



Adults at Risk Protection Policy

Introduction

Elmbridge Borough Council is committed to practices that protect adult at risks from harm and treat them with dignity and respect. At the same time the Council will protect its staff and elected members from the risk of unfounded allegations. We will seek to ensure that any adult at risk receiving services from the council can access council services in safety without fear of abuse.

This policy is designed to work in conjunction with Surrey Multi-Agency Adult Protection Procedures which is available on Surrey County Council's website:

www.surreycc.gov.uk

Elmbridge Borough Council will seek to implement its policy on the protection of adult at risks by:

- Ensuring that all staff who have regular, direct and unsupervised contact with adult at risks are carefully selected providing two written references and that, staff and appropriate elected members complete a Criminal Records Bureau check. Staff and appropriate elected members will receive basic training, accredited where necessary. All Elected members must understand the adult protection process.
- Ensuring that all our contractors who have regular, direct and unsupervised contact with adult at risks have effective policies and procedures in place.
- Ensuring that organisations that apply for grant aid for programmes that include adult at risks (funding or premises) have effective policies and procedures in place.
- Giving all the parties involved and the general public information about what they can expect from the council in relation to protecting and safeguarding adult at risks.
- Ensuring that there is a clear complaint procedure in place that can be used if there are any concerns.
- Sharing information about concerns with appropriate agencies and involving adult at risks and their carers as appropriate.

Who is an adult at risk?

The term **adult at risk** refers to anyone **aged 18 and over** who:

- Is or may be in need of Community Care Services by reason of mental or other disability, age or illness; and
- Is or may be unable to take care of himself or herself and; or
- Is unable to protect themselves against significant harm or exploitation.

'Who decides' Lord Chancellors Office 1997

No Secret 2000

Whether or not a person is vulnerable in these cases will depend upon surrounding circumstances, environment and each case must be judged on its own merits.

What is abuse?

Abuse is a violation of an individual's human and civil rights by any other person or persons or organisation. Abuse may consist of a single act or repeated acts. It may be physical, verbal or psychological, it may be an act of neglect or omission to act or it may occur where a vulnerable person is persuaded to enter into a financial or sexual transaction to which he or she has not consented, or cannot consent.

Any act of abuse, repeated or singular, is a violation of the Adult at risk's human and civil rights

Context

Abuse of adult at risks can occur in any setting or any situation and can be a complex area of work. Abuse may occur in domestic, institutional and public settings:

- ◆ Domestic settings: including their own home, or another person's home.
- ◆ Institutional settings: including day care, residential care, nursing homes and hospitals.
- ◆ Public settings: including in the street, any public area or social or work environment.

Abuse of adult at risks occurs in all cultures, all religions and all levels of society.

The abuser may be anyone, including a member of the family, friend, neighbour, partner, carer, stranger, care worker, manager, volunteer, another service user or any other person who comes into contact with the adult at risk.

Statement of principles

The following principles have been adopted by all agencies and professionals working together to protect adult at risks.

1. All adult at risk have a right to be protected and their decisions respected even if that decision involves risk.
2. The prime concern at all stages will be the interests and safety of the adult at risk.
3. The aim will be to give a professional service to support and minimise the distress of any adult at risk.
4. Everyone will be treated sensitively at all stages of the investigation.
5. The importance of professionals working in partnership with the adult at risk and others involved will be recognised throughout the process.
6. All services will be provided in a manner that respects the rights, dignity, privacy and beliefs of all the individuals concerned and does not discriminate on the basis of race, culture, religion, language, gender, disability, age or sexual orientation.
7. Adults who have been abused need the same care and sensitivity whoever the alleged abuser.
8. The responsibility to refer the adult at risk rests with the person who has the concern.
9. All agencies receiving confidential information in the context of an adult at risk investigation will make decisions about sharing this information in appropriate circumstances.
10. Procedures provide a framework to ensure that agencies work together for the protection of the adult at risk. They are not a substitute for professional judgement and sensitivity.
11. Adult at risk has the right to have an independent advocate if they wish, at any stage in the process.

