

Medialis Wellbeing CIC

Safeguarding Adults at Risk Policy

April 2022

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INTRODUCTION

Medialis Wellbeing Community Interest Company (CIC) is a Hertfordshire based organisation. Medialis Wellbeing is a small organisation working to provide health & wellbeing and social opportunities to local residents.

The policy and procedures outlined in this document are designed to cover all aspects of Medialis Wellbeing CIC's work with adults at risk and relates to all staff and volunteers employed or deployed by Medialis Wellbeing CIC for the programmes over which it has supervision and control.

POLICY

Policy statement

Medialis Wellbeing CIC is committed to safeguarding from harm, all adults at risk involved in any way in the organisation's activities and services and to treating them with courtesy and respect during their dealings with the organisation.

This policy aims to ensure that safeguards are put in place to keep adults at risk safe and to prevent harm from occurring when participating in activities.

The policy and procedures will take effect from April 2022, and will be formally reviewed in three years, or in light of significant organisational change or legislation, or in the event of a serious incident.

Principles

In 2013, a Government statement on adult safeguarding policy set out the following key principles for adult safeguarding work:

Empowerment	Person led decisions and informed consent.		
Protection	Support and representation for those in greatest need.		
Prevention	Better to take action before harm occurs.		
Proportionality	Proportionate and least intrusive response.		
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 delivering safeguarding.		

Medialis Wellbeing CIC Safeguarding Adults at Risk Policy accepts these principles and is based on the following:

- the welfare and safety of adults at risk is of primary concern
- everyone has the right to be treated as an individual
- all adults at risk have a right to be safe and to be treated with dignity and respect, with a right to privacy
- all adults at risk, whatever their age, culture, disability, gender, language, racial origin, religious belief and/or sexual identity have the right to protection from abuse
- all incidents of suspected poor practice and allegations of abuse will be taken seriously and responded to swiftly and appropriately
- confidentiality should be upheld in line with the Data Protection Act (2018), and the Freedom of Information Act (2004)
- this policy will be promoted to all staff and volunteers, partners and customers, and will be available on the Medialis Wellbeing CIC website and in additional formats as required
- all Medialis Wellbeing CIC staff, volunteers and partnering organisations have a role to play in ensuring that the responsibilities/commitments to safeguarding set out in this policy are upheld and at the forefront of everything they do

Responsibilities

Working within these principles, Medialis Wellbeing CIC accepts the responsibility to:

- take a constructive approach to safeguarding adults at risk and accept the moral and legal responsibility to provide a duty of care to protect and safeguard the wellbeing of adults at risk engaged in any activity over which it has supervision and control
- respect and promote the rights, wishes and feelings of adults at risk
- promote an organisational culture openness that ensures that all adults at risk, employees, service users and carers are listened to and respected as individuals and feel they can raise their concerns and know that they will be listened to, without worrying that something bad will happen as a result.
- undertake recruitment procedures that take account of the need to protect adults at risk and include arrangements for appropriate checks on new staff and volunteers
- train and supervise its employees and volunteers to adopt best practice to safeguard and protect adults at risk from abuse, and reduce the likelihood of allegations of abuse against themselves
- require all staff and volunteers to adopt and abide by this Policy and Implementation Procedures, and the Code of Ethics and Conduct
- ensure that carers, adults at risk, staff and volunteers are provided with information about this policy, what it does, and what they can expect from Medialis Wellbeing CIC
- ensure that carers, adults at risk, staff and volunteers are provided with clear procedures to voice their concerns or lodge complaints if they feel unsure or unhappy about anything
- maintain confidentiality and ensure information is shared as appropriate with other agencies in all cases involving safeguarding, in line with current legislation
- respond to any allegations and concerns appropriately and implement the appropriate disciplinary and appeals procedures
- continually seek ways to improve the safety and wellbeing of all adults at risk who play sport

Responsibilities of individuals

All members of Medialis Wellbeing CIC are to:

- understand and apply this policy and procedure in their activities
- identify opportunities and undertake appropriate training to support them in their role
- act appropriately at all times and be able to challenge inappropriate behaviour in others
- be able to recognise harm, and
- know how to report any concerns in a timely and appropriate way.

In addition, senior members of the organisation are to:

- ensure all staff and volunteers understand this policy and procedure
- offer opportunities to undertake appropriate safeguarding training and refresher training
- ensure that the policy and procedure is adhered to and undertake regular compliance audits
- ensure that a whistleblowing policy is developed, agreed and communicated to all staff and volunteers.

