

# Policy

Title: **Safeguarding Adults**

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## Introduction

The Trust accepts that in recent years a high priority has been given from central government downwards of the need to ensure that adults - especially those classed as being vulnerable - who are at risk of abuse, receive protection and support.

The circumstances in which harm and exploitation occur are known to be extremely diverse, as is the membership of the at-risk group. The Trust appreciates that it has a role to play in the multi-agency arrangements that have been set up in the Halton area to address this issue.

The Trust fully supports the following principles, as outlined in Halton Safeguarding Adults Board's "Inter-Agency Policy, Procedures and Guidance" (2010) which states that:

*"All adults have a right to:*

- *Live their lives free from violence, fear and abuse.*
- *Be protected from harm and exploitation.*
- *Independence, which involves a degree of risk."*

A separate 'Safeguarding Adults' Procedure guide has been developed to accompany this policy which describes in detail the processes to be used by Trust employees when any concerns about an adult's safety or welfare arise.

## Aims / Objectives

In general, this Safeguarding Adults Policy aims to raise awareness of abuse and reduce the risk of abuse taking place.

By successfully implementing this policy, the Trust will look:

- to prevent abuse where possible; by
- raising awareness of possible abuse to adults amongst its employees, and
- enabling employees to recognise signs of abuse in the course of their regular contact with adults; and
- to apply the correct reporting procedures if any abuse is identified;

This policy and associated procedure is intended to ensure that the response to any abusive situation is at an appropriate level and happens in the least intrusive way for the adult concerned.

## Scope

This policy will mainly affect those employees who have regular contact with adults in their homes as part of their normal working routine. In particular, it will apply to scheme managers of supported housing schemes, but will also be relevant

to housing officers carrying out home visits or operatives carrying out day to day repairs.

It will also apply to those employees who come into contact with adults in their homes on a less frequent basis.

## **Policy Statement**

### ***Definitions***

For the purposes of this policy:

*“Adult”* means a person aged 18 years or over,

*“Vulnerable Adult”* is a person “who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation.”

This can include individuals in receipt of social care services, those in receipt of other services such as health care, and those who may not be in receipt of care services.

*“Abuse”* is any behaviour toward a person that deliberately or unknowingly causes him or her harm, endangers their life or violates their rights. It concerns the misuse of power, control and / or authority and can manifest itself as:

- Domestic abuse, which includes psychological, physical, sexual, financial or emotional abuse.
- Discrimination and oppression.
- Institutional abuse.
- Financial abuse.
- Neglect.

### ***The Process***

As mentioned in the Introduction above, the ‘Safeguarding Adults’ Procedure guide gives full details of how employees should deal with any concerns they encounter in their day to day work with adults. This will include definitions and examples, where possible, of physical/emotional/sexual abuse and neglect; as well as full details of the referral process to be used etc.

The main features of the process are as follows:

1. Employees should be alert to the possibility of abuse of adults in all families, cultures and communities in which it works.
2. Employees will be expected to report any concerns, allegations or disclosures of abuse through formal channels, no matter who the alleged perpetrator is, even if he or she is another vulnerable adult or customer.

3. Details of any incident or allegation/disclosure made should be recorded in a factual manner and as soon as possible after the event or receipt of any information.
4. Employees hearing of/receiving concerns, allegations or disclosures should not agree to keep things in confidence and will need to explain to the individual concerned that they (i.e. the recipient of the information) may need to share any information given.
5. Wherever possible, informed consent should be obtained from the alerter. If this is not possible, employees can override this requirement and proceed with the process, if they believe it is in the best interests of the alerter or if others are at risk.
6. In all cases of an allegation or concern of abuse, employees must inform their line manager as soon as possible. A decision will then be made on whether the referral needs to be made and who to.

If for whatever reason, the employee's line manager is not available, the case should be discussed with another manager in the same service area.

7. In all cases where it is decided that a referral is to be made, this should be done within 24 hours of receiving a disclosure or details of the concerns/allegations.
8. Any referrals should always be made without delay, by telephone, to the appropriate agency.
  - If the concern, allegation or disclosure is about any setting other than an NHS Hospital Trust a referral should be made to Halton Borough Council Adult Social Care via their 24 hour Contact Centre on **0151 907 8306**, or in person at one of the Halton Direct Link offices .
  - In any cases where a crime is suspected, the Police Public Protection Unit should be contacted on **01244 613955** or **0845 458 000**.

The Police have responsibility for establishing any criminal offence and a Police investigation will take precedence over any other investigation.

9. In receiving information and then making a referral, employees should be aware of the following:
  - At the time of receiving any allegation/disclosure etc, employees should always accept what the alerter is telling them.
  - Employees should always remember that as a possible referrer they are not being asked to verify or prove that the information is true. They are being asked to – *and must* - record any concerns and information that comes to their notice and report them to the appropriate authorities.