Code of Good Practice

To help prevent abuse occurring and false allegations arising, the following basic guidelines will help safeguard both the adult at risk and staff.

You must:

- Treat all service users with dignity and respect
- Provide an example of good conduct you wish others to follow
- Challenge unacceptable behaviour e.g. bullying and report all allegations/suspicions of abuse
- Be identifiable and wear a name badge at all times

You must not:

- Have unwarranted contact with an adult at risk
- Make any comments, which may have a sexual connotation.

There may be exceptional circumstances where it is necessary to restrain the adult at risk to prevent them from damaging themselves or others. Only the minimum reasonable force necessary may be used. All incidents of physical restraint must be recorded on an incident form and be submitted to a nominated officer and the Health and Safety Officer

Code of Conduct

EBC has an Employee [Code of Conduct](#) which is designed to protect and safeguard the position of individual members of staff as much as those of the Council. This is issued to all new starters, and is available on the Council's internal website (Bridge-It)

Recruitment

Employees will be recruited in accordance with guidelines from the Disclosure and Barring Service (DBS).

Organisational Development have identified the positions on the Council establishment list that require a DBS check, in order to identify those who may be unsuitable for this type of work. DBS checks will indicate convictions, cautions, formal reprimands and final warnings and will contain non-conviction information from local police records, which may be relevant to the position sought.

Training

Induction Training for new employees and members

All new employees will attend induction training that includes adult at risk protection information and good practice guidelines when working with adult at risk. Staff will also be provided with leaflets. This will ensure that all staff are aware of the adult at risk policies and will know how to refer concerns via the appropriate routes.

All employees undertake the equality and diversity modules on Bridge-It, within three months of appointment. Organisational Development will run a quarterly report to ensure that this is carried out. Employees who cannot access the e-training will have brief training provided by their managers in team meetings. Those who have regular contact with members of the public as part of their job will then undertake the half day adult at risk training as soon as possible after employment and may require further training dependent on their duties.

All councillors will be invited to attend training that includes adults at risk information and good practice guidelines when working with adults. All members will also undertake the equality and diversity modules on Bridge-It

Training

All staff working with adults at risk will receive training in adult protection and information regarding procedures relating to this. This will ensure that all staff are aware of the safeguarding policies and will know how to refer concerns via the appropriate routes. Organisational Development monitor this training. A presentation on the updated policy will take place via the staff forums and at a members training session. Information will be also be posted on Bridge-It.

Guidance regarding training is provided via Surrey County Council.

When to be concerned about possible abuse

It is not the role of EBC to decide if an adult at risk is being abused or not, but it is our job to pass on any concerns. Appendix 1 provides a list of types of abuse and provide examples of behaviours associated with each type of abuse. This list is not exhaustive, and there may be other indicators.

How to make a referrals relating to adults at risk of significant harm

If you have concerns about an adult being at risk of significant harm please speak to one of the nominated safeguarding officers (see appendix 2) and they will support you to make a referral if necessary. It is important that you do this, as the nominated officer will be aware of any previous referrals. If possible please let your manager or team leader know that you are doing this. They will also be able to help you to contact a safeguarding officer.

In the unlikely event that a nominated safeguarding officer is not available and you need to make a referral, you must make the referral (please see the referral process in appendix 3), but please ensure that a safeguarding officer is informed on the same day or next working day after the referral so that the details can be logged in the secure area. **It is not our responsibility to decide if the allegation is true or not. Enquiries must not be initiated without the authority of adult social services or the police.** It is important to make sure that you keep notes of any concerns or allegations, whilst things are fresh in your mind and to also keep a record of the time and date.

Referrals regarding adults at risk of harm must be made in one of the following ways:-

By telephone by calling 0300 200 1005 and followed up in writing/email as appropriate within 48 hours.

