

A WAY OUT

SAFEGUARDING ADULTS POLICY

Contents	Page
1. Introduction	2
2. Purpose	2
3. Scope	2
4. Policy Statement	3
5. Legal Framework	3
6. Who this Policy Applies To	3
7. Partnership Working	3
8. What We Mean by Adult Safeguarding	4
9. Types of Abuse and Neglect	5
10. Principles	6
11. Key Roles and Responsibilities	6
12. Related Policies and Procedures	10
13. Links to Useful Websites	11
14. Appendix – Glossary	9

1. Introduction

Safeguarding is 'everyone's business'

A Way Out has a duty of care to safeguard and promote the welfare of adults who use its' services and is committed to protecting an adult's right to live in safety, free from abuse and neglect. Safeguarding processes will be person-led, outcome focussed and enhance an individual's involvement, choice and control together with seeking to improve quality of life, wellbeing and safety.

2. Purpose

The purpose of this policy is to outline the principles and definitions that underpin safeguarding work and to describe the statutory duties set out under the Care Act 2014. The policy is linked to:

- Safeguarding Children Policy
- Information Sharing Policy
- Data Protection Policy
- Confidential Reporting Policy
- Confidentiality Policy

3. Scope

This policy sets out the responsibilities of A Way Out to protect adults from abuse or neglect. The safeguarding duties apply to any adult who:

- has needs for care and support (whether or not the Local Authority is meeting any of those needs) and;
- is experiencing, or at risk of, abuse or neglect; and
- 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.

The adult experiencing, or at risk of abuse or neglect will hereafter be referred to as the **adult** throughout this policy document.

For the purposes of this policy an adult is a person, aged 18 years and over who is at a greater risk of suffering abuse or neglect because of physical, mental, sensory, learning or cognitive illnesses or disabilities; and substance misuse or brain injury, and includes:

- those who purchase their care through personal budgets
- those whose care is funded by Local Authorities and/or health services
- those who fund their own care
- informal carers, family and friends who provide care on an unpaid basis
- adults who are in prison or living in approved premises on licence
- those aged between 18 and 25 years and in receipt of children's services
- informal carers, family and friends who provide care on an unpaid basis

4. Policy Statement

A Way Out works in partnership to safeguard and promote the wellbeing and independence of adults living in the Tees Valley region, who are experiencing, or at risk of abuse or neglect.

5. Legal Framework

This policy has been developed within the context of the law and guidance that seeks to protect adults including:

- [The Care Act 2014](#)
- [Care Act 2015 Statutory Guidance - revised March 2016](#)
- The [Mental Capacity Act 2005](#) (including Deprivation of Liberty Safeguards)
- The [Human Rights Act 1998](#)
- The [Equality Act 2010](#)
- [Mental Health Act 1983](#) and the [New Code of Practice 2015](#)
- [Serious Crime Act 2015](#)
- [Modern Slavery Act](#)
- [Criminal Justice and Courts Act 2015](#)
- [Statutory Guidance on Female Genital Mutilation](#)

Further links to useful websites can be seen at page eight.

6. Who this Policy Applies To

This policy applies to all people working or volunteering with adults within A Way Out across all of the project and service areas that work with adult service users. We are committed to the training and development of all staff and volunteers and participate in training delivered by the Teeswide Safeguarding Boards which provides us with quality accurate and up to date information and guidance.

Our safeguarding policy and procedures align with the Teeswide inter agency Safeguarding Adults Policy and Procedures

7. Partnership Working

We work closely with a variety of partner agencies across the statutory, voluntary and private sectors and are members of a number of multi-agency forums that seek to work collectively to safeguard adults. Our collaborative approach helps us to protect, prevent and identify safeguarding issues for the vulnerable and at risk women and families that we work with.