- Any questioning of the person making the allegation or disclosure should be kept to the minimum required, using the ‘TED’ approach – ‘Tell me’; ‘Explain’; ‘Describe’.
- ‘Leading’ questions and giving suggestions, i.e. questions that will lead the person to answer in a certain way or to give a certain answer, must be avoided.
- HBC Social Care and the Police will expect to receive a certain amount of information as standard in the referral. (*Full details of the required information are given in the procedure guide.*)
- If it is not possible to give all the information for whatever reason, employees should still make the referral and provide as much information as they can.
- Employees should never start to investigate any incidents themselves, but should be aware they may well be expected to co-operate with any subsequent investigation.
- The alleged perpetrator must not be confronted or indeed told of the concern/ allegation/ disclosure.
- Where the concerns may constitute a criminal offence, or to protect the victim /others, or to protect evidence; the Police must be informed immediately.

### ***Information Sharing and Confidentiality***

‘No Secrets’ (Department of Health, 2000) recognised that there are circumstances in which it will be necessary to share confidential information regarding safeguarding adults issues.

The principles set out in “No Secrets” concerning this are fully accepted by the Trust and will be adhered to in implementing this policy. These state that:

- Information will only be shared on a need-to-know basis when it is in the best interest of the customer.
- Confidentiality must never be confused with secrecy. Informed consent should be obtained but if this is not possible, and others are at risk, it may be necessary to override this requirement.
- It is inappropriate for agencies to give assurances of absolute confidentiality in cases where there are concerns about abuse, particularly in situations when other people may be at risk.

The decision about who needs to know and what needs to be known should be taken on a case-by-case basis.

Where circumstances dictate that it will be necessary to exchange or disclose personal information, this will be done in accordance with the Data Protection Act 1998, where this applies.

## ***Training***

All Trust employees will receive appropriate training on this policy and associated procedure.

## **Responsibility**

The Director of Customer Services will ultimately be responsible for the effective implementation of this policy, and for ensuring that all employees it impacts on receive appropriate training.

## **Service Standards**

The service standards that relate to this policy are:

- Any referrals should be made within 24 hours of receiving a disclosure or details of the concerns/allegations.
- The information contained in the referral should, wherever possible, conform to the requirements of HSAB's "Inter-Agency Policy, Procedures and Guidance" (2010).

Other agencies have their own service standards which cover any follow-on action once the referral has been made.

## **Performance Measures / Monitoring**

Clear and accurate records will be kept of all concerns raised under this policy. These will be strictly factual, and include specific dates and times of incidents or disclosures, the names of anyone consulted or involved, and the decision made to refer or not, and any follow-on action if appropriate.

Anonymised, summary reports of all cases recorded under this policy will be reported on a six monthly basis to the lead member of the Board for Housing Services. This Board member may then escalate any concerns arising from these reports through to the full Board for further consideration/action.

## **Consultation arrangements**

The Trust has not consulted with customers in the preparation of this Policy but will consult with customers at the Customer Forum. Any comments forthcoming will then be incorporated into the policy.

## Benchmark Analysis

The Trust has reviewed the policies of a number of other housing associations in this area. The Trust's policy is comparable to the housing associations that it has consulted.

The policy has also been developed to take account of current good practice in this area and has taken account of advice and guidance from such areas as:

- Halton Safeguarding Children Board,
- "No Secrets" publication - Department of Health 2000

## Regulatory and/or Legal Compliance

The current regulator for registered providers in England – the Tenants Services Authority (TSA) – issued various standards for compliance that came into force in April 2010. It is envisaged at present that these standards will continue to stay in force once the current regulatory functions of the TSA pass over to the Homes and Communities Agency.

One of the Regulatory Standards that came into force in April 2010 relates to Neighbourhood and Community. One of the required outcomes of this Standard is that:

- *'Registered Providers shall work in partnership with other public agencies to prevent and tackle anti-social behaviour in the neighbourhoods where they own homes.'*

Part of the specific expectation 3.2 relating to this outcome states that:

- *'In their work to prevent and address ASB, registered providers shall demonstrate:*
  - *a strong focus exists on preventative measures tailored towards the needs of tenants and their families,*
  - *provision of support to victims .....*

The effective implementation of this policy would contribute to achieving these requirements.

## KLOEs affected

With the announcement that the Audit Commission's housing inspection framework is to cease with effect from April 2011, a full assessment against each of the KLOEs has not been undertaken. However the policy outcomes will feed into the Trust's ongoing update of its self assessment documents as well as the input to our Service Improvement Framework.

The key areas covered by this Strategy include:

- Access and Customer Care
- Diversity

- Value for Money
- Resident Involvement

## **Diversity Considerations**

An Equality Impact Assessment has been carried out in respect of the policy in March 2011.

It concluded that:

- The policy is not directly or indirectly discriminatory
- The policy doesn't require any increases to equality of opportunity by permitting or requiring positive action or action to redress disadvantages

## **Links to Strategies, Procedures and Associated Documents**

Anti-Social Behaviour Policy & Procedure  
Harassment & Hate Crime Policy & Procedure  
Domestic Abuse Policy  
Data Protection Policy  
Safeguarding Children Policy & Procedure  
Safeguarding Adults Procedure

## **Business Impact**

It is not expected that this policy will have a direct impact on the Trust's Business Plan. However action via this policy may have a positive impact on the Trust's reputation and business activities in general. By safeguarding adults in this way it will help to contribute towards sustaining tenancies. This will also have a less tangible but positive impact of improving satisfaction with the Trust's homes and the communities it serves.