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# SOSRC

## Safeguarding Adults at Risk Policy

| Title                     |                | Safeguarding Adults at Risk Policy |               |
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## SOSRC's Safeguarding Leads

| Name                    | Role                                | Phone Number | Email                   |
|-------------------------|-------------------------------------|--------------|-------------------------|
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SOSRC recognises that Safeguarding is everyone's responsibility and understands its role to promote and engage in the Safeguarding of Adults at Risk and Children. All workers will be expected to adhere to working practices in accordance with maintaining choice, rights, fulfilment, independence, privacy, and dignity for the individuals concerned. We will give equal priority to keeping everyone safe regardless of their age, disability, gender, race, religion or belief, sex, or sexual orientation".

SOSRC will ensure all workers understand Safeguarding and Child Protection procedures and have appointed Designated Safeguarding Leads and a Designated Trustee Safeguarding Lead who has overall responsibility.

SOSRC work to the Southend Essex and Thurrock (SET) procedures Safeguarding adults at risk guidelines and SET Safeguarding.

SOSRC recognises its responsibility to promote and engage in the safeguarding of adults at risk. All workers will be expected to adhere to working practices in accordance with maintaining choice, rights, fulfilment, independence, privacy, and dignity for the individuals concerned. SOSRC strive to deliver a person-centred approach to safeguarding, consistent with the Making Safeguarding Personal (MSP) principles.

All SOSRC Workers must have an up-to-date Disclosure & Barring Service registration (DBS) and must complete Level 3 Safeguarding training. Designated Safeguarding Leads must undergo Level 3 safeguarding training every 2 years.

SOSRC work to the Southend Essex and Thurrock (SET) procedures Safeguarding adults at risk Guidelines <https://www.essexsab.org.uk/media/2963/set-safeguarding-adult-guidelines-final-2022-v7.pdf> SET procedures are available to all workers, volunteers and are part of our induction process.

It is the responsibility of everyone to recognise suspected or actual abuse and to take appropriate action in line with the procedures in this document. IGNORING ABUSE OR NEGLECT IS NOT AN OPTION. All individuals, regardless of age, ability, race, culture, gender, sexual orientation, lifestyle, faith or beliefs should have the greatest possible control over their lives.

People should be able to live as independently as possible and to make informed decisions about their own lifestyles, including the opportunity to take risks if they choose to do so, without fear of harm or abuse from others. It should be acknowledged that these decisions may be viewed as unsafe or unwise and must be heeded if a person has the capacity to make the specific decision. A person is not to be treated as unable to make a decision merely because she makes an unwise decision' (Mental Capacity Act 2005 (MCA))

People have a right to express their wishes and preferences and to be personally involved when plans are made for their care. Every effort should be made to enable people to express their wishes in a way that is appropriate for them.

The adult should be the primary focus of any decision making and they should be provided with options so that they maintain choice and control. In any intervention to reduce risk or respond to immediate danger, care should be taken to ensure the least possible disruption of people's lives. At SOSRC we are committed that we will make every effort to ensure that adults at risk who has disclosed abuse, or witnessed such abuse, or their nominated representative will be involved as much as practically possible with the procedures in this document and be supported throughout the process.

If a an adult at risk has been deemed to lack mental capacity to make decisions about their safety under the principles of the Mental Capacity Act 2005 a decision may be made in their best interest.

## Adult Safeguarding

The Care Act 2014 guidance provides the following definition of adult safeguarding:

'Safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear, or unrealistic about their personal circumstances'.

## Adult at risk of abuse or neglect

Adult at risk refers to someone over 18 years old who, according to paragraph 42.1 of the Care Act 2014:

- has care and support needs
- is experiencing, or is at risk of, abuse or neglect
- as a result of their care and support needs is unable to protect himself or herself against the abuse or neglect or the risk of it.
- If someone has care and support needs but is not currently receiving care or support from a health or care service they may still be an adult at risk

## Mental Capacity

The Mental Capacity Act 2005 starts with the presumption that, from the age of 16, we can make our own decisions – including about our safety and when and how services intervene in our lives. People must be assumed to have the capacity to make their own decisions and be given all practical help to make a specific decision before anyone treats them as not being able to make their own specific decision. Where an adult is found to lack capacity to make a decision then any action taken, or any decision made on their behalf must be made in their best interest.