We have partnership agreements and arrangements set up with a range of agencies and services across the Stockton area:

- Drug and alcohol treatment providers
- Supported housing providers
- Housing Options
- Police
- Social services
- Mental health support providers
- Domestic abuse specialists
- Sexual Health
- Independent Sexual Violence Advisers
- Probation
- Low Newton Prison
- CAB and other debt and money advice agencies
- The Local Authority
- Health care providers

8. What We Mean by Adult Safeguarding

The Care Act 2014 Guidance describes safeguarding as the means of protecting an adult's right to live in safety, free from abuse and neglect. It further states that 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. Within this context, the guidance recognises that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances. The consideration of mental capacity is crucial at all stages of safeguarding to adults, providing a balance and independence for protection. Mental capacity is the ability to make decisions for yourself whether they are every day decisions such as what to wear or a more important decision around where to live those who cannot do this are said to 'lack capacity'. Informed consent requires more than the capacity to make decisions, it is the process of communication that leads to an agreement or permission for care, treatment or services, with the right to request information and ask questions.

Abuse and neglect can take many forms and it is important that staff should not be constrained in their view of what constitutes abuse or neglect, and the circumstances of an individual case should always be considered.

It should be emphasised however that safeguarding procedures are not a substitute for:

- Providers' responsibilities to provide safe and high quality care and support;
- Commissioners regularly assuring themselves of the safety and effectiveness of commissioned services;
- The [Care Quality Commission](#) (CQC) ensuring that regulated providers comply with the fundamental standards of care or by taking enforcement action
- The core duties of the police to prevent and detect crime and protect life and property.

Abuse or Neglect may be:

- a single act or repeated acts
- multiple in form
- an deliberate act of neglect or a failure to act
- an opportunistic act or a form of serial abusing where the perpetrator seeks out and grooms the individual(s)

The Department of Health Care and Support Statutory Guidance issued under the Care Act 2014 sets out the different types and patterns of abuse and neglect, though stresses that the list is not exhaustive, and describes the different circumstances in which they may take place.

9. Types of Abuse and Neglect

<p>Physical Abuse</p> <p>Including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.</p> <p>Signs: multiple bruising, fractures, burns, untreated injuries, fear, depression</p>	<p>Financial or Material Abuse</p> <p>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.</p> <p>Signs: unexplained shortage of money, fraud, theft, unpaid bills, missing personal possessions,</p>
<p>Sexual Abuse</p> <p>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</p> <p>Signs: unexplained venereal or genital infections, torn, stained or bloody underclothing, bruising around breasts or genital area, unexplained vaginal or anal bleeding, reporting being sexually assaulted or raped.</p>	<p>Psychological Abuse</p> <p>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.</p> <p>Signs: fear, depression, confusion, unexpected change in behaviour, deprivation of liberty ie false imprisonment,</p>
<p>Modern Slavery</p> <p>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.</p> <p>Signs: evidence of a workplace being used for accommodation, workers are distrustful of authorities, workers look uneasy, unkempt or malnourished, untreated injuries, evidence of control over movement (ie picked up and dropped off in groups)</p>	<p>Discriminatory Abuse</p> <p>Including forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion.</p> <p>Signs: verbal abuse, inappropriate language, harassment, deliberate exclusion, failure to take into account religious and cultural needs of an individual, lack of disabled access, unequal treatment based on protected characteristics, not allowing access to an interpreter, signer or lip reader</p>
<p>Organisational Abuse</p> <p>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</p>	<p>Neglect and Acts of Omission</p> <p>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</p>

<p>result of the structure, policies, processes and practices within an organisation.</p> <p>Signs: poor standards of care, lack of flexibility and choice for service users, lack of personal clothing and possessions, communal use of personal items</p>	<p>medication, adequate nutrition and heating</p> <p>Signs: malnutrition, untreated medical problems, unsanitary or unclean living conditions (dirt, fleas, lice on person, soiled bedding, inadequate clothing, fecal/urine smell)</p>
<p>Self-Neglect</p> <p>This covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding.</p> <p>Signs: dehydration, malnutrition, untreated medical problems, poor personal hygiene, hazardous or unsafe living conditions, unsanitary or unclean living conditions (animal/insect infestation, no functioning toilet, fecal or urine smell), inappropriate/inadequate clothing, not taking medication properly</p>	<p>Domestic Abuse</p> <p>Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can be, but not limited to: psychological, sexual, financial and emotional.</p> <p>Signs: physical injuries, excuses for frequent injuries, stress, anxiety or depression, low self esteem, lack of independent communication, self blame, lack of money</p>

