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COMMITTEE APPROVAL	Risk
OWNER	Head of Safeguarding
EXECUTIVE LEAD	Director of Operations

Adult Safeguarding: Policy and Procedures (including Child Protection)

Place2Be is committed to safeguarding adults in line with national legislation and relevant national and local guidelines. We will safeguard adults by ensuring that our activities are delivered in a way which keeps all adults safe.

Place2Be is committed to creating a culture of zero-tolerance of harm to adults which necessitates: the recognition of adults who may be at risk and the circumstances which may increase risk; knowing how adult abuse, exploitation or neglect manifests itself; and being willing to report safeguarding concerns. This extends to recognising and reporting harm experienced anywhere, including within our activities, within other organised community or voluntary activities, in the community, in the person's own home and in any care setting.

The purpose of this policy is to demonstrate the commitment of Place2Be to safeguarding adults and to ensure that everyone is aware of:

- The legislation, policy and procedures for safeguarding adults.
- Their role and responsibility for safeguarding adults.
- What to do or who to speak to if they have a concern relating to the welfare or wellbeing of an adult within the organisation.

1) Introduction

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Place2Be staff and Counsellor on Placement may encounter adults who are vulnerable or at risk. This may be through our direct work with adults in school settings, or via Parenting Smart, Parenting Skills, HIVE Staffroom. As professionals and employees of Place2Be, there is an ethical duty to safeguard adults who are vulnerable. Where an adult is vulnerable, there is also a need to consider the safety and welfare of any child for whom they have responsibility. Place2Be has a statutory responsibility to take action to safeguard children (e.g. share information or submit appropriate referrals)

There is an Adult Safeguarding Concern form available on Place2Be's School Services System (SSS) to provide staff with a method of recording such concerns and subsequent actions taken.

When adding Adult Safeguarding Concerns to SSS, and that adult is responsible for children, there is, by extension, a Child Safeguarding Concern and this must also be recorded on SSS.

Therefore, on almost all occasions, both Place2Be's Adult Safeguarding and Safeguarding and Child Protection Policy and Procedures will need to be followed.

Safeguarding concerns would include:

- Domestic violence or abuse
- Suicidal ideation or high-risk self-harm
- Serious mental illness such as psychosis, depression or severe post-natal depression
- High-risk substance misuse
- Adults who disclose that they have harmed, or are at risk of harming, either a child or another adult
- Honour-based violence or forced marriage
- Any concerns about radicalisation and extremist views or behaviours must also be reported as a safeguarding concern. Place2Be works in line with Prevent Duty 2015 guidance and will consult with local Prevent Coordinators where necessary

NB: Where someone is 18 or over but is still receiving children's services and a safeguarding issue is raised, the matter should be dealt with through adult safeguarding arrangements

This is not an exhaustive list but is intended to provide examples of situations where a member of staff would need to consider safeguarding issues in relation to an adult.

2) Statutory Definition of an Adult at Risk

The Safeguarding Adults legislation creates specific responsibilities on Local Authorities, Health, and the Police to provide additional protection from abuse and neglect to Adults at Risk.

When a Local Authority has reason to believe there is an adult at risk, they have a responsibility to find out more about the situation and decide what actions need to be taken to support the adult. In Scotland and Wales, the Local Authority can gain access to an adult to find out if they are at risk of harm for example, if that access is being blocked by another person.

The actions that need to be taken might be by the Local Authority (usually social services) and/or by other agencies, for example the Police and Health. The Local Authority role includes having multi-agency procedures which coordinate the actions taken by different organisations.

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England: [Care Act 2014](#) - An adult at risk is an individual aged 18 years and over who:

- a) has needs for care and support (whether or not the local authority is meeting any of those needs) and;
- b) is experiencing, or at risk of, abuse or neglect, and;
- c) as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

This includes adults with learning difficulties, adults with physical disabilities who depend on others to care for them, or adults with certain mental illnesses who lack the capacity to look after themselves. It is recognised that people in this group are vulnerable to abuse and neglect from carers, family members, and institutions as well as from strangers.

