

Policy Name	Safeguarding Adults and Children at Risk
Version No.	5.7
Approval Date	September 2023
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Classification	Public

<b>Safeguarding Adults and Children at Risk Policy</b>	
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### Version Control

Version	Date	Description	Updated By	Approved By
5.5	18.07.19	First draft	Faye Pemberton-Crow	Executive Director and draft subject to approval at 6 August ELT meeting
5.5	16.09.19	Final draft	Faye Pemberton-Crow	Board of Trustees
5.5	15.03.21	Final draft	Faye Pemberton-Crow	ELT and Board of Trustees
5.6	05.07.23	Review	Laura Davies	Board of Trustees
5.7	30.04.24	Minor* amendment- adding reference to DoLs in Section 9.	Head of Quality. Compliance & Performance	ELT

\* Board Terms of Reference delegate approval of minor changes to this policy to ELT.

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## 1. Policy Purpose & Aim

**Safeguarding is all about ensuring that children, young people, and vulnerable adults are protected from abuse and neglect.**

Safeguarding adults and children from harm is **everyone's** responsibility. The nature of services we provide mean it is likely that staff will have contact with adults and children at risk of abuse or neglect.

This document provides guidance for staff to ensure the principles of safeguarding adults and children are embedded in all aspects of ExtraCare's practice.

ExtraCare is committed to the aims of safeguarding which are to:

- Prevent harm and reduce the risk of abuse or neglect to adults with care and support needs;
- Stop abuse or neglect wherever possible;
- Making safeguarding personal for the adult or child at risk;
- Safeguard in a way that supports them in making choices and having control over their lives;
- Promote an approach that maximises independence and provides better outcomes for the adults and children concerned;
- Raise public awareness so that the local community, alongside visiting professionals, play their part in preventing abuse;
- Recognise and respond to abuse and neglect;
- Provide information and support in accessible ways to help people understand the different types of abuse, how to stay safe and what to do to raise a concern about the safety or well-being of an adult or child;
- Address what has caused the abuse or neglect; and
- Promote the PREVENT agenda, and awareness around radicalisation

To contribute to meeting these aims, we will:

- Manage our services in a way which minimises the risk of abuse; and
- Work with adults with care and support needs and other agencies to mitigate risk and prevent any further abuse or neglect from taking place.

## 2. Objectives

The objectives of this policy are to:

- Ensure all Trustees, staff, volunteers and students have access to and are familiar with this Safeguarding Adults and Children at Risk Policy and clearly understand their responsibilities within it;

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- Ensure concerns or allegations of abuse are always taken seriously;
- Ensure the Mental Capacity Act 2005 is used to inform any decision making on behalf of adults at risk who lack capacity to make particular decisions for themselves;
- Ensure all staff, volunteers and Trustees receive training in relation to safeguarding at a level relevant to their role;
- Ensure that people using our services, and where relevant, their relatives and friends, have access to information about how to report concerns or allegations of abuse; and
- Ensure there is a named senior safeguarding lead to co-ordinate the safeguarding policy and promote adult and children safeguarding awareness and practice within the organisation and in all of our locations.

It is about working together to support people to make decisions about the risks they face in their own lives and protecting those who lack the mental capacity to make those decisions.

This policy provides an overarching framework to ensure a proportionate, timely and professional approach is taken, and that safeguarding is co-ordinated across all relevant agencies and organisations. This is essential for the prevention of harm and abuse.

Staff can find further information regarding safeguarding procedures within the '**Safeguarding Guidance work instruction**' this specifically relates to the application of practice within the workplace.

### 3. Scope of Policy

This policy applies across all ExtraCare owned or managed locations and retail shops.

This policy aims to safeguard individuals from harm which includes:

- Residents living in our properties (across all tenures) and / or receiving a service from ExtraCare;
- Staff, volunteers, Trustees, students on placement, contractors or agents working for ExtraCare; and
- Visitors **including children and young people** to any ExtraCare owned or managed locations.

The policy has been developed in accordance with the relevant statutory and regulatory guidance

### 4. Responsibilities

**Safeguarding is everyone's responsibility**, including all staff, managers, directors, Board members, students, volunteers and involved customers. Everyone has a responsibility to prevent, and report concerns of abuse or neglect. The below outlines individual roles and responsibilities.