10. Principles

Six key principles underpin all safeguarding adult work:

The Department of Health Care and Support Statutory Guidance issued under the Care Act 2014, describes six principles that underpin all safeguarding adult work which applies to all sectors and settings including care and support services, further education colleges, commissioning, regulation and provision of health and care services, social work, healthcare, welfare benefits, housing, wider Local Authority functions and the criminal justice system. These principles should always inform the ways in which professionals and other staff work with adults.

Empowerment	People being supported and encouraged to make their own decisions and informed consent. <i>"I am asked what I want as the outcomes from the safeguarding process and these directly inform what happens."</i>
Prevention	It is better to take action before harm occurs. <i>"I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help."</i>
Proportionality	The least intrusive response appropriate to the risk presented. <i>"I am sure that the professionals will work in my interest, as I see them and they will only get involved as much as needed."</i>
Protection	Support and representation for those in greatest need. <i>"I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want."</i>

Partnership	Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse. <i>"I know that staff treat any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me."</i>
Accountability	Accountability and transparency in delivering safeguarding. <i>"I understand the role of everyone involved in my life and so do they."</i>

It is the responsibility of staff and volunteers to ensure their behaviour meets the standards as set out in the HR policies and procedures document to ensure their actions do not threaten the health and safety of others, that they are not impaired through alcohol or drugs, use social media sites appropriately and responsibly and maintain high standards outside of work. Safe recruitment processes are in place, staff receive annual safeguarding training, safeguarding is an agenda item in team meetings and supervisions and regular risk assessments are carried out with staff and service users. Team Leaders/Co-ordinators ensure compliance by regular monitoring, SMT review safeguarding at monthly operational meetings and on a weekly basis during their flash meetings. There is an annual audit of safeguarding practices and processes which is reported to the Board.

11. Key Roles and Responsibilities

All staff and volunteers have a duty to report suspected abuse or neglect without delay taking due care and attention and guidance from Team Leaders and Adult Safeguarding Leads as stated below. You should not:

- promise to keep abuse a secret
- alert the abuser as this could make matters worse and make it difficult to help the person
- delay in reporting the abuse straight way.

Safeguarding Lead

Should you identify or suspect abuse or neglect or someone tells you that this is happening you should speak straight away to your Safeguarding Lead to make them aware of the situation prior to escalating the concern. Keeping your Safeguarding Lead informed of your concern allows them to appropriately manage the service/staff/service users safely in conjunction with your concern and to provide support to you whilst you report and record and take action.

Adult and Child Safeguarding Lead

The Adult and Child Safeguarding Lead in the organisation is

- Chief Executive – Sarah McManus (sarah.mcmanus@awayout.co.uk)
- Adult and Children Protection Officers
 - Sue Willoughby – Operations Manager (susan.willoughby@awayout.co.uk)
 - Victoria Adamkiewicz – Team Leader (Victoria.adamkiewicz@awayout.co.uk)
 - Charlotte Gibbon – Team Leader (Charlotte.Gibbon@awayout.co.uk)

The decision to escalate a case to a statutory should normally be made in conjunction with the Adult Safeguarding Lead and in most instances this may not be the action that is recommended by them. More information may be needed from other partner agencies or to be collected and monitored or guidance may be required from the Local Authority. The Adult Safeguarding Lead will use the "Decision Support Guidance" to assist in the assessment of the safeguarding concern in terms of seriousness and level of risk.