Scotland: [Adult Support and Protection Act 2007](#) - An adult at risk is an individual aged 16 years and over who:

- a) is unable to safeguard their own well-being, property, rights or other interests,
- b) is at risk of harm, and
- c) because they are affected by disability, mental disorder, illness or physical or mental infirmity, is more vulnerable to being harmed than adults who are not so affected.

Wales: [Social Services and Well Being Act 2014](#) - An adult at risk is an individual aged 18 years and over who:

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

3) Types of Abuse and Neglect

Abuse is a violation of an individual's human and civil rights by another person or persons. It can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it. Any or all of the following types of abuse may be perpetrated as the result of deliberate intent, negligence, omission or ignorance.

There are different types and patterns of abuse and neglect and different circumstances in which they may take place.

Safeguarding legislation in each home nation lists categories of abuse differently however, they all include the following types of abuse:

- Physical
- Sexual
- Psychological
- Neglect
- Financial

Abuse can take place in any relationship and there are many contexts in which abuse might take place; e.g. Institutional abuse, Domestic Abuse, Forced Marriage, Human Trafficking, Modern Slavery, Sexual Exploitation, County Lines, Radicalisation, Hate Crime, Mate Crime, Cyberbullying, Scams. Some of these are named specifically within home nation legislations.

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4) Other Safeguarding Concerns

Female Genital Mutilation (FGM) - FGM is a collective term for a range of procedures which involve partial or total removal of the external female genitalia for non-medical reasons. It is sometimes referred to as female circumcision, or female genital cutting. The practice is medically unnecessary, is extremely painful and has serious health consequences, both at the time when the mutilation is carried out, and in later life. Any concerns related to FGM fall under this policy and must also be immediately reported as a safeguarding concern.

Forced marriage - In forced marriage, one or both spouses do not consent to the marriage and pressure or abuse is involved. The pressure put on people to marry against their will may be physical (e.g. threats, physical violence or sexual violence) or emotional and psychological (e.g. making someone feel like they are bringing 'shame' on their family). Financial abuse, for example taking someone's wages, may also be a factor. Forced marriage is primarily, but not exclusively, an issue of violence against females.

'So-called' Honour Based Violence - The term 'honour crime' or 'honour-based violence' encompasses a variety of crimes of violence (mainly but not exclusively against women), including assault, imprisonment, and murder where their family or their community is punishing the person. 'So-called' Honour-based violence can also be described as a collection of practices which are used to control behaviour within families or other social groups in order to protect perceived cultural and religious beliefs and / or honour.

They are being punished for (actually or allegedly) undermining what the family or community believes to be the correct code of behaviour. In transgressing this correct code of behaviour, the person shows that they have not been properly controlled to conform by their family and this is to the 'shame' or 'dishonour' of the family.

Self-harm - Self-harm is a broad term that can be used to describe a variety of behaviours that lead to physical harm. These include self-cutting or scratching the skin, burning/branding with cigarettes/lighters, scalding, overdose of tablets or other toxins, tying ligatures around the neck, punching oneself or other surfaces, banging limbs/head and hair pulling (Mental Health Foundation, 2006). It may also include risk taking behaviours where the child / young person is careless for their own safety and there is a risk of physical harm. It also includes neglect of physical health for example young people with insulin dependent diabetes who intentionally miss insulin doses. Self-harm usually occurs in response to emotional distress.

Suicide / Suicide Ideation - The term 'suicide' means an act that is intended to end one's life. Suicidal ideations, often called suicidal thoughts or ideas, is a broad term used to describe a range of contemplations, wishes, and preoccupations with death and suicide (PubMed, 2021). These issues can be caused by many factors, including depression and mental illness, stress, financial problems, relationship breakdown, bereavement and abuse.

5) The Principles of Adult Safeguarding in each home nation

England - [Care Act 2014](#) - The Act's principles are:

- **Empowerment** - People being supported and encouraged to make their own decisions and informed consent.
- **Prevention** – It is better to take action before harm occurs.
- **Proportionality** – The least intrusive response appropriate to the risk presented.

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- **Protection** – Support and representation for those in greatest need.
- **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.