The role and responsibilities of the Named Person(s) are:

- to ensure that all staff are aware of what they should do and who they should go to if they are concerned that a vulnerable adult may be subject to abuse
- to ensure that any concerns about a vulnerable adult are acted on, clearly recorded, referred on where necessary and followed up to ensure the issues are addressed
- to record any reported incidents in relation to a vulnerable adult or breach of safeguarding policies and procedures. This record will be kept in a secure place and its contents will be confidential.

Named Persons and Important Contacts

Medialis Wellbeing CIC has an appointed individual who is responsible for dealing with any safeguarding concerns. In their absence, a deputy will always be available for anyone to consult with.

The Named Persons for safeguarding concerns within Medialis Wellbeing CIC are:

Alicja Polak
07725 740965
07725 740965
07725 740965
Pawel Medowski
07470 385512
07470 385512
07470 385512

Other Key Contacts:

Adult Social Care	0300 123 4042 (24 hours a day)
Police: if there is a danger to life, a risk of injury or a crime is taking place	999
Ann Craft Trust: working in the interests of people with learning disabilities who may be at risk from abuse	<u>0115 951 5400</u>
Action on Elder Abuse: aiming to prevent the abuse of older people	0808 8088141 (UK helpline)

PROCEDURES

Safeguarding Adults at Risk

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.

The Care Act (2014) uses the term 'adult at risk' to describe an adult who:

• has needs for care and support (whether or not the Local Authority is meeting any of those needs),

and

• is experiencing, or is at risk of, abuse or neglect,

and

• as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it

(Safeguarding Adults at Risk is now preferred to, and replaces, the term 'safeguarding vulnerable adults'.)

Abuse and how it can be recognised

All staff and volunteers should have an understanding of abuse and neglect and know how and when to take action. Medialis Wellbeing CIC and partners will put in place training and support programmes to ensure that all personnel are able to effectively deal with any suspicions of poor practice, abuse or neglect.

It is not the responsibility of those working in sport and recreational activities to decide that abuse to an adult at risk is occurring, but it is their responsibility to act on any concerns.

Types of abuse

The following categories of abuse are not mutually exclusive and an adult at risk may be subjected to more than one type of abuse at the same time, whatever the setting. It is important to recognise that some adults at risk may reveal abuse themselves by talking about or drawing attention to physical signs or displaying certain actions and gestures. This may be their only means of communication and it is therefore important for carers to be alert to these signs and to consider what they might mean.

Physical:

Including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.

Sexual:

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:

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.

Discriminatory abuse:

Including forms of harassment, slurs or similar treatment, because of race, gender and gender identity, age, disability, sexual orientation or religion. May develop into 'hate crime' (see below).

Neglect and acts of omission:

Including ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.

Organisational abuse:

Including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one-off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

Domestic violence:

Including psychological, physical, sexual, financial, emotional abuse; so called 'honour' based violence.

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.

Self-neglect:

Covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding.

FGM:

Female Genital Mutilation (sometimes referred to as *female circumcision*) refers to procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons. The practice is illegal in the UK.

Forced Marriage:

A forced marriage is where one or both people do not or cannot consent to the marriage and pressure or abuse is used. It is recognised in the UK as a form of violence against women and men, domestic/child abuse and a serious abuse of human rights.

Radicalisation:

Where an individual or group comes to adopt increasingly extreme political, social, or religious ideals and aspirations that reject or undermine the status quo **or** reject and/or undermine contemporary ideas and expressions of freedom of choice.

Hate Crime:

Crimes committed against someone because of their disability, gender-identity, race, religion or belief, or sexual orientation are hate crimes and should be reported to the police. Hate crimes can include: threatening behaviour, assault, robbery, damage to property, inciting others to commit hate crimes, harassment.

Mate Crime:

Mate Crime is defined as the exploitation, abuse or theft from any vulnerable person by those they consider to be their friends. Those that commit such abuse or theft are often referred to as 'fake friends.

(There is more information on the indicators of abuse and neglect in appendix 1.)

Recognising abuse

It is often difficult to recognise abuse and exploitation. Staff and volunteers should be alert to:

- Changes in an individual's disposition or demeanour.
- Overhearing indications of abuse or exploitation from an individual.
- Being informed directly or indirectly by other adults, member of the public, carer or other staff or volunteers.

The indicators listed in Appendix 1 are frequently found in cases of abuse and/or neglect, but their presence is not proof abuse has occurred. However, they must be regarded as indicators of possible significant harm. Such indications justify the need for careful assessment and discussion with the Named Person, and may require consultation with and/or referral to Local Adult Services.