Outside of office hours, The Emergency Duty Team must be contacted on 01483 517898.

If the individual concerned is at **immediate risk** you must contact the emergency services on **999**

For all emails including personal details, it is crucial that the information is sent via secure email e.g. from one "Egress" account to another. The Chair of the Information Governance Group will be able to help with any enquiries regarding Egress

Responding to suspicions that another member of staff/contractor/elected member may be abusing an adult at risk or not following the code of good practice

Any member of staff who suspects that a colleague may be abusing an adult at risk must act on their suspicions. These suspicions must be recorded and reported to the monitoring officer at the earliest opportunity.

If the matter relates to poor practice the EBC disciplinary/capabilities procedure will be followed.

If it relates to abuse the matter will be referred by the monitoring officer to Social Services who may involve the Police and the member of staff will be suspended pending the outcome of an internal investigation into the allegations.

Whistle Blowing

The Council has in place a Confidential Reporting (Whistleblowing) Policy to ensure serious concerns are reported, investigated and dealt with. The Code forms part of the Council constitution and sets out how to raise serious concerns about any aspect of the Council's work. It also clarifies the legal protection under the Public Interest Disclosure Act against reprisals. The Code is available on the Intranet.

If a member of staff believes that a reported allegation or safeguarding concern is not being dealt with appropriately by their organisation, there are clear communication channels within the Council to raise concerns (see named senior officers as set out in the Confidential Reporting Code). If you are not satisfied with any action taken internally and you would prefer to take the matter outside the Council, there are a number of possible contact points as set out in the policy.

Confidentiality

The principle of this council is that the welfare of the adult at risk is paramount which means that the consideration of confidentiality that might apply to other situations with the council must not be allowed to override the right of the adult at risk to be protected from harm. However, where possible every effort must be made to ensure that confidentiality is maintained for all and by all concerned when an allegation is made and whilst it is being investigated. The council will seek to balance protecting the adult at risk from harm whilst protecting its staff from the risk of unfounded allegations.

General indicators of abuse

Where abuse has occurred one or more of the following signs or indicators may be or have been present, for example:

- Seeking shelter or protection
- Unexplained reactions towards particular individuals or settings
- Frequent or regular visits to the general practitioner or the accident and emergency department, or hospital admissions
- Frequent or irrational refusal to accept investigations or treatments for routine difficulties
- Unexplained change in material circumstances
- Inconsistency of explanation regarding the area of possible concern
- Carer/care worker or third party always wishing to be present at interviews
- Anorexia/bulimia or eating disorders
- Panic attacks, withdrawal of verbal communication, regressive behaviour
- Disturbed sleep patterns
- Absconding/wandering
- Dislike of being touched
- Obsessive or challenging behaviour
- Self harm
- Withdrawal
- History of drug and/or alcohol

None of these indicators, or those below, definitively suggests abuse. However suspicions must be heightened if one or a combination of factors exists.

Types of abuse

Physical abuse

The non-accidental infliction of physical force that results (or could result) in bodily injury, pain or impairment

Examples of behaviour: hitting, slapping, pushing, burning, physical restraint, harassment, enforced sedation, inappropriate use of medication, and catheterisation for management ease.

Signs of possible physical abuse

- Bruising
- Fractures
- Sprains or
- Lacerations
- Burns – including friction burns and scalding
- Drowsiness, confusion due to over-sedation
- Pressure sores
- Welt marks
- Symmetrical grip marks/bruising caused by finger tips
- Malnutrition
- Cowering and flinching

In addition to these physical signs, suspicions must be heightened by the following:

- Injuries not consistent with information given by the adult at risks, carer or care worker
- Injuries in locations where accidental injury is implausible / unlikely
- The adult at risk is unable to explain repeated unexplained injuries
- Injuries inconsistent with known lifestyle/habits
- Failure or unexplained delays in seeking treatment
- Use of furniture and other equipment to restrict movement
- Carer, care worker or third party defensive in explanation

Sexual abuse

Direct or indirect involvement in sexual activity without capacity and/or consent.