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<b>Board of Trustees</b>	<p>Trustees are required to undertake regular safeguarding training and know how to manage and record risks appropriately.</p> <p>Trustees will review and scrutinise safeguarding concerns, trends, and key risks for ExtraCare via the Board meetings to ensure robust management and safe practice within the organisation in line with the Trustees Escalation Framework.</p> <p>Trustees shall seek assurance to ensure that people who have Director level responsibility for the quality and safety of care, and for meeting the fundamental standards are fit and proper to carry out this important role. See section 10: Relevant legislative &amp; regulatory requirements: The Care and Quality Commission – Regulation 5.</p>
<b>Executive Director Operations</b>	<p>The Executive Director Operations as accountable officer has overall responsibility for ensuring the implementation of effective safeguarding adults and children at risk procedures. The Executive Director for Operations is responsible for notifying the Board of any serious incidents which meet the escalation framework thresholds.</p>
<b>Head of Quality, Compliance and Performance</b>	<p>The Head of Quality, Compliance and Performance has day to day responsibility for ensuring that ExtraCare operate within the procedures set out in this document. They will provide professional leadership and expertise for the implementation of this procedure.</p> <p>The Head of Quality, Compliance and Performance will report safeguarding concerns and data analysis to the Board periodically.</p>
<b>Senior Safeguarding Lead/Care Lead</b>	<p>The Senior Safeguarding Lead is a senior member of staff who has attended specialist training in the safeguarding of adults and children at risk. They will provide advice and guidance as and when required. The senior safeguarding lead will act as the professional interface with other agencies, in conjunction with staff, in the ongoing management of any cases where abuse is identified or suspected.</p> <p>The lead will work with the Head of Quality, Compliance and Performance to identify cases that may result in an insurance claim and report to the Company Secretary/Head of</p>

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	Governance and advise of any 'serious concerns' which may be reported to the Charities Commission or other regulators.
<b>Head of Governance</b>	The Head of Governance will notify insurers or report cases of serious concern to the Charity Commission or Regulator for Social Housing if necessary.
<b>Care Performance and Standards Officer</b>	The Care Performance and Standards Officer will monitor trends and identify key risks for service improvements. This information shall be reported to the Board on a quarterly basis.
<b>All Managers, (DSL) Designated Safeguarding Lead(s) and Learning and Improvement Group (LIG)</b>	<p>The responsible manager/supervisor/DSL for any person who is suspected of being at risk of abuse will have the overall responsibility for the management of the individual case and will ensure that appropriate liaison with members of the team, both internal to and external to ExtraCare takes place.</p> <p>The responsible manager/supervisor/DSL is accountable for reporting safeguarding to the CQC and local authority. All safeguarding concerns must be documented in accordance with ExtraCare's reporting matrix.</p> <p>Where lessons learned are identified through safeguarding these cases will be raised for review and discussion at the learning and improvement group (LIG) and any appropriate action(s) will be determined.</p>
<b>All Staff</b>	<p>All staff, volunteers and students have a duty to report suspected, alleged or actual harm or abuse involving an adult or child at risk. Staff should be aware of and follow ExtraCare's policy and guidance note.</p> <p>Safeguarding adults and children at risk involves multi-agency working together to ensure that health and social care is appropriately coordinated, and individuals are protected from potential or actual harm or abuse. Location and Registered Care Managers should maintain close and effective links with all relevant statutory and voluntary agencies to collectively ensure that adults and children at risk are safeguarded.</p>

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## 5. Monitoring & Review

ExtraCare will monitor compliance with this policy and procedure in the following way:

- The Quality, Compliance and Performance team will monitor all safeguarding activity including the number of concerns being recorded and where/whether concerns are being reported to the relevant local authority;
- The Learning and Development Manager will monitor the update of safeguarding training as part of their continual monitoring of mandatory training, compliance of this, will be reported to the Regional Operations Managers and Head of Operations for action as required;
- The Care Lead will monitor the uptake of safeguarding training for leaders as part of their continual monitoring of mandatory training for care staff, compliance of this, will be reported to the Head of Quality, Compliance and Performance for action as required;
- The Senior Safeguarding Lead and the Head of Quality, Compliance and Performance will review incidents relating to Safeguarding and report concerns/ investigations/ lessons learned to the Board, Executive Director Operations;
- The Senior Safeguarding Lead will be responsible for adding any specific adult and children safeguarding risks to the Operational Risk Register as they arise, and this Risk Register will be monitored through ExtraCare's Risk Management Procedures;
- The Quality, Compliance and Performance team will undertake spot check audits of cases withafeguarding concerns to ensure that the records show that all relevant procedures have been followed. If the audit raises concerns, recommendations will be made to the Registered Manager, Location Manager and Regional Operations Manager and an action plan will be developed and followed; and
- Action plans will form part of the ongoing compliance reporting produced by the Quality, Compliance and Performance team for Executive Leadership Team meetings and Board meetings.

## 6. Risk Management

The Quality, Compliance and Performance team will monitor trends and identify key risks for service improvements and report to the Board on a quarterly basis.

Key risks regarding safeguarding are monitored via quarterly reports to the Board in addition to the number of safeguarding referrals and details of any cases upheld.

The Senior Safeguarding Lead for the organisation alongside designated members of the Care Quality Team will provide additional assurance, knowledge, and expertise to staff regarding practice, therefore minimising the risk of poor practice and inappropriate safeguarding referrals.

Safeguarding is also monitored as a key risk on the Board Assurance Framework and monitored via the Audit and Assurance Committee.

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## 7. Statement of Commitment

### 7.1 Principles of Safeguarding Adults and Children at Risk

Six key principles underpin safeguarding practice under the Care Act 2014, they are:

Principle	Definition	Making safeguarding personal (MSP)
<b>Empowerment</b>	Individuals are encouraged to make their own decisions and are provided with support and information.	I am consulted about the outcomes I want from the safeguarding process, and these directly inform what happens.
<b>Prevention</b>	Strategies are developed to prevent abuse and neglect that promotes resilience and self-determination.	I am provided with easily understood information about what abuse is, how to recognise the signs and what I can do to seek help.
<b>Proportionate</b>	A proportionate and least intrusive response is made balanced with the level of risk.	I am confident that the professionals will work in my interest and only get involved as much as needed.
<b>Protection</b>	Individuals are offered ways to protect themselves and there is a coordinated response to any safeguarding.	I am provided with help and support to report abuse. I am supported to take part in the safeguarding process to the extent to which I want and to which I am able.
<b>Partnerships</b>	Local solutions through services working together within their communities.	I am confident that information will be appropriately shared in a way that takes into account its personal and sensitive nature, I am confident that agencies will work together to find the most effective responses for my own situation.
<b>Accountable</b>	Accountability and transparency in delivering a safeguarding response.	I am clear about the roles and responsibilities of all those involved in the solution to the problem.



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### Preventing harm and abuse

All ExtraCare staff are encouraged to raise and discuss concerns including safeguarding concerns, however small they may seem. This is to encourage an open and honest culture that is responsive, proactive and seeks to reduce and manage risk through early identification and intervention.

The most effective way to safeguard adults and children from abuse and neglect is to enable them to safeguard themselves, effective prevention in safeguarding is not about over-protective or risk averse practice.

The prevention of abuse and neglect should occur in the context of person-centred support and personalisation (Making safeguarding personal), with individuals empowered to make choices and supported to manage risks.

Prevention of abuse and neglect includes integrated working, appropriate information sharing, community participation, public awareness, as well as awareness raising and skills development with adults and children at risk.

**Appendix 1 - Safeguarding decision process flowchart and Appendix 2 - Safeguarding reporting process flowchart** demonstrate the safeguarding decision process and the appropriate reporting pathway. **Appendix 3 – Safeguarding thresholds** offers further guidance around when to report a concern.

### Safe Environment:

ExtraCare as an employer shall ensure that they:

- Meet their responsibilities for obtaining Disclosure and Barring Service (DBS) checks and referring to the DBS and relevant professional bodies. It is an offence for any employer to employ someone, paid or unpaid, in a regulated activity when that person is known to have been barred under the DBS;
- Meet their professional responsibilities under employment and other legislation; and
- Have robust management systems in place for training and support.