Abuse that occurs through social media is often harder to detect. It is important to remember that the type of abuse that can occur through social media always includes emotional and psychological abuse and can include sexual and financial abuse. Social media includes (but is not limited to): networking sites such as Facebook, Twitter and LinkedIn, email, text messages, Skype and instant messaging services.

If indicators of abuse appear incrementally over time (and there is no disclosure of abuse by the individual), it can be less clear that the individual is being abused or at risk of abuse. In these cases, discuss the signs with Medialis Wellbeing CIC Named Person. Sharing relevant information promptly is a crucial part of harm reduction and risk management.

Adults at risk may be abused by a wide range of people including staff, carers, volunteers, coaches, family members, neighbours, friends and associates, strangers, or people who deliberately exploit vulnerable people.

<u>It is not</u> the responsibility of those working in sport and recreational activities to decide that abuse to an adult is occurring but <u>it is their responsibility</u> to act on any concerns.

Recording abuse

If someone discloses something:

- listen
- be sympathetic
- do not be judgemental
- do not make any promises that you might not be able to keep
- make the immediate situation safe
- may ask 'Is there anything else you want to tell me?"
- do not ask any probing questions

Record all details:

- Date and time of disclosure
- Describe any injuries
- Record any signs of injury on a body chart
- Photograph injuries if agreed by the vulnerable adult
- Recall twice to make sure you have detailed everything correctly
- Photocopy your record and ask your Named Person to date and sign it. You can keep a copy.

Reporting abuse

In the first instance, concerns about possible abuse should be reported to Medialis Wellbeing CIC's Named Person for safeguarding.

If the Named Person has reason to believe an adult may be at risk of suffering abuse or neglect, they will contact Adult Social Care by calling

0300 123 4042

If the Named Person has reason to believe an adult receiving mental health services in Hertfordshire may be at risk of suffering abuse or neglect, then a safeguarding referral can be made to Hertfordshire Partnership University NHS Foundation Trust (HPFT) on

0300 777 0707

If there is an immediate risk to life or a serious injury or a serious crime has been committed the police must be contacted direct as set out below:

Immediate response

For incidents concerning an adult at risk where there is immediate danger to life, risk of injury or a crime being committed, dial 999.

Allegations against a member of staff

When allegations of possible or actual abuse are made against a member of Medialis Wellbeing CIC staff, it is vital that the Named Person contacts the relevant investigating team before the allegations are investigated. This is to ensure that the investigation by Medialis Wellbeing CIC does not compromise any possible police investigation.

Whilst the investigating team or the police may suggest a member of staff is removed from working with a suspected victim of abuse, it is the responsibility of Medialis Wellbeing CIC to address this and take any subsequent action. This also applies to volunteers who work with adults at risk.

It is usual practice to separate the alleged victim from the alleged perpetrator during any safeguarding investigation. Where the alleged perpetrator is a paid member of staff or a volunteer, Medialis Wellbeing CIC may require the person to work elsewhere, take 'gardening leave', or be suspended depending on the seriousness of the allegation.

For allegations of abuse against members of Medialis Wellbeing CIC team, disciplinary action will be taken. Where such allegations occur, Medialis Wellbeing CIC must keep the investigating team and the police informed of:

- their actions with regards to relocation, gardening leave and suspension of an individual.
- the outcome of any disciplinary action that may be taken.
- information, when known, that the alleged perpetrator could be working for an agency or other employer that provides services to children or vulnerable adults.

Safe Recruitment

Like all organisations engaging people in regulated activities the Medialis Wellbeing CIC must have robust and transparent recruitment procedures in place to vulnerable adults are safeguarded.

Before recruiting staff (whether paid or unpaid), the following should be considered:

- The application process should include the organisations commitment to safeguarding in for example the job description and any other documentation
- Thorough checks should be made of an applicant's identity, work history and references including any gaps in time
- Proof of qualifications should be obtained
- Checks with the Disclosure and Barring Service should be undertaken
- A probationary period and supervision of the person should take place
- References should be obtained and verified
- This is not an exhaustive list but a framework for sound recruitment practice.

DBS checks

The Medialis Wellbeing CIC undertakes DBS checks as required. Recruitment of both paid and unpaid workers also complies with guidance in Safeguarding and Vulnerable Groups Act 2006 and Protection of Freedoms Act 2012, including DBS or Enhanced DBS checks for contractors, staff or volunteers working directly with children/vulnerable adults or who have frequent contact with children/vulnerable adults through the organisation. Ideally, references are also taken up in advance of them commencing with the organisation and these are checked.