Wales - [Social Services and Well Being Act 2014](#) - The Act's principles are:

- **Responsibility** - Safeguarding is everyone's responsibility.
- **Well-being** - Any actions taken must safeguard the person's well-being.
- **Person-centred approach** - Understand what outcomes the adult wishes to achieve and what matters to them.
- **Voice and control** - Expect people to know what is best for them and support them to be involved in decision making about their lives.
- **Language** - Make an active offer of use of the Welsh language and use professional interpreters where other languages are needed.
- **Prevention** - It is better to take action before harm occurs.

Scotland - [Adult Support and Protection Act 2007](#) - The overarching principle underlying Part 1 of the Act is that any intervention in an individual's affairs should provide benefit to the individual and should be the least restrictive option of those that are available which will meet the purpose of the intervention. This is supported by a set of guiding principles which, together with the overarching principle, must be taken account of when performing functions under Part 1 of the Act. These are:

- The wishes and feelings of the adult at risk (past and present).
- The views of other significant individuals, such as the adult's nearest relative; their primary carer, guardian, or attorney; or any other person with an interest in the adult's well-being or property.
- The importance of the adult taking an active part in the performance of the function under the Act.
- Providing the adult with the relevant information and support to enable them to participate as fully as possible.
- The importance of ensuring that the adult is not treated less favourably than another adult in a comparable situation.
- The adult's abilities, background and characteristics (including their age, sex, sexual orientation, gender, religious persuasion, racial origin, ethnic group and cultural and linguistic heritage).

6) Mental Capacity and Decision Making

UK Law assumes that all people over the age of 16 have the ability to make their own decisions, unless it has been proved that they can't. It also gives us the right to make any decision that we need to make and gives us the right to make our own decisions even if others consider them to be unwise. We make so many decisions that it is easy to take this ability for granted. The Law says that to make a decision we need to:

- Understand information
- Remember it for long enough
- Think about the information
- Communicate our decision

A person's ability to do this may be affected by things such as learning disability, dementia, mental health needs, acquired brain injury and physical ill health.

Most adults have the ability to make their own decisions given the right support however, some adults with care and support needs have the experience of other people making decisions about them and for them. If someone has a disability that means they need support to understand or make a decision this must be provided. A small number of people cannot make any decisions. Being unable to make a decision is called 'lacking mental capacity'.

Mental capacity refers to the ability to make a decision at the time that decision is needed. A person's mental capacity can change. If it is safe / possible to wait until they are able to be involved in decision making or to make the decision themselves.

Mental capacity must also be considered when we believe abuse or neglect might be taking place. It is important to make sure an 'adult at risk' has choices in the actions taken to safeguard them, including whether or not they want other people informed about what has happened, however, in some situations the adult may not have the mental capacity to understand the choice or to tell you their views.

Each home nation has legislation that describes when and how we can make decisions for people who are unable to make decisions for themselves. The principles are the same:

- We can only make decisions for other people if they cannot do that for themselves at the time the decision is needed.
- If the decision can wait, wait – e.g. to get help to help the person make their decision or until they can make it themselves.
- If we have to make a decision for someone else then we must make the decision in their best interests (for their benefit) and take into account what we know about their preferences and wishes.
- If the action we are taking to keep people safe will restrict them then we must think of the way to do that which restricts to their freedom and rights as little as possible.

Each home nation also has legislation about the circumstances in which decisions can be made on behalf of an adult who is unable to make decisions for themselves:

- England and Wales - [Mental Capacity Act 2005](#)
- Scotland - [Adults with Incapacity Act 2000](#)

7) Managing concerns about an adult - procedure

Where Place2Be staff or a Counsellor on Placement is concerned about the safety or welfare of an adult, the following steps must be taken:

7.1 Wherever possible, the Place2Be staff member or Counsellor on Placement should relay to the adult that they are concerned, and seek to empower the adult to take action themselves. There should be a discussion regarding the sharing of information and the reasons for this, and consent should be obtained if possible. If the Place2Be staff member is relaying information about an adult to a GP for example, they should seek the adult's consent to information being shared. There may be circumstances in which this discussion should not take place, for example, if it would place the Place2Be staff member at immediate risk. It may also be necessary to go against the expressed wishes of the adult in relation to making a referral (e.g. if there are child protection concerns).