Examples of behaviour: Non-contact: looking, photography, indecent exposure, harassment, serious teasing or innuendo, pornography.

Contact: coercion to touch, e.g. of breast, genitals, anus, mouth, masturbation of either self or others, penetration or attempted penetration of vagina, anus, mouth, with or by penis, fingers, and/or other objects.

Signs of possible sexual abuse:

- Repeated urinary infections
- Incontinence/bed wetting
- Sexually transmitted diseases
- Bruising/bleeding/soreness/cuts in genital or breast area
- Pregnancy
- Depression/stress
- Deliberate self-harm

In addition to these physical signs, suspicions must be heightened by the following:

- Increase in sexual behaviour e.g. excessive masturbation
- Inappropriate sexual behaviour/language
- Excessive washing
- Inappropriate dressing
- Self-neglect, poor image
- Panic attacks

Institutional abuse

Definition of institutional abuse: 'institutional abuse occurs when the lifestyles of individuals are sacrificed in favour of the rituals, routines and / or restrictive practices of the home or care setting.'

Examples of behaviour: lack of individualised care, inappropriate confinement or restrictions, sensory deprivation, inappropriate use of rules, custom and practice, no flexibility of bedtimes or waking times, dirty clothing or bed linen, lack of personal possessions or clothing, deprived environment or lack of stimulation, misuse of medical procedures.

Signs of institutional abuse:

- submission to prescriptive routines
- lack of choice
- lack of privacy and dignity
- lack of personal belongings
- use of punishment – withholding food, drink
- poorly trained and unskilled staff
- needs not being met by available staff levels
- unacceptable ‘treatments’ or programmes which include sanctions or punishment such as withholding of food and drink, seclusion, unnecessary and unauthorised use of control and restraint or over-medication
- lack of disabled access

In addition to the previously mention signs, concerns must also be heightened by repeated instances of care which fall below current evidence and research based practice.

Institutional abuse can occur in any setting providing health and social care. A number of inquiries into care in residential settings have highlighted that institutional abuse is most likely to occur when staff:

- receive little support from management
- are inadequately trained
- are poorly supervised and poorly supported in their work
- receive inadequate guidance.

The risk of abuse is also greater in institutions:

- with poor management
- with too few staff
- where there is a closed culture
- which use rigid routines and inflexible practices
- which do not use person-centred care plans

Psychological / emotional abuse

Psychological abuse is that which impinges on the emotional health and development of individuals. It also presents with other forms of abuse.

Examples of behaviour: shouting, swearing, insulting, ignoring, threats, intimidation, harassment, humiliation, depriving an individual of the right to choice and privacy.

Signs of possible psychological/emotional abuse

- Sudden changes in behaviour
- Sleep disturbance
- Low self esteem
- Punitive approach to bodily functions on incontinence
- Anxiety/unease/silence
- Fear
- Depression
- Deterioration in ability to exercise choice
- Irrational fears
- Onset of phobias

In addition to these physical signs, suspicions should be heightened by the following:

- Excessive deference to carer, care worker or third party
- Over-protection
- Violation of civil liberties

Financial / material abuse

The unauthorised, fraudulent obtaining and improper use of funds, property or any resources of a vulnerable person.

Examples of behaviour: misappropriating money, valuables or property, forcing changes to will, denying the adult at risk the right to access personal funds.

Signs of possible financial / material abuse

- Unexplained loss of funds/sudden large withdrawals from bank accounts etc.
- Inability to pay bills
- Marked change in lifestyle/standard of living
- Basic needs not being met
- Theft of property
- Misuse of benefits
- Recent acquaintances expressing sudden or disproportionate affection for a person with money or property
- Person managing financial affairs is evasive or unco-operative
- Power of attorney obtained when a person believed to be unable to comprehend
- Intimidation and extortion

Neglect

Ignoring or withholding physical or medical care needs.