Any action taken will be proportionate to the level of presenting risk of harm and be driven by the desired outcomes of the adult or their representatives. The Adult Safeguarding Lead will use their professional judgement to consider the views of the adult at risk and where appropriate seek consent for sharing information on a multi-agency basis. If there is any doubt on how to proceed guidance should be sought from the Local Authority.

The Adult Safeguarding Lead may after reviewing the concern with you advise you to:

- Contact the local Adult Social Care Team 01642 527764
- Contact the Police directly if you believe that a crime has been committed or is about to on 101 or 999 in an emergency
- Monitor the case only or take some additional internal actions or alongside other partner agencies.
- Discuss what provision has been put in place to keep the adult safe now if they are in imminent danger or what should be put in place to help them to stay safe

Contact Statutory Agency

The Police and/ Adult Social Care Team should this be the recommended route will make sure that the right people investigate the abuse to help safeguard the adult. They will listen to you and provide you with good advice. A Concern Form at Appendix 2 is attached that will need to be completed when reporting an adult safeguarding concern to Stockton Adult Social Care Team

When you contact your local Adult Social Care Team you will be asked to give the name and address of the adult. You will be asked to describe the concerns you have and if the adult knows you are making contact regarding this matter. The adult must be involved from the beginning of safeguarding procedures unless there are exceptional circumstances and where possible their consent should be sought prior to concerns being shared on an inter-agency basis. The adult's (or their representative's) views and wishes including their desired outcomes must be considered as part of the ongoing procedures/enquiry.

You will be asked about how you are keeping the adult safe now if they are in immediate danger or what your plans/ measures are for helping the adult to stay safe. It is important that you have discussed and agreed a plan with the Adult Safeguarding Lead around this. A qualified, experienced professional, or a team of professionals, will investigate the concerns, taking into account the wishes and choice of the adult. They will seek to ensure that the adult is protected and that she/he receives any medical or other care they may require

Adult who has been or is at risk of abuse or neglect

The adult must be involved from the beginning of safeguarding procedures unless there are exceptional circumstances, and where possible their consent should be sought prior to concerns being shared on an inter-agency basis. The adult's (or their representative's) views and wishes including their desired outcomes must be considered as part of the ongoing procedures (Enquiry).

Family involvement

Where the adult has mental capacity, involvement of family, friends or informal carers should be agreed with the adult. In any case where the adult does not have mental capacity, family, friends or informal carers must be consulted in accordance with the Mental Capacity Act 2005.

The Local Authority has a duty to involve an appropriate person to facilitate an adult's involvement in the safeguarding adult's process if it is deemed that they would have substantial difficulty in participating themselves.

Advocacy

As part of the safeguarding adults procedure consideration must be given as to whether the adult may benefit from the support of an independent advocate.

Where the adult has substantial difficulty in participating in the safeguarding adults process, and there is no other appropriate person to assist them, under the Care Act 2014 independent advocacy must be arranged by the Local Authority. The details of local arrangements for advocacy are held by each Local Authority.

Information Sharing

A Way Out is part of and signed up to a specialist Substance Misuse Community Information Sharing Agreement in Stockton which works alongside and is connected to the safeguarding policy and procedures to help prevent, protect and put an end to abuse or neglect. The agreement sets out how and in what circumstances information identifying clients may be shared. It also details the Acts and the Caldicott Principles that govern how to do this lawfully.

A concern or issue should be reported to funders of the service if there is likely to be reputational damage to the organisation.

The Safeguarding Adults policy is linked to A Way Out's Information Sharing Policy outlining that information will only be shared on a "need to know" basis when it is in the interest of the adult. Informed consent should be obtained but it might be appropriate to share information without the adult's consent if:

- This is in the adult's 'best interest' (they do not have the mental capacity to make a relevant decision)
- This is in the adult's 'vital interest' (there is a continued risk of significant harm)
- This is in the 'public interest' (others are or may be at risk)

Record Keeping

It is essential to maintain and make clear, concise and accurate notes in a timely manner to enable swift and appropriate action to be taken and accurate advice to be obtained. This will assist when considering what action is needed. The completion of AWO Doc 12 – Abuse Concern Form at Appendix 1 should be completed within 24 hours of a concern being flagged with the Adult Safeguarding Lead regardless of the outcome. This will ensure that all the appropriate information has been correctly logged and will enable the safeguarding concern to be monitored and tracked allowing repeated, low level harm incidents to be easily identified and subsequently referred. These forms should be saved onto the central recording system for all individual services.