7.2 If Place2Be staff become concerned about their own safety whilst working with an adult, they must inform their Area Manager and the school's Headteacher of these concerns

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7.3 Place2Be staff must document their concerns using the Adult Safeguarding Form on SSS immediately after the session

7.4 Place2Be staff must immediately inform their Area Manager of their concerns. If their Area Manager is not available, the Regional Director must be consulted. If the Regional Director is not available, the Place2Be Safeguarding Team or the Director of Operations must be consulted.

7.5 The Place2Be staff member should agree a course of action with their Area Manager. This could include the following:

- referral to GP
- referral to Community Mental Health Team
- referral to Health Visitor
- referral to Police
- referral to Adult Social Care
- referral to other agencies, such as a substance-misuse team or domestic violence service

The discussion with the Area Manager must also include consideration of whether there are child protection issues that need addressing.

If there is uncertainty about which agency to refer to, the member of staff must try to resolve this as soon as possible and if in doubt consult their Area Manager. It may be appropriate to seek guidance from a local 'gateway' service, such as a Community Mental Health Team. Arrangements should be made to obtain feedback from the agency to which the referral was made.

7.6 The Place2Be staff member should, if possible, feed back to the adult about which referrals have been made.

7.7 The Place2Be staff member must ensure that the Adult Safeguarding Concern is input onto SSS and regularly updated with actions.

7.8 An Adult Safeguarding Concern can be deemed 'Agreed Actions Taken' when:

1. A referral is made to another agency and the agency has responded to this referral

and / or
2. Place2Be are satisfied that the response/actions have been sufficient to safeguard the adult

and / or
3. The adult concerned has taken appropriate action themselves in order to protect themselves or reduce their vulnerability

For safeguarding advice / guidance and reporting, staff and Counsellor on Placement should contact their line-managers in the first instance. In cases when they are not available, they should contact the Place2Be Safeguarding Team:

Head of Safeguarding - Sharon Cole – 07808 639629
Deputy Head of Safeguarding – Daniel Jarrett- 07810 856013
Safeguarding Officer – Verity Coles – 07976 227073
Safeguarding Officer – Chaya Patel – 07976 272663
Safeguarding Officer – Emma Geiringer - 07976 210626

8) Working Virtually

Safeguarding of those who avail of our services is a fundamental role we all play. This is true when we are working face to face, remotely or virtually. Our policies and procedures remain the same irrespective of how we are delivering our services.

To read the full guidance on working remotely and virtually, please [click here](#).

9) Information Sharing

Place2Be should explain to adults at the outset of any work that it may be necessary to share information where there are serious concerns about their safety or welfare, or where there are child protection concerns. This is part of the contracting with the client.

It is recognised that breaching the confidentiality of an adult’s counselling work can raise ethical questions. Concerns about such issues should be discussed with line-managers (or Regional Directors if Area Managers are not available), so that a decision can be made about a proportionate response to concerns.

Wherever there are concerns about the welfare of a child, the need to protect the child overrides the confidentiality of the counselling work, and professionals have a duty to share information and submit referrals if necessary. The welfare of the child is always paramount.

If Place2Be staff are seriously concerned about the welfare of an adult, it is appropriate to seek specialist help for that person, and to submit appropriate referrals in response to potential risks to that person.

10) Adult Safeguarding and Child Protection

Where there are serious concerns about the safety of an adult, it is generally inevitable that there will be concerns about their children. Place2Be’s Safeguarding and Child Protection Policy must therefore also be followed and this can be accessed by all staff on the intranet.

If an adult discloses that they were abused as a child and the Place2Be staff member suspects that the perpetrator continues to present a risk to children, this must be raised as a safeguarding concern.

At Place2Be, the designated lead for Safeguarding, Child Protection, and Vulnerable Adults is Sharon Cole, Head of Safeguarding, who reports directly to Place2Be’s Director of Operations.

Place2Be’s Safeguarding Team are available to all staff for advice and guidance. In the first instance, staff and Counsellors on Placement should consult with their Line Managers, where ever possible.

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Adult Safeguarding Flowchart