## Making Safeguarding Personal

The Care Act 2014 set out a requirement for 'making safeguarding personal' through which all safeguarding practices should be person-led, and outcome focused. An adult at risk should be involved in conversations about the safeguarding process and have choice and control over this. This should also be considered as part of the safeguarding decision-making process. If a volunteer or worker feel that the adult is at risk but potentially lacks the capacity or understanding to make choices about their lifestyle, then a concern should be raised.

## Key Principles of Adult Safeguarding

In the safeguarding of adults, SOSRC are guided by the six key principles set out in The Care Act 2014 and Making Safeguarding Personal. SOSRC aims to demonstrate and promote these six principles in our work:

- **Empowerment** – Adults are encouraged to make their own decisions and are provided with support and information.
- **Prevention** – Strategies are developed to prevent abuse and neglect that promotes resilience and self-determination.
- **Proportionality** – A proportionate and least intrusive response is made balanced with the level of risk.
- **Protection** – Adults are offered ways to protect themselves, and there is a coordinated response to the adult.
- **Partnership** – Local solutions through services working together within their communities.
- **Accountability** – Accountability and transparency in delivering a safeguarding response.

## INDICATORS OF ABUSE

The Southend, Essex and Thurrock Adult Safeguarding Guidelines describes ten different categories of abuse:

**Physical abuse:** may include hitting, slapping, pushing, kicking, misuse of medication, misuse of restraint, or inappropriate sanctions.

**Domestic abuse:** may include psychological, physical, sexual, financial, emotional abuse, coercive control, so-called "honour" based abuse and forced marriage.

**Sexual abuse:** may include sexual exploitation, rape and sexual assault, or sexual acts to which the adult has not consented, or could not consent, or where pressure was applied to secure their consent.

**Psychological abuse:** may include verbal abuse, emotional abuse, threats, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, isolation or withdrawal from services or supportive networks.

**Financial or Material abuse:** may include theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits. Modern slavery: encompasses slavery, human trafficking, sexual exploitation, forced labour and domestic servitude.

**Discriminatory abuse:** includes an individual being treated less favourably than others due to their race, gender, religion or belief, disability, or sexual orientation, such as being given fewer opportunities, being called names or isolated, degrading treatment and other forms of mistreatment.

**Organisational abuse:** involves the collective failure of an organisation to provide an appropriate and professional service to adults with care and support needs. It can be seen or detected in processes, attitudes and behaviour that amount to discrimination through unwitting prejudice, ignorance, thoughtlessness and stereotyping. It includes a failure to ensure the necessary safeguards are in place to protect adults and maintain good standards of care in accordance with individual needs, including training of worker, supervision and management, record keeping and liaising with other providers of care.

**Neglect (including acts of omission):** may include ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life, such as medication, food and drink and heating.

**Self-neglect:** includes a wide range of behaviours neglecting to care for one's personal hygiene, health or surrounding and includes behaviour such as hoarding.

**Female genital mutilation:** Comprises all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons. Female genital mutilation has no health benefits, and it harms girls and women in many ways. It involves removing and damaging healthy and normal female genital tissue and interferes with the natural functions of girls' and women's bodies.

**Honour Based/Forced Marriage:** Honour Based Abuse is an international term used for the justification of abuse and violence. It is a crime or incident committed to protect or defend the family or community 'honour'. Honour based abuse will often go hand in hand with forced marriages, although this is not always the case. Forced marriage is when there are physical pressures to marry (for example, threats, physical violence or sexual violence) or emotional and psychological pressure (e.g., if someone is made to feel like they're bringing shame on the family)

**Modern Slavery:** Trafficking of people is a serious crime and is now referred to under the term "Modern Slavery." It involves the recruitment and movement of adults and children to exploit them in degrading situations for financial rewards for their traffickers.

**PREVENT:** Prevent is about safeguarding people and communities from the threat of terrorism and to stop people from becoming terrorists or supporting terrorism.

Anyone can carry out abuse or neglect, including relatives and family members, professional workers, paid care workers, volunteers, other service users, neighbours, friends and associates, people who deliberately exploit adults at risk, and strangers.