### 7.2 Making Safeguarding Personal (MSP)

Making Safeguarding Personal (MSP) is a sector-led initiative which aims to develop an outcome focus to safeguarding work, and a range of responses to support people to improve or resolve their circumstances. It emphasises that the adult and child concerned must always be at the centre of safeguarding, and that their wishes and views should be sought at the earliest opportunity.

At Extracare, we will meet the aims of Making Safeguarding Personal by:

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- Keeping the person at the heart of the process; and
- Striving to understand the outcomes they want to achieve from the safeguarding work and supporting them to achieve these outcomes.

### 7.3 Who may be at risk of abuse or neglect?

#### Safeguarding Adults at Risk

Under the Care Act 2014, specific adult safeguarding duties apply to any adult (18 years of over) who:

- **Has care and support needs;**
- **Is experiencing, or is at risk of, abuse or neglect; and**
- **Is unable to protect themselves because of their care and support needs.**

An adult with care and support needs may be:

- A person with a physical disability, a learning difficulty or a sensory impairment;
- Someone with mental health needs, including those living with dementia or a personality disorder;
- A person with a long-term health condition; and
- Someone who misuses substance or alcohol to the extent that it affects their ability to manage day-to-day living.

#### Safeguarding Children at Risk

Whilst we do not directly provide services for children and young people, we often have and encourage children and young people to visit our locations, this may be through intergenerational work or visiting friends/family. Therefore, it is essential that we safeguard and promote the welfare of children whilst at our locations.

A child is defined in the Children's Act 1989 as amended 2004 as anyone who has not yet reached their eighteenth birthday.

We have a duty of care to safeguard and promote the welfare of children and this is defined in 'Working Together to Safeguard Children' (2006) by:

- **Protecting children from maltreatment;**
- **Preventing impairment of children's health or development;**
- **Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care, to enable those children to have optimum life chances and to enter adulthood successfully; and**
- **Taking action to enable all children and young people to have the best outcomes.**

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Child abuse happens **when someone harms a child**. It can be physical, sexual or emotional, or involve neglect.

Children who experience abuse may struggle to speak out, so it's vital that anyone working with children or young people is able to recognise the signs of abuse.

If at any point, a child or young person is on our premises and either discloses information to you that would be of a safeguarding concern or you witness or suspect that abuse may be occurring you must report as detailed in this document and associated guidance notes.

Child protection is part of the safeguarding process. It focuses on protecting individual children identified as suffering or likely to suffer significant harm. This includes child protection procedures which detail how to respond to concerns about a child.

#### 7.4 What is abuse?

Abuse can take many forms and the circumstances of the individuals should always be considered. It may consist of a single act or repeated acts. Care and Support statutory guidance identifies 11 types of abuse:

##### Definitions of abuse

- **Physical abuse:** including hitting, slapping, pushing, kicking, misuse of medication, restraint, or inappropriate sanctions;
- **Domestic Abuse:** any incident or pattern of incidents in intimate or familial relationships of controlling, coercive or threatening behaviour, violence, or abuse, and 'honour' based violence, female genital mutilation and forced marriage;
- **Sexual abuse:** including rape and sexual assault or sexual acts to which the adult or child at risk has not consented, or could not consent or was pressured into consenting;
- **Psychological abuse:** including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks;
- **Financial or material abuse:** including theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions or the misuse or misappropriation of property, possessions or benefits;
- **Neglect and acts of omission:** including 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, adequate nutrition and heating;

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- **Organisational or institutional abuse:** Including neglect and poor care practice and ill-treatment and abuse within an institution or specific care setting ( hospital/care home, for example, or care provided in one’s own home);
- **Self neglect:** includes neglecting to care for one’s personal hygiene, health or surroundings and includes hoarding, and the adult can no longer act to protect themselves by controlling their own behaviour;
- **Discriminatory abuse:** including racist, sexist, that based on a person’s disability, and other forms of harassment, slurs or similar treatment;
- **Modern Slavery:** this includes Human trafficking, forced labour, domestic servitude, sexual exploitation, such as escort work, prostitution and pornography and Debt bondage – being forced to work to pay off debts that realistically they never will be able to; and
- **Radicalisation:** includes spreading messages and narratives that incite violence and hatred. Recruiting individuals to become part of a violent extremist or terrorist group. Travelling to join violent extremists or terrorist groups abroad. Expressing support for a terrorist group.

