision for long periods, especially during activities which hold danger for them • Denial of religious or cultural needs • Constant fatigue or listlessness • Physical problems and medical needs that are not attended to

8.6 Domestic abuse/Coercive behaviour

Types of Abuse	Indicators of Abuse
Domestic Abuse is an incident or pattern of incidents of controlling, coercive threatening, degrading and violent behaviour. This includes sexual violence, in the	<ul style="list-style-type: none"> Isolating from friends and family Depriving of basic needs, such as food Controlling what you go and who you talk to Loss of interest in daily activities, Threatening to hurt/kill you or following you

majority of cases by a partner or ex-partner you still live with but can also be by a family member.	Controlling your finances Humiliating, degrading a person Hitting, shoving, throwing things at a person, bruising on bodily parts
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8.7 Modern Slavery

Types of Abuse	Indicators of Abuse
Modern slavery abuse is the use of violence, threats or coercive to transport or recruit people to exploit them for purposes such as forced labour, criminality, or prostitution.	Appears to be under control of someone else and reluctant to interact with others. Have few personal belongings, wears the same clothes every day Reluctant to talk to strangers

8.8 Discrimination abuse

Types of Abuse	Indicators of Abuse
Discriminatory abuse is when someone picks on you or treats you unfairly because something is different. This can be due to a persons' race, gender, age, disability, sexuality, appearance, or cultural background.	Experiencing harassment, insults or similar due to race, religion gender, gender identity, age, disability, sexual orientation.

8.9 Organisation abuse

Types of Abuse	Indicators of Abuse
Organisational abuse is poor care practice within a care setting such as a hospital or care home. Poor practice in relation to care provided in someone's home when people are mistreated by poor or inadequate care or support. It occurs when a person wishes, and needs are sacrificed for the smooth running of a service or organisation.	No flexibility in bedtime routine and waking a person up. A person left on a commode or toilet for long periods of time. Depriving environmental conditions and lack of stimulation. Lack of personal clothes and belongings. Inflexible services based on convenience of the provider rather than adjusted to the persons need of the service.

8.10 Self-Neglect

Types of Abuse	Indicators of Abuse

<p>Lack of self-care to an extent that it threatens personal health and safety.</p> <p>Neglecting to care for personal hygiene</p> <p>Refuse access to contractors or visitors</p> <p>Isolating</p> <p>Not attending to doctors or hospital appointments</p>	<p>Signs of poor personal hygiene/not bathing or taking care of hair and nails.</p> <p>Poor medication management or refusing to take medication</p> <p>Signs of dehydration, malnutrition, or other unattended health conditions</p> <p>Unsanitary or very unclean living quarters</p> <p>Signs of unpaid bills, or utilities shut-off</p> <p>Lack of adequate food in property or signs of weight loss</p>
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8.11 Summary of indicators – checklists

Types of Abuse	Indicators of Abuse
<p>The presence of any of the following indicators does not establish that abuse has taken or is taking place. Their presence should be identified as the starting point for investigation not as the conclusion that abuse has taken place or is still occurring.</p>	<ul style="list-style-type: none"> • Multiple bruising or finger marks • A history of unexplained minor falls or injuries • Injuries not consistent with explanations for them • Deterioration of health without obvious cause • Loss of weight • Inappropriate or soiled clothing • Withdrawal/mood changes • Unwillingness of the care giver to allow free access to the vulnerable adult • Reluctance by the vulnerable adult to be alone with the alleged abuser • Unexplained shortage of money, despite a seemingly adequate income

8.12 Capacity and self-determination

Types of Abuse	Indicators of Abuse
<p>Adults should be free to determine their own lives and make their own decisions except in certain prescribed circumstances. Where an individual can make an informed choice regarding their present and future circumstances, the worker should discuss with them all the available courses of action. Legally there is a presumption of capacity unless demonstrated otherwise. A test of capacity to understand and make decisions should be considered</p>	<ul style="list-style-type: none"> • Awareness – is the person aware of the choice/decision they are making? • Consequences – can they say and understand what the circumstances of their choice or decision may or will be? • Communicate – have they communicated that choice/decision?

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8.13 Common causes of abuse

A contributor that the following factors can cause abuse by family members: -

- When the abuser is dependent on alcohol or drugs, or suffers from mental illness or is dependent on the victim emotionally or financially for eg housing
- Where abusive behaviour, learned in childhood becomes a pattern
- When the stresses of caring for a physically and/or mentally frail adult with inadequate support can lead to abusive behaviour towards the adult
- Where the abuser gains from their abusive behaviour

In general healthcare professionals are more prone to suffer from stress and professionally burn-out because they are responsible for human lives and their actions, or lack of actions can have a serious impact on their patients.