Sensitive personal data should be stored in line with the Information Sharing and Data Protection Policies

Management Arrangements

Every month each service area during their team meeting will discuss safeguarding concerns, practices and cases. Safeguarding is a standard agenda item discussed and reviewed each month by each project to continuously improve and better meet the needs of adults around safeguarding.

Every month the Senior Management Team (SMT) also discuss any issues/concerns that have arisen during team meetings around safeguarding. The Board of Trustees has a nominated Safeguarding Champion who is currently a practicing Social Worker who advises and ensures alongside Senior Managers that safeguarding concerns are considered as part of the Board's decision making and who will inform alongside SMT Trustees of any changes in legislation/practice/regulation in this area.

We have confidential reporting and disciplinary policies and procedures that enable staff and volunteers to report any safeguarding concerns that they may have that are being caused by other staff or volunteers to ensure appropriate controls and measures are in place to identify, report and address this.

Monitoring Arrangements

Team Leaders carry out monthly case file reviews including associated documents to ensure compliance with policy and procedures and consistency across the team. Every 6 months Abuse Concern Forms are reviewed and shared with the team to understand any patterns/trends, action taken, multi-agency responses, lessons learnt and outcomes for the adult. Staff sign and date to confirm they have read and understood new or revised policies and are supported by Team Leaders/Co-ordinators when monitoring delivery.

Senior Management Team review every 6 months the position with the Abuse Concern Forms following a review by the Team Leaders and their teams as above. Outcomes are reviewed and any appropriate recommendations and learning passed across to the service areas. Annual evaluation and monitoring reports of the same are considered by the Board of Trustees to provide the Board with assurance around safeguarding practices at A Way Out.

HR Practices

A Way Out has arrangements in place to ensure safe recruitment of staff and volunteers (including staff employed on a temporary basis or via an agency). This includes

- having a formal application and interview process
- obtaining suitable references
- obtaining a satisfactory Disclosure and Barring Service (DBS) check at an appropriate level where applicable
- providing an induction, training and review for new staff/ volunteers
- annual mandatory safeguarding training

All job descriptions contain a requirement which will vary depending on level of responsibility around safeguarding. Recruitment practices involve at interview questions and scenarios around safeguarding prioritising this area as a key commitment for the organisation.

Induction programmes for new staff cover training and development in this area to ensure that we have suitably qualified and skilled staff to deliver in line with the Safeguarding Policy requirements to help empower, prevent and protect the adults that we work with to be free from abuse, harm and neglect. Updated policies and procedures will be shared with staff by Services Managers and discussed in team meetings and supervision sessions. Appraisals take place annually and look to assess safeguarding practices and delivery for each member of staff.

Training is secured through the local safeguarding boards for staff, volunteers and Trustees and where required guidance is requested from the same to further underpin our commitment to safeguard the adults that we support.

Lone Working

A Way Out Lone Working Policy is in place, supporting staff and volunteers to assess and control risk, put appropriate measures in place including safe working arrangements in office and community locations and use of technology (including mobile phones and lone working devices). This is managed and monitored through safeguarding leads on a daily basis.

Public Awareness & Whole Community Approach

We provide tailored support to each and every member of the public that we work with. Safeguarding, consent, confidentiality and information sharing are all areas that we engage our clients with providing bespoke advice and guidance that best suits their needs and empowers them to be part of the process; informs their decision making allowing them to have choice and control and respects their rights.