Examples of behaviour: failure to provide: appropriate food, shelter, heating, clothing, medical care, hygiene, personal care; inappropriate use of medication or over-medication.

Signs of possible neglect:

- Poor hygiene
- Dehydration

- Weight loss or malnutrition
- Hypothermia or abnormal body temperature
- Inappropriate clothing
- Failure to respond to prescribed medication raising suspicion medication is being withheld
- Infections
- Pressure sores
- Failure to protect, e.g. lack of safety equipment, such as stair guard

In addition to these physical signs, suspicions must be heightened by the following:

- Deliberate deprivation of social contact
- Sensory deprivation e.g. not allowed to have hearing aids, glasses or other aids to daily living
- Deliberate withholding of medical care/treatment
- Deliberate withholding of an adequate environment, e.g. light, heat, space, privacy or food

Honour Based Violence (HBV)

The term 'Honour Based Violence'(HBV) is an internationally recognised term describing cultural justifications for violence and abuse.

Although HBV is generally considered to be associated with minority ethnic communities, in reality it cuts across all cultures, nationalities, faith groups and communities and transcends national and international boundaries.

HBV has the potential to be both a domestic abuse and child abuse concern.

In terms of domestic abuse risk assessment, HBV is a significant risk factor for victims and must be regarded as a significant predictor of the likelihood of future harm or homicide.

The term 'honour' has widely varying interpretations. For the purposes of this procedure, however, honour relates to the concept that the reputation and social

standing of an individual, a family or community is based on the behaviour and morality of its female members, both women and girls.

Families which conform to accepted standards of honour and moral behaviour are likely to receive benefits in terms of a better future, especially for their sons, who enjoy increased marriage and career prospects within their community.

Many honour-based cultures put a high premium on a girl's virginity and sexual fidelity. Families whose women are believed to have extra-marital relationships (even of a non-sexual kind) can suffer a decline in honour and social standing.

Drinking alcohol and using drugs not endorsed by religion, culture or tradition can bring shame on families because their children are seen as abandoning or rejecting the values of their parents, their family and their community. Specific behaviours, attitudes and actions that may constitute 'dishonour' are wide ranging and include:

- reporting Domestic Abuse
- smoking cigarettes
- inappropriate make-up or dress
- running away from home
- 'allowing' rape or sexual assault
- the existence of a boyfriend
- pregnancy outside of marriage
- interfaith relationships
- rejecting a forced or arranged marriage
- leaving a spouse or seeking divorce
- kissing, holding hands or other intimacy in a public place
- gay men or women who are lesbians declaring their sexuality.

Members of families whose honour is damaged can become depressed, suicidal or abusive. Feelings of shame can hamper their interactions with other members of their community and can negatively affect their work possibly causing further damage to their social standing as a result.

To avoid the serious consequences that can result from losing honour, individuals, families and communities may take drastic steps to preserve, protect or avenge their honour.

This can lead to substantial human rights abuses including:

- Murder (so called honour killings)
- Forced marriages
- Female genital mutilation
- Dowry abuse (including bride burning)

The suicide rate amongst young Asian women in the UK is approximately 40% higher than compared to a young white woman of comparable age.

The police have a pivotal role to play in responding to and investigating HBV related occurrences. It is vitally important that in the first instance, priority is given to planning, the safety of the victim and anyone else who may be subject to harm including children, partners etc.

Honour Killings

Honour killings are the ultimate sanction against (mostly) women who are perceived to have brought shame or dishonour. There have been a number of high profile cases in the United Kingdom where women have lost their lives in a brutal and symbolic manner in recent years.

Abuse and violence in consequence of dishonour and shame also includes;

- unexplained deaths (suicide / forced suicide)
- controlling sexual activity
- child abuse
- rape
- kidnapping or false imprisonment
- threats to kill
- assault

- harassment
- forced abortion
- being forced into marriage
- pressure to return home
- pressure to go abroad
- house arrest
- excessive restrictions on home life (for example not being allowed to phone, to use the internet or develop friendships outside of the family circle etc).