Within these categories of abuse **Radicalisation** has additional information regarding the Government’s counter terrorism strategy PREVENT - there are 4 elements of this strategy: Prepare, Protect, Pursue and Prevent., which can also be found in **Appendix 4 – Safeguarding Guidance**

The Seriousness of harm or the extent of the abuse is not always clear at the point of the concern. All reports of suspicions or concerns should be approached with a non-biased and open-minded outlook. Look for any indicators that suggest a person is at risk of harm, such as changes to demeanour or behaviour. Make a point of recording these indicators. Through monitoring these signs and reviewing them regularly you may identify a safeguarding issue.

### Recognising signs of abuse in Children and Young People

It can be very hard for children and young people to speak out about abuse. Often they fear there may be negative consequences if they tell anyone what's happening to them. Some may delay telling someone about abuse for a long time, while others never tell anyone, even if they want to. It's vital that children and young people are able to speak out and that whoever they tell takes them seriously and acts on what they've been told.

Even if a child doesn’t tell someone verbally about what’s happened to them, there may be other indicators that something is wrong.

The five common ways that children convey their abuse:

- **help-seeking behaviour.**
- **telling without words.**

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- partially telling.
- telling others.
- telling in detail.

## 7.5 Raising a safeguarding concern

The 5 Rs of safeguarding provide an **easy-to-remember process for keeping vulnerable people safe**. The 5 Rs of safeguarding are:

- ✓ **Recognise**
  - You must have a clear understanding of the what the different signs and symptoms of potential abuse, harm and neglect can be;
- ✓ **Respond**
  - If you are made aware of a safeguarding concern, it is essential that you respond appropriately and do not ignore the situation;
- ✓ **Report**
  - Safeguarding concerns need to be reported without delay, ideally within a 24-hour period. Confidentiality is important, so only share information with those who are a part of the safeguarding process;
- ✓ **Record**
  - This is the who, what, why, when and where of safeguarding. Take precise, comprehensive notes that detail *everything* about your safeguarding concern. For example, who it involves, what happened, and include times and dates. You should do this as soon as possible; and
- ✓ **Refer**
  - It is usually the responsibility of the Location designated safeguarding lead (DSL) or management to pass on safeguarding concerns to the appropriate authorities. However, if the safeguarding risk is more urgent and you suspect somebody is under immediate or severe threat, you should contact the relevant local authority or police services.

A referral, in the context of child protection, is when someone contacts Children's Services because they have concerns about the safety and well-being of a child. **Anyone** can make a referral including a parent, wider family member, friend, doctor, teacher or health visitor.

### What is a safeguarding concern?

A 'safeguarding concern' is when any person has a reasonable cause to believe that:

- An adult has care and/or support needs and;
- May be experiencing, or is at risk of abuse or neglect; and
- Is unable to protect themselves from that abuse or neglect because of their care and support needs.

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If based on the presenting information available, it appears that these stages are met then a safeguarding concern should always be raised with the local authority and if the individual at risk is in receipt of a regulated care activity this will also need to be notified to the CQC.

In an emergency, the emergency services should be contacted immediately by dialling 999.

Whenever there is information which indicates that an adult or child may be, or is, at risk of experiencing abuse, neglect, or exploitation, this should be shared with the local authority even when it is also shared with other agencies that may need to be advised, such as the Care Quality Commission or the police.

Where possible and safe to do so, the person contacting the local authority regarding the safeguarding concern should have had a conversation with the adult or child regarding their consent, views and wishes (Making Safeguarding Personal).

The exception to this could be if the person contacting the local authority was unable to have a conversation because of concerns which may increase the risk for the adult at that time.

## 7.6 Whistleblowing regarding Safeguarding

Whistleblowing is the process whereby an employee raises a concern about malpractice, wrongdoing, risk, or illegal proceedings that they have witnessed in the workplace which harms or creates a risk of harm to the people who use the service, employees, or the wider community.