Confidentiality

Protection of adults at risk raises issues of confidentiality which must be clearly understood by all. To ensure that the referral procedure complies with the Data Protection Act (2018) and the Freedom of Information Act (2004), the following guidelines should be adopted when concerns around adult protection arise:

- Staff, contractors, and volunteers have a professional responsibility to share relevant information about the protection of adults at risk with other professionals, particularly investigative agencies, and adult social services
- Clear boundaries of confidentiality will be communicated to all
- All personal information regarding adults at risk will be kept confidential. All written records will be kept in a secure area for a specific time as identified in data protection guidelines. Records will only record details required in the initial contact form

- If an adult confides in a member of staff and requests that the information is kept secret, it is important that the member of staff tells the adult sensitively that he or she has a responsibility to refer cases of alleged abuse to the appropriate agencies
- Within that context, the adult must, however, be assured that the matter will be disclosed only to people who need to know about it
- Where possible, consent must be obtained from the adult before sharing personal information with third parties. In some circumstances obtaining consent may be neither possible nor desirable as the safety and welfare of the adult at risk is the priority
- Where a disclosure has been made, staff must let the adult know the position regarding their role and what action they will have to take as a result
- Staff must assure the adult that they will keep them informed of any action to be taken and why. The adult's involvement in the process of sharing information must be fully considered and their wishes and feelings taken into account

Information sharing

Information sharing between organisations is essential to safeguard adults at risk.

The Care Act sets out the duty of individuals and agencies to provide information under these procedures to enable adults at risk to be safeguarded. The duty to share personal confidential data can be as important as the duty to respect the adult at risk's confidentiality.

If someone does not want you to share information or you do not have consent to share the information, please ask yourself the following questions:

1. Is the adult placing themselves at further risk of harm?

2. Is someone else likely to get hurt?

3. Has a criminal offence occurred? This includes: theft or burglary of items, physical abuse, sexual abuse, forced to give extra money for lessons (financial abuse) or harassment.

4. Is there suspicion that a crime has occurred?

If the answer to any of the questions above is 'yes' - then you can share without consent and need to share the information with the Named Person at Medialis Wellbeing CIC.

When sharing information, follow these guidelines:

- Seek advice if in any doubt without disclosing the identity of the person where possible, consult with the Named Person at Medialis Wellbeing CIC.
- Be transparent the Data Protection Act (DPA) is not a barrier to sharing information but to ensure that personal information is shared appropriately, except in circumstances where by doing so places the individual at significant risk of harm.
- Consider the public interest base all decisions to share information on the safety and well-being of the individual or others that may be affected by their actions.
- Share with consent where appropriate where possible, respond to the wishes of those who do not consent to share confidential information. You may still share information without consent, if this is in the public interest.
- Keep a record record your decision and reasons to share or not share information.
- Accurate, necessary, proportionate, relevant and secure ensure all information shared is accurate, up-to-date and necessary, and share information only with those who need to have it.
- Remember the purpose of the Data Protection Act the DPA is to ensure personal information is shared appropriately, except in circumstances where doing so may place the person or others at significant harm.

APPENDIX 1 – Indicators of abuse

Seriousness of harm or the extent of the abuse is not always clear at the point of the concern or referral. All reports of suspicions or concerns should be approached with an open mind and could give rise to action under Medialis Wellbeing CIC Safeguarding Adults at Risk policy and procedures.

What follows is not an exhaustive list but an illustration as to the sort of signs and symptoms that could give rise to a safeguarding concern. *Indicators that could appear in sport situations are also included, for illustrative purposes only, in italics.*

Physical

On body: symmetrical bruising; burns; marks; cuts.

Behaviours: wincing in pain; uncomfortable movement; flinching; limping; fabricated illness; underweight.

Change in behaviour: anger.

In sport, indicators could include:

- any unwanted physical contact
- a coach disregarding the individual requirements of each vulnerable person's needs when setting a training programme e.g. allowing those who are limited by a physical impairment to undertake long, continuous ergo training

Sexual

Physical: urinary tract infections (UTIs); bed wetting; for women, intimate bruising; pregnancy; sexually transmitted infections (STIs); men, faecal incontinence.

Change in behaviour: change in dress or presentation; either overt sexual behaviour or withdrawing from people; suddenly not wanting to be around or touched by certain genders.