There is often particular concern when abuse is perpetrated by someone in a position of power or authority, who uses his or her position to the detriment of the health, safety welfare and general wellbeing of a adults at risk.

Agencies have a responsibility to all adults at risk who have been abused, and they may also have responsibilities to some persons alleged to have caused harm. The roles, powers and duties of the various agencies in relation to the person alleged to have caused harm will vary according to whether they are:

- A member or worker, proprietor or manager of a service
- A member of a recognised professional group, including health professionals, or Social Services professionals
- A volunteer or member of a community group such as a church or social club
- Another service user
- A spouse, relative or member of the person's social network
- A carer i.e. someone who is eligible for assessment under the 1996 Carer's Recognition Act
- A neighbour, member of the public or stranger, including visitors to the individual's home
- A person who deliberately targets adults at risk in order to exploit them

Where there is an ongoing risk of a person in a position of trust causing harm to other adults or children consideration should be given to contacting the Local Authority Designated Officer (LADO) in the appropriate Local authority.

Abuse can occur in any setting: This document and the associated guidance relate to suspected abuse in all environments, and within all relationships, including:

### Responsibilities of Worker

- SOSRC workers will be expected to understand the definitions for the different types of abuse
- All workers will be expected to know how to recognise the signs and indicators of abuse and how to respond in line with SOSRC's internal Safeguarding Process.
- SOSRC Workers will ensure that any actions taken where possible will be with the consent and knowledge of the person at risk unless it would put them at greater risk to do so.
- If anyone identifies that someone is at risk of significant harm, advice must be sought as quickly as possible from the Designated Safeguarding Leads (DSL)
- If there is an Immediate risk which is deemed as an emergency, then 999 should be contacted
- The worker will be responsible for recording the safeguarding concerns and updating the Designated Lead or any further concerns or developments.
- The Designated Safeguarding Lead will remain responsible for keeping the records
- Any safeguarding actions should be recorded in a timely manner with all relevant details.

### What to do when you suspect abuse has occurred or is occurring.

Every incident of alleged or suspected abuse should be taken seriously. Some will be so serious that they must be referred directly to the Police for them to conduct the investigation. Others will be best dealt with referrals to Adult Social Care. In all cases where abuse is suspected, the matter should be reported to the designated safeguarding Lead.

If someone makes a disclosure or you suspect abuse, you should:

- Reassure them and allow them to speak without interruption.
- Listen carefully to what is said.
- Record what you have witnessed, seen or been told as soon as possible.
- Not make suggestions, coach, or lead the person in any way.
- Reassure the adult that they have done the right thing in telling you.
- Tell the person that the information will be treated seriously.
- Not interrogate or ask detailed or probing questions.
- Never promise to keep a secret and explain that you have a responsibility for their safety and must have a confidential conversation with your Designated Safeguarding Lead.
- Let the adult know that there are others who can help them and that they are not alone.

### Emergency

- Concern is brought to your attention.
- If concern is an emergency or a child is an immediate risk of harm, without delay contact 999 followed by Social Care Priority line (Essex), MASH (Thurrock)
- Contact Designated Safeguarding lead and inform of actions taken.
- Keep a copy of any referrals made.
- Complete ROC same day as concern
- Send to Designated Safeguarding Lead/Deputy log and record.
- Update DSL of any updates or increase of risk.

### Ongoing Safeguarding

- Concern is brought to your attention.
- You are concerned but it is not an emergency, contact the Safeguarding champion as soon as possible within the same day of concern raised, and complete ROC.
- Follow advice given by safeguarding champion/DSL
- If any referrals have been made keep a copy for SOSRC's internal safeguarding log
- Complete safeguarding services on DPMS.
- DSL to update log.
- Update DSL of any updates or increase of risk.

### Concern to monitor

- Something is brought to your attention which could be a cause for concern.
- Contact the Designated Safeguarding Lead/ Deputy and complete a ROC if advised.
- Keep a log of any additional concerns and follow the steps above if concern or risk escalates.



### What will happen if abuse is reported?

If abuse is reported to SOSRC, the report will be dealt with as quickly as possible. SOSRC workers will ensure that a risk assessment is carried out and where possible the service user's views are taken into account. SOSRC will ensure workers are trained in risk assessment and apply the correct procedures in cases of abuse. SOSRC will where possible discuss the report with the service user prior to acting. SOSRC will encourage and support service users to report the abuse themselves if possible.