We proactively promote the service that we offer on our website, information leaflets, twitter, Facebook, at multi agency forums and community events reinforcing our commitment to prevent the harm and exploitation of the vulnerable and at risk women, families and young people we work with through a person centred service delivery model of reach, engage and empower.

Equal Opportunities and Diversity

We are committed to equality and diversity, every person supported will have their individual needs comprehensively addressed and will be treated equally and without discrimination through referral, assessment and support processes. We adopt the principles of fairness, respect, equality, dignity and autonomy, support by our Equality, Inclusion and Diversity Policy

12. Related Policies and Procedures

Safeguarding Children

Local Child Protection Procedures apply to people who are under the age of 18. More information can be found at:

www.hsscp.co.uk

Domestic Abuse (MARAC)

The role of the Multi-Agency Risk Assessment Conference (MARAC) is to provide a consistent approach to the risk assessment of those individuals that have been identified at the highest risk of serious harm from domestic abuse in order to safeguard them and to enable appropriate actions to be taken to increase public safety.

The MARAC facilitates, monitors and evaluates effective information sharing between representatives of the local police, probation, health, child protection, housing practitioners, Independent Domestic Violence Advisors (IDVAs) and other specialists from the statutory and voluntary sectors and works on the assumption that no single agency or individual is able to see the complete picture of the life of a potential victim, but all may have insights that are crucial to their safety. The MARAC arrangements on Tees follow national guidance.

A new offence of coercive and controlling behaviour in intimate and familial relationships was introduced into the Serious Crime Act 2015. The offence imposes a maximum 5 years imprisonment, a fine or both. The offence closes a gap in the law around patterns of coercive and controlling behaviour during a relationship between intimate partners, former partners who still live together, or family members.

Multi Agency Public Protection Arrangements (MAPPA)

Inter-Agency Public Protection Arrangements are a set of arrangements to manage risk posed by the most serious sexual and violent offenders under the provisions of the Criminal Justice Act 2003. They bring together the Police, Probation and Prison Services into MAPPA responsible authorities. A number of other agencies are under a duty to co-operate (DTC) with the responsible authority including Social Services and Health Trusts. Like MARAC, there is no local aspect to MAPPA and the national arrangements can be seen at: [Multi-Agency Public Protection Arrangements](#).

Hate Crime

Hate crime involves any criminal offence which is perceived by the victim or any other person to be motivated by hostility or prejudice based on a personal characteristic. The definition covers five main strands:

- disability
- gender identity
- race
- religion or faith
- sexual orientation

Cleveland Police has launched a new website for victims of hate crime which includes an online reporting form to enable victims to report hate crime online. The website, called True Vision, is supported by all police forces in England, Wales and Northern Ireland and provides information for victims and the public about what hate crime is and why it is important to report

it, together with setting out the range of ways hate crimes can be reported, including via a new online reporting form. The site also provides links to organisations that can offer support and advice on hate crime related issues and can be accessed at: [True Vision](#).

Mate Crime

Mate Crime is the exploitation, abuse or theft from an adult by those they consider to be their friends. Those that commit such abuse or theft are often referred to as 'fake friends'." Mate crime is most prevalent when the victim suffers with a mental disability and is especially common when that disability is Autism or Asperger's. Further information can be found via <https://www.mencap.org.uk/advice-and-support/bullying/mate-and-hate-crime>

PREVENT

The Counter-Terrorism and Security Act 2015, incorporates a duty for those authorities listed in Schedule 6 of the Act to have due regard to the need to prevent people from being drawn into terrorism. Authorities listed in Schedule 6 of the Act include; Local Authorities, Health Trusts, Foundation Trusts, Prisons, Schools and educational establishments. The Act makes provision in relation to terrorism and specifies that agencies must monitor their PREVENT activity and evidence that mechanisms are in place to identify risk, to record potential risks, to raise awareness and incorporate appropriate training. PREVENT aims to stop people becoming terrorists or supporting terrorism.