In sport, indicators could include:

- either direct or indirect involvement in sexual activity or a relationship whereby consent has not occurred, there is a lack of capacity to give consent or that someone has been coerced into a relationship due to another person's position of trust
- a coach engaging in unnecessary and inappropriate physical contact
- a coach making suggestive comments to their participants
- an individual spending an unnecessary amount of time in the changing area where adults at risk are present

Psychological

Change in behaviour: anxious; nervous; fearful; not wanting to go out; low self-worth.

Emotional and psychological harm rarely occurs in isolation and is usually present with each other type of abuse.

In a sport situation indicators could include:

- a carer or coach subjecting a adults at risk to constant criticism, shouting, name-calling, sarcasm, bullying or discriminatory behaviours or prejudicial attitudes
- a carer or coach putting a adults at risk under unrealistic pressure in order to perform to high expectations

Financial or material

Appearance: cold; unfed; unkempt;

Debt; homeless or about to be evicted or concerned about baliffs; gambling; new best friend. Not able to pay usual outgoings so cuts down on heating, lighting, food, other expenses.

In sport, indicators could include:

- blackmailing adults at risk by requiring financial or material payment in return for certain benefits such as sports awards or complimentary tickets
- charging adults at risk more than the standard fee for participation in sports activities

Discriminatory

Name calling; segregation; not how intended but how perceived.

In sport, indicators could include:

- a referee refusing to umpire female events
- females not being give 'prime court or facility time'
- using sexist or discriminatory language towards others for example male players using language such as 'you hit like a girl', or other saying 'that was gay'

Neglect or acts of omission

Unkempt or unwashed; malnutrition; soiled clothes or bed linen.

Neglect is wilful – any of above; isolated; under/over medicated; under/overweight; withholding medication.

Act of omission – individual fails to act when see something occurring.

In sport, indicators could include:

• a coach not keeping an adult at risk safe by exposing them to undue cold, heat or the unnecessary risk of injury

- a parent, guardian or carer consistently leaving an adult at risk without adequate provisions e.g. food, water, clothing, sun block where they are unable to provide themselves with these provisions
- coaches not taking a player's injury seriously and asking them to continue playing
- situations where medication is given to ease the pain from injury so play can continue when rest would actually be more appropriate

Organisational

In organisational setting: not responding to requests for toilet; drink; food etc.

Treating someone physically, verbally or psychologically in a demeaning or belittling way

Organisation does things at set times (e.g. toilet, bed, meals); lack of freedom; autocratic management style.

Domestic violence

Change in behaviour: physical symptoms as before.

There are estimates that domestic violence happens to 1 in 3 women and 1 in 6 men. 'Domestic' is defined as someone in same household i.e. family or spouse.

Modern slavery

Under-paid or not paid; not seen or allowed to leave. (There were 1746 cases in 2013 - up 47% from 2012.)

Self-neglect

Self-harm; hoarding; unkempt; drug & alcohol abuse; not medicating; not attending appointments.

FGM

A girl or woman who has had FGM may have difficulty walking, sitting or standing, spend longer than normal in the bathroom or toilet, have unusual behaviour after a period of absence, be particularly reluctant to undergo normal medical examinations, may ask for help, but may not be explicit about the problem due to embarrassment or fear.

Forced marriage

Persistent absence from school/work, requests for extended leave. Drop in performance, low motivation, decline in behaviour/engagement. Always leaving venues accompanied, surveillance by siblings or cousins. Evidence of self-harm, depression, social isolation, eating disorders or substance misuse. Evidence of family disputes, domestic abuse, or running away from home. Unreasonable restrictions (e.g. kept at home by parents) and financial restrictions.

Cyber bullying

Stops using the computer/phone or turns off the screen when someone comes near. Nervous or jumpy when using the computer or cell phone. Secretive about what they are doing on their computer/phone. Excessive amounts of time spent on computer/phone. Becomes upset or angry when computer or mobile phone privileges are limited or taken away.

Radicalisation

Self-identification, 'Them and Us' view. Changes in the way individuals interact with society, changes in an individual's personality and expression of emotion, by association (with radical organisations).

Adults with care and support needs may be susceptible to exploitation into violent extremism by radicalisers who attempt to attract people to their cause using persuasion or charisma. The aim is to inspire new recruits and embed their extreme views.

Hate crime / Mate Crime

Lack of confidence and self-esteem. Anxiety and unhappiness. Withdrawal. Subservient behaviour and a constant seeking of approval of so-called 'friends.