8.14 Factors that can be associated with abuse by carers

Where care givers: -

- Have suffered an enforced, unplanned change in lifestyle which has affected personal ambitions, career etc
- Are or feel exploited by other family members and/or by professional workers
- Have been unable to express or have had difficulty in making other family members and/or professional workers understand their stress and provide the services which they and the vulnerable adult need
- Suffer physical or mental illness
- Suffer severe stress or are exhausted through lack of sleep and/or heavy physical demands
- Have to live with a person who shows major behavioural disturbances
- Lack support and social contacts
- Are isolated and lack other adult relationships which satisfy social and emotional needs
- Have financial difficulties
- Are dependent on the vulnerable adult, for money, for housing or for emotional needs
- Have drug or alcohol related problems
- Have a long-standing history of relationship difficulties
- Lack understanding of the ageing process/progressive illness/needs of the vulnerable adult

- Make frequent contact with statutory or voluntary agencies without any resolution
- Have other dependents who make conflicting demands
- Have no personal space
- Are subject to abuse by the vulnerable person
- Are in a role reversed relationship ie are caring for an individual who used to care for them
- Live in poor and/or overcrowded housing
- Lack knowledge regarding how to offer adequate care
- Experience a change of cultural expectations
- Have a poor relationship with victim
- Have a sense of unfairness, resentment or of being victimised

8.15 Settings

Abuse of vulnerable adults may occur in Kingston Churches Housing Association's general needs rented stock, or sheltered schemes.

9. **LEGAL FRAMEWORK**

The Care Act 2014 sets out a clear legal framework for how local authorities and other parts of the system should protect vulnerable adults and children at risk of abuse and neglect. Local authorities have new safeguarding duties.

They must:

Lead a multi-agency local adult safeguarding system that seeks to prevent abuse and neglect and stop it quickly when it happens.

Make enquiries, or request others to make them, when they think an adult or children with care and support needs may be at risk of abuse or neglect and they need to find out what action may be needed.

Establish safeguarding adults' boards, including the local authority, NHS, and police, which will develop, share, and implement a joint safeguarding strategy

Carry out safeguarding reviews when someone with care and support needs dies because of neglect or abuse and there is a concern that the local authority or its partners could have done more to protect them.

Arrange for an independent advocate to represent and support a person who is the subject of a safeguarding enquiry or review if required.

We need to share information with the right people at the right time to:

- Prevent death or serious harm
- Co-ordinate and efficient responses
- Enable early interventions to prevent the escalation of risk
- Prevent abuse and harm that may increase the need for care and support
- Maintain and improve good practice in safeguarding
- Reveal patterns of abuse that were previously undetected and that could identify others at risk of abuse
- Identify low level concerns that may reveal people at risk of abuse
- To reduce risk and promote wellbeing
- Identify those that may pose a risk to others and work to reduce offending behaviour
- Reduce organisational risk and protect reputation

Relevant statutes include: -

- The Care Act 2014 allows local authorities to carry out assessments to anyone who appears to require care and support, regardless of their likely eligibility for state funded care.
- The Disability Discrimination Act 1995 eliminates discrimination against people on the grounds of disability including work, accommodation, education, access to premises and the provision of goods, facilities, services
- Safeguarding placement Act 2006 is to safeguard vulnerable groups from abuse very occasionally to remove vulnerable but mentally competent older people from their home against their will
- The Mental Health Act 2015 may be used if the vulnerable adult is mentally ill and believed to be ill-treated or neglected
- The Human Medication Act 2012 relates to the giving of medicine that is prescribed for someone else
- The Housing Act 1996 amended in 2004 allows injunctions against anti-social or abusive tenants.
- The 2014 act for antisocial behaviour introduced a new mandatory ground for possession for antisocial behaviour against secure and assured tenants, as well as a new community power.

10. **ORGANISATIONS THAT OFFER SPECIALISED ADVICE AND SUPPORT**

Samaritans: 08457 90 90 90 (Telephone) 08457 90 91 92 (Textphone)

Victim Support Line: 0845 30 30 900

Women's Aid: 0808 200 0247 (24 hours)

Rape Crisis: 0808 802 9999

Support for Children: **NSPCC:** 0808 800 5000

Childline: 0800 1111

OTHER USEFUL ADDRESSES

Action on Elder Abuse (AEA). Tel: 020 8835 9280. Address: 23 Mitcham Lane, Streatham, London SW16 6LQ
Email: enquiries@elderabuse.org.uk

Age UK. Age UK Advice line: Tel: 0800 678 1602. Address: Tavis House, 1-6 Tavistock Square, London WC1H 9NA

Carers UK. Tel: 020 7378 4999. Address: 20 Great Dover Street, London SE1 4LX
Email: advice@carersuk.org.uk

The Relatives & Residents Association. Tel: 020 7359 8148. Address: 1 The Ivories, 6-18 Northampton St, London N1 2HY
Email: info@relres.org.uk

Independent Age: Tel: 020 7605 4200 Address: 18 Avonmore Road, London W14 8RR
Email: charity@independentage.org.uk

Alzheimer's Society. Tel: 0330 333 0804. Address: 43-44 Crutched Friars, London EC3N 2AE
Email: enquiries@alzheimers.org.uk

Whistleblowing:

Public Concern at Work. Tel: 020 7404 6609. Address: 3rd Floor, Bank Chambers, 6-10 Borough High Street, London SE1 9QQ
Email: whistle@pcaw.org.uk