Whistleblowing is an essential part of safeguarding adults and children: **Everyone** deserve to be treated with dignity and respect at all times. In circumstances where they are not being treated this way, whistleblowing ensures that the malpractice is acted upon and that vulnerable adults or children receive the care and support they deserve.

For staff who provide care and support to residents, they have a duty of care towards vulnerable adults and a responsibility to draw attention to poor practice in the workplace.

ExtraCare encourages employees to challenge poor and dangerous practices and promotes a culture of openness and honesty to ensure employees feel confident to raise any concerns they have.

Should staff have concerns about practice which harms or creates a risk of harm to vulnerable adults, they are encouraged to speak with their line manager in the first instance or the Senior Safeguarding Lead. However, someone may choose not to do this for multiple reasons and should therefore follow

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### 7.7 Sharing information without consent

The priority in safeguarding is to ensure the safety and well-being of the adult or child at risk. There may be some occasions when the adult or child at risk does not want to pursue a referral to the local authority.

The following definitions are examples of where overriding public interest criteria applies, and the safeguarding referral process should be followed despite not having the individual's consent:

- A death or serious injury may occur;
- The individual lacks capacity under Mental Capacity Act 2005;
- Sharing information may prevent a crime;
- ExtraCare staff members are implicated;
- The alleged abuser also has care and support needs;
- A serious crime has taken place;
- Court order; and
- The individual is under duress or coercion.

If the decision is to act without the individual's consent they should be informed that this is being done and of the reasons why.

### 7.8 Decision not to share information 'Adult Safeguarding'

Where, following discussion with the Senior Safeguarding Lead and/or designated members of the Care Quality Team, the decision is not to share safeguarding information with the local authority or other safeguarding partners, or not to intervene to safeguard the adult, the responsible manager should:

- Support the adult to assess the risks and benefits of different options;
- Ensure they are aware of the level of risk and possible outcomes;
- Offer support for them to build confidence and self-esteem if necessary;
- Agree on and record the level of risk the adult is taking;
- Record the reasons for not intervening or sharing information;

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- Regularly review the situation; and
- Try to build trust to enable the adult to better protect themselves.

It is important that the risk of sharing information is also considered. In some cases, such as domestic abuse or hate crime, it is possible that sharing information could increase the risk to the adult. Safeguarding partners need to work jointly to provide advice, support, and protection to the adult to minimise the possibility of worsening the relationship or triggering retribution from the abuser.

**Note in terms of safeguarding children:**

If at any point, a child or young person is on our premises and either discloses information to you that would be of a safeguarding concern or you witness or suspect that abuse may be occurring you must report as detailed in this document and associated guidance notes.

**7.9 Recording a safeguarding concern**

Safeguarding concerns should be fully documented by the first person to report the suspected abuse, and at all subsequent stages by those involved with the adult or child.

Concerns are recorded using the safeguarding concern form and should be completed as soon as possible ideally within a 24-hour period after a concern is identified, whether it becomes substantiated or not. Further guidance regarding recording can be found in the **Safeguarding Guidance**.

Safeguarding concerns should also be recorded on the ExtraCare COLIN system. COLIN, is a database which provides the input, storage and reporting mechanism for much of the operational data which managers and other colleagues record and review on a regular basis.

**All** safeguarding concerns should be taken seriously however there are cases that ExtraCare consider to be so serious that they are escalated to senior management as soon as possible these are:

- Victim required medical treatment/intervention because of ExtraCare actions or omissions;
- The death or suspected death of a resident because of abuse or neglect – instances of this nature should also be escalated to the Director of Operations and the Board;
- Police involvement; and
- The victim suffered physical harm because of a medication error, pressure sores or other physical injury.

The responsible manager will monitor and record the ongoing care and wellbeing of the resident during any adult safeguarding enquiry. The outcome of the safeguarding enquiry should be clearly documented in the resident record and on the COLIN system. Where the information is disclosed the safeguarding record should state whether the case was upheld or not.



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### External safeguarding enquiries

Any external safeguarding concern/enquiry received from the local authority should be logged on the internal reporting system COLIN, to monitor the investigation and close out process as well as the outcome of the local authority safeguarding enquiry once established.