Forced Marriages

In some cultures, notably Pakistani and Bangladeshi, marriages are often arranged, where both bride and groom voluntarily and willingly marry after being introduced by their families.

A forced marriage is one where one of the partners (more often the woman, but not exclusively) is forced or coerced into marrying another. The force or coercion may be by direct or indirect threats, actual physical force or by psychological intimidation.

It must be noted that forced marriage is an abuse of human rights and falls within the definition of adult abuse. The Foreign and Commonwealth Office issued draft guidance entitled Multi-Agency Practice Guidance handling cases of forced marriages in June 2009.

There is also a website www.fco.gov.uk/forcedmarriage which provides further information and advice.

Dowry Abuse

Dowry or 'Dahej' is the payment in cash or / in kind by a bride's family to the bridegroom's family, along with the giving away of the bride. The custom originates from the Indian subcontinent and is called 'Kanyadaan'.

Dowry abuse is where the bride is perceived to have brought in less of an amount of dowry than expected by the in-laws and thus treated with abuse and violence for this.

Female Genital Mutilation (FGM)

FGM (also known as female circumcision) refers to the removal of part or all of the female genitalia for cultural or other non-therapeutic reasons. This is extremely painful and has serious consequences for the physical and mental health of those who experience this abuse. It can also result in death.

Hate crime

The term 'hate crime' refers to any criminal offence which is perceived by the victim or any other person as being motivated by prejudice or hate, based on the victim's actual or perceived race, religion, sexual orientation, disability or transgender status.

Hate incident

The term 'hate incident' refers to any non-criminal incident which is perceived by the victim or any other person as being motivated by prejudice or hate, based on the victim's actual or perceived race, religion, sexual orientation, disability or transgender status.

Mate Crime

The term Mate Crime describes the situation when an adult is befriended by people who then go on to exploit them. It refers to any type of harm or abuse that is caused by people who the adult at risk considers to be their friend. The Serious Case Review of Gemma Hayter is an example of an adult at risk who was abused and then killed by people she considered to be her friends

<http://www.warwickshire.gov.uk/seriouscasereview>

Bullying

A person is bullied when he or she is exposed, repeatedly and over time, to negative actions on the part of one or more other persons, and he or she has difficulty defending himself or herself.

This definition includes three important components:

- bullying is aggressive behaviour that involves unwanted, negative actions
- bullying involves a pattern of behaviour repeated over time
- bullying involves an imbalance of power and strength

Harassment

Harassment is the act of systematic and / or continued unwanted and annoying actions of one party or a group, including threats and demands. The purposes may vary, including racial prejudice, personal malice, an attempt to force someone to leave a job or grant sexual favours, to apply illegal pressure to collect money, or merely gain sadistic pleasure from making someone fearful or anxious. It may consist of a single incident or it can be cumulative and often appears disguised or excused.

Human trafficking

Human trafficking is the transport of men, women and / or children for the purpose of exploitation whose consent has been obtained by means of threat of or the use of force, or whose consent is obtained through the abuse of power or of the giving or receiving of payments or other deceptions.

If an identified victim of human trafficking is also an adult at risk, the response will be coordinated under the Safeguarding Adults Multi Agency Procedures. This will include organisations that have a role to play in dealing with victims of human trafficking, including the police, health trusts, immigrations officials and other relevant support services including those in the voluntary sector. The adult at risk must receive the support and advice they need and be safely repatriated if this is the future plan. If the victim is a child, the situation will be dealt with under the child protection procedures.

The early identification of victims of human trafficking is key to ending the abuse they suffer and to providing the assistance necessary. Front-line staff need to be able to identify the signs that someone has been trafficked.