APPENDIX 2 - Terminology/definitions

Abuse & Neglect

'Abuse and neglect' are forms of maltreatment to an individual. These terms refer to a violation of an individual's human and civil rights by any other person(s) and include serious physical and sexual assaults, as well as cases where the standard of care does not adequately support the individual's health or development.

Abuse to adults at risk may consist of a single act or repeated acts and may be an act of neglect or omission, or it may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which they have not consented or cannot consent. Adults at risk may be abused or neglected through the infliction of harm, or through the failure to act to prevent harm. Abuse can occur in any relationship or in an institution or community setting and may result in significant harm to or exploitation of the individual.

Abuse can also take place using electronic communication. Abuse can occur within all social groups regardless of religion, culture, social class or financial position. Adults at risk may be abused by those known to them or, more rarely, by a stranger. They may be abused by adults, children, peers, paid or voluntary workers, health or social care workers. Often people do not realise they are abusing and sometimes the stress of caring can cause a carer to act out of character.

Adult at risk (formerly known as Vulnerable Adult)

The term 'adult at risk' is used to describe an adult who:

- has needs for care and support (whether or not the authority is meeting any of those needs)
 and
- is experiencing, or is at risk of, abuse or neglect **and**
- as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it

Adults at risk may also include victims of domestic abuse, anti-social behaviour, hate crime, forced marriage and sexual or commercial exploitation (this is not an exhaustive list). The level of vulnerability may increase or decrease depending on circumstances at the time.

Capacity

Capacity refers to an individual's ability to make a decision or take a particular action for themselves at a particular time, even if they are able to make other decisions. For example, they may be able to make small decisions about everyday matters such as what to wear for a sports activity, or what a healthy sports diet would be, but they lack capacity to make more complex decisions about financial matters.

Although it is not for individuals to make a decision about whether an adult lacks capacity, it is important that you have an understanding of the 'notion' of capacity when safeguarding adults at risk.

Concern

Concern is a worry that an adult at risk is or may be a victim of abuse or neglect. A concern may be a result of a disclosure, an incident, or other signs or indicators.

Consent

Consent is the voluntary and continuing permission of the person to an intervention based on an adequate knowledge of the purpose, nature, likely effects and risks of an intervention, including the likelihood of its success and any alternatives to it.

Parent

The term 'parent' may also refer to carers or guardians of adults at risk, or people with parental responsibilities for an adult at risk.

Poor Practice

Poor practice includes any behaviour that contravenes Medialis Wellbeing CIC's Code of Conduct which is based around:

• rights of the player, the parent, the coach, the official

• responsibilities for the welfare of the players, the sport, the profession of coaching, and their own development

• respect for other players, officials and their decisions, coaches, the rules

Safeguarding

The process of protecting children and adults from abuse or neglect, preventing impairment of their health and development, and ensuring they are growing up in circumstances consistent with the provision of safe and effective care that enables them to have optimum life chances. 'Safeguarding adults' is used to describe all work to help adults at risk stay safe from significant harm. It replaces the term 'adult protection'.

Significant harm

Significant harm is not only ill treatment (including sexual abuse and forms of ill treatment which are not physical), but also the impairment of, or an avoidable deterioration in, physical or mental health, and the impairment of physical, intellectual, emotional, social or behavioural development.

Wilful neglect

Wilful neglect is an intentional or deliberate omission or failure to carry out an act of care by someone who has care of a person who lacks capacity to care for themselves.

APPENDIX 3 - Incident report form

Strictly Confidential

Please print clearly

Details of individuals involved in the incident:	
Caller/reporter's details:	
Name	
Contact number	
Relationship to person(s) at risk	
Person(s) at risks details:	
Name	
Address	
Contact number	
Are they aware of your concern?	
Person suspected of committing	
the poor practice or abuse:	
Name	
Address/Location	
Relationship to person(s) at risk	
Are they aware of your concern?	

About the incident					
Time	Date	Location	People involved	What role did they play (affected person / participant / witness)	

Describe the incident as fully as you can in your own words. If a disclosure or allegation was made to you
record in their words where possible. Attach additional sheets where necessary

About the person filling out this form:				
Your full name:		Your role in the		
		organisation		
Your address				
Your telephone number				
If you referred this case				
directly to Adult Social Services the Family, the				
Police or any other				
agency please state why,				
include the name of the worker / officer you				
spoke to and the date /				
time				
Date you sent this form				
to your Named person for Safeguarding				