The Location Manager, Regional Operations Manager, Organisational Safeguarding Lead and Senior Safeguarding Lead will need to be made aware of any external safeguarding concern raised.

### 7.10 Historic abuse

Abuse that took place when a person was under 18 years old is not an Adult Safeguarding issue but dependant on the concern, could be a child safeguarding issue, irrespective of how old that person is now.

In certain cases, the relevant Children's Social Care department may need to be informed, if for example, the person who caused harm, is considered as a continued risk to other children.

Adults who disclose historical childhood abuse can be advised that this is a crime and that they can still report this to the Police, if they wish to do so.

## 8. Additional arrangements

ExtraCare recognise that involvement in any aspect of identification or reporting of suspected abuse of an adult and/or child at risk can be a difficult experience and we are committed to supporting staff through the process of raising a safeguarding concern.

Location managers, the Senior Safeguarding Lead and/or designated members of the Care Quality Team should offer feedback and support to the member of staff where appropriate.

Staff are advised at induction that ExtraCare provides an Employee Assistance Programme which can be accessed by any member of staff where a trained professional will offer one-to-one support. In addition, staff supervision is a vehicle for staff to reflect and move forward from difficult events through a confidential discussion with their line manager.

### Employee Assistance Programme

**Telephone:** 0800 107 6147

Awareness of this safeguarding policy is covered within the induction programme of all new employees and volunteers and their understanding should be checked within supervision meetings.

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As part of their induction into ExtraCare, all staff will be trained to enable them to understand how to recognise signs of abuse and neglect associated with Adults and Children. The training will also ensure that staff understand their accountability to record and report any safeguarding concerns. Further information is provided in the **Safeguarding guidance** which offers direction to staff following a disclosure.

All location managers and care/registered managers are required to have a detailed understanding of the safeguarding framework and frequently check their teams understanding and compliance to this policy.

All staff, volunteers, students, and Trustees will receive training on safeguarding at a level commensurate with their roles

## 9. Other Relevant ExtraCare Policies & Documents

<b>General</b>	<ul style="list-style-type: none"> <li>Mental Capacity Policy</li> <li>Whistle Blowing Policy</li> <li>DBS Policy</li> <li>Complaints Management Policy</li> <li>Domestic Abuse-Staff Policy</li> <li>Trustee Escalation Framework</li> <li>Duty of Candour Policy</li> <li>Major Incident Policy</li> <li>Data Protection Policy</li> <li>Anti-Harassment and Bullying Policy</li> <li>Equal opportunities Policy</li> <li>Deprivation of Liberty Safeguards Guidance</li> </ul>
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## 10. Relevant Legislative & Regulatory Requirements

Legislation	Regulation	Guidance
The Care Act 2014	<ul style="list-style-type: none"> <li>Care Quality Commission (Registrations) Regulations 2009</li> <li>Making safeguarding personal</li> </ul>	<ul style="list-style-type: none"> <li>SCIE Mental Capacity Act 2005 Guidance</li> <li>The Care Act 2014 emphasises a personalised approach to adult safeguarding that is led by the individual, not by the process. It is vital that the</li> </ul>

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		adult feels that they are the focus and they have control over the process.
Mental Capacity Act 2005	The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014	The Care and Support Statutory Guidance
Care Quality Commission	Regulation 5	<a href="https://www.cqc.org.uk/guidance-providers/regulations/regulation-5-fit-proper-persons-directors">https://www.cqc.org.uk/guidance-providers/regulations/regulation-5-fit-proper-persons-directors</a>
Health and Social Care Act 2012	Prevent Duty Guidance 2015	Social Care Institute for excellence (SCIE) at-a-glance Adult Safeguarding
Safeguarding Vulnerable Groups Act 2006	Protection of Freedoms Bill	<a href="https://www.gov.uk/government/publications/fact-sheet-safeguarding-of-vulnerable-groups-criminal-records-part-5">https://www.gov.uk/government/publications/fact-sheet-safeguarding-of-vulnerable-groups-criminal-records-part-5</a>
The Children Act 2004.	Section 11	<a href="#">Section 11 - Children Act 2004</a>