- If there is an immediate danger, Police, Social Services or the relevant agency will be contacted straight away.
- If there is a significant risk of harm the report will be dealt with by the designated safeguarding Lead or their deputy within 1 working day
- Other reports will be dealt with by the designated safeguarding Lead, their deputy or a team manager within 7 working days.
- Instigating procedures if the alleged abuser is a member or worker.

SOSRC will ensure alleged abuse by a worker or others will be referred directly to the Chair of Board of Trustees and the appropriate authorities as described above in cases of immediate danger.

Should a complaint be made about a member of worker it will be dealt with internally under SOSRC's complaints procedure. This may or may not lead to disciplinary measures described under disciplinary procedures. Liaising with such authorities as described e.g., police, social services as necessary.

### Third Party Safeguarding

SOSRC recognises that safeguarding concerns may, at times, involve third parties who are not directly receiving services from the organisation, but whose welfare may be impacted through our work, disclosures, or other contact. In such instances, SOSRC is committed to taking appropriate and proportionate action to ensure the safety and wellbeing of all individuals involved.

All concerns involving third parties will be assessed on a case-by-case basis. When a safeguarding concern arises involving a third party, the following process must be followed:

**Initial Identification:** The worker who identifies the concern will record all relevant information clearly and sensitively in line with SOSRC's safeguarding reporting procedures.

**Internal Review:** The worker must promptly raise the concern with one of the following senior representatives:

- The Chair of Trustees
- The Trustee Safeguarding Lead
- The Vice Chair of Trustees

**Discussion and Decision-Making:** The concern will be reviewed collaboratively to assess the level of risk and determine appropriate action. This may include further information gathering, contacting external agencies, or taking protective steps, depending on the circumstances.

**Documentation:** All discussions, decisions, and actions taken must be documented accurately and stored securely in accordance with SOSRC's data protection and safeguarding policies.

**Ongoing Monitoring:** If action is taken, a designated lead will be assigned to monitor the situation, with regular updates provided to the appropriate trustee lead(s).



## Implementation Checklist

These safeguarding procedures will only be effective if all workers and volunteers at SOSRC:

- Identify the Designated Lead for Safeguarding and Deputies
- Ensure all workers attend regular Safeguarding Training both SOSRC's internal yearly training as well as level 2 (every 2 years) for all worker and level 3 for Leads.
- Workers contribute to whatever actions are needed to safeguard and promote the at risk adult's welfare.
- Ensure all worker and volunteers have a copy of safeguarding procedures.
- Ensure that all worker and volunteers know what to do if they have concerns about an adult at risk
- Ensure all existing worker and volunteers who have contact with at risk adult's have Enhanced DBS Disclosures
- Ensure that new worker/volunteers who have contact with at risk adult's have enhanced DBS Disclosures before they start work.
- Ensure that the premises conform to health and safety guidelines.
- This policy will be reviewed on an annual basis

## Safeguarding Contacts

If you have a concern about an adult at risk in Essex, you should first determine if there is immediate danger; if so, call 999. If not, you can report a non-emergency concern to Essex County Council or the Essex Safeguarding Adults Board (ESAB) via their online portal or by phone. An "adult at risk" is any adult over 18 who has care and support needs and is experiencing or is at risk of abuse or neglect.

### Immediate danger

- Call 999 immediately if there is an ongoing emergency or a life is in danger.
- Call 101 or report online if there is no immediate danger but you need police assistance.

### Non-urgent concerns

- Online:
  - Use the Safeguarding Portal to report a concern about an adult.
- Phone:
  - Essex: Call 0345 603 7630.
  - Southend (out of hours): Call 0345 606 1212.
  - Thurrock: Call 01375 511000 or email [Thurrock.First@thurrock.gov.uk](mailto:Thurrock.First@thurrock.gov.uk).

## Review Statement

This policy has been reviewed as part of the SOS Rape Crisis annual review cycle. It is to be reviewed annually as standard, or earlier if required in response to legislative, organisation, or operational changes.

**END OF POLICY**