A Counter Terrorism Local Profile is produced annually by the Police and across Tees a PREVENT action plan has been developed. Part of this action plan relates to the Channel Programme. This highlights the need for Local Authorities to liaise with the appropriate agencies if they have concerns regarding vulnerable people whom they believe have the potential to be influenced or radicalised. In the event of any concerns being highlighted a 'Channel Panel' is convened, which brings together the necessary partner agencies, including Local Authorities, Police and CCGs.

The PREVENT/ Channel referral process can be found here:

<https://www.gov.uk/government/publications/channel-guidance>

Please see staff handbook for **Employee Terms and Conditions** relating to:

- Safeguards and standards
- Convictions and offences
- Behaviour at work and outside
- Rules covering unsatisfactory conduct and misconduct

13. Links to Useful Websites

<https://www.tsab.org.uk/>

Making sure the Care Act works

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/365345/Making_Sure_the_Care_Act_Works_EASY_READ.pdf

'What the Care Act 2014 will mean for safeguarding a legal view'

<http://www.communitycare.co.uk/2014/03/03/care-act-2014-will-mean-safeguarding-legal-view/>

Age UK fact sheet: Safeguarding Older People from Abuse

http://www.ageuk.org.uk/Documents/EN-GB/Factsheets/FS78_Safeguarding_older_people_from_abuse_fcs.pdf?dtrk=true

North East Safeguarding Adults Network

<http://www.safeguardingadultsne.com/>

Links to Safeguarding Adult Boards around Britain

<http://www.childprotectioncompany.com/CPC/local-safeguarding-adults-boards>

The Office of the Public Guardian's policy on protecting adults at risk of abuse or neglect

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/349100/OPG_safeguarding_policy.pdf

Safeguarding vulnerable adults – a tool kit for general practitioners

<http://bma.org.uk/-/media/Files/PDFs/Practical%20advice%20at%20work/Ethics/safeguardingvulnerableadults.pdf>

NCVO Safeguarding Resources at; <https://knowhow.ncvo.org.uk/safeguarding/>

14. Appendix

Glossary

CCG	Clinical Commissioning Group
CPS	Crown Prosecution Service
CQC	Care Quality Commission
CSP	Community Safety Partnership
DH	Department of Health
DTC	Duty to Co-operate
DWP	Department of Work and Pensions
HBC	Hartlepool Borough Council
HWB	Health and Wellbeing Board
IDVA	Independent Domestic Violence Advisor
IMCAs	Independent Mental Capacity Advocates
LSCB	Local Safeguarding Children's Board
MAPPA	Multi-Agency Public Protection Arrangements
MARAC	Multi-Agency Risk Assessment Conference
MBC	Middlesbrough Borough Council
MCA	Mental Capacity Act
MHA	Mental Health Act
MHA COP	Mental Health Act Code of Practice
MSP	Making Safeguarding Personal
NEAS	North East Ambulance Service
NHS	National Health Service

No	<i>Policy Document Change History</i>	<i>Date</i>	<i>Who</i>
11	Updated safeguarding leads	08/21	KB
10	Policy Reviewed and updated	01-21	SMT
9	Recruitment stipulations	12/11/20	AB
8	Policy Reviewed and updated	13/02/2020	LH
7	Safeguarding board and web links updated	Aug 2019	AB
6	Reviewed	June 2018	SMT
5	Policy re-written and re named (from Vulnerable Adults & Reporting Abuse to Safeguarding Adults)	May 2017	SMc
4	Reviewed	01/06/16	AB
3	Job titles updated	01/06/15	AB
2	Job titles updated	24/06/14	RP
1	Reviewed	20/05/12	RP
N	Initial release	31/07/12	RP

QSG
RCBC
SAB
SAR
SBC
TSAB

Quality Surveillance Group
Redcar & Cleveland Borough Council
Safeguarding Adults Board
Safeguarding Adults Review
Stockton-on-Tees Borough Council
Teeswide Safeguarding Adults Board

Tees

Refers to the boroughs of Hartlepool, Middlesbrough, Redcar & Cleveland and Stockton-on-Tees