There is a national framework to assist in the formal identification and help to coordinate the referral of victims to appropriate services; this is called the National Referral Mechanism. The UK Human Trafficking Centre takes referrals of adults and children identified as being the victims of trafficking. Local authorities can provide a range of assistance on a discretionary basis. The Centre now comes under the Serious and Organised Crime Agency (SOCA).

The police are the lead agency in managing responses to adults who are the victims of human trafficking.

Exploitation by radicalisers who promote violence

Adults at risk may be susceptible to exploitation into violent extremism by radicalisers. Violent extremists often use a persuasive rationale and charismatic individuals to attract people to their cause. The aim is to attract people to their reasoning, inspire new recruits and embed their extreme views and persuade vulnerable individuals of the legitimacy of their cause.

There are a number of factors that may make the individual susceptible to exploitation by violent extremists. None of these factors should be considered in isolation but in conjunction with the particular circumstances of the individual:

- identity or personal crisis
- particular personal circumstances such as being isolated or having limited finances
- unemployment or underemployment and
- criminality.

All of these may contribute to alienation from UK values and a decision to cause harm to symbols of the community or the state.

The Home Office leads on the anti-terrorism strategy, CONTEST, and PREVENT is part of the overall CONTEST strategy, aiming to stop people becoming terrorists or supporting violent extremism. Surrey Safeguarding Adults Multi Agency Procedures have a role to play for those eligible to be protected.

Abuse of individual rights / discriminatory abuse / racial abuse

Abuse of individual rights is a violation of human and civil rights by any other person or persons.

Discriminatory abuse consists of abusive or derisive attitudes or behaviour based on a person's sex, sexuality, ethnic origin, race, culture, age, disability or any other discriminatory abuse - this includes Hate Crime.

Forced Marriage

Forced marriage is an abuse of human rights and falls within the definition of adult abuse. The Foreign and Commonwealth Office has issued draft guidance entitled '***Young people and adults at risk facing forced marriage – practice guidance for social workers***'.

There is also a website www.fco.gov.uk/forcedmarriage

Professional abuse

Professional abuse is the misuse of therapeutic power and abuse of trust by professionals, the failure of professionals to act on suspected abuse/crimes, poor care practice or neglect in services, resource shortfalls or service pressures that lead to service failure and culpability as a result of poor management systems/structures.

Examples of behaviour: entering into a sexual relationship with a patient/client, failure to refer disclosure of abuse, poor, ill-informed or outmoded care practice, failure to support an adult at risk to access health care/treatment, denying an adult at risk access to professional support and services such as advocacy, service design where groups of users living together are incompatible, punitive responses to

challenging behaviours, failure to whistle-blow on issues when internal procedures to highlight issues are exhausted.

Signs of possible professional abuse

- Entering into a sexual relationship with patient/client
- Failure to refer disclosure of abuse
- Poor, ill-informed or outmoded care practice
- Failure to support vulnerable to access healthcare/treatment
- Denying an adult at risk access to professional support and services such as advocacy, service design where groups of users living together are incompatible
- Punitive responses to challenging behaviours
- Failure to whistle blow on issues when internal procedures to highlight issue are exhausted.

Domestic Abuse

Surrey uses the term domestic abuse to reflect the wide range of behaviours involved beyond physical violence but the term domestic abuse describes the same behaviours and is still widely used nationally.

Domestic abuse is:

“Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or have been intimate partners or family members, regardless of gender or sexuality.

An adult is defined as any person aged 18 years or over and family members are defined as mother, father, son, daughter, brother, sister and grandparents, whether directly related, in-laws or step-family.”

The definition has been widened by the government to incorporate violence by family members as well as between adults who are or were intimate partners.

It must also be noted that this could include a vulnerable person, adult or child, who is living in an environment where they are witnessing domestic abuse.

All victims of domestic abuse must be treated with compassion and according to their own individual needs, without making assumptions or stereotyping. Resources will be directed, where necessary, towards the vulnerable person and those most at risk of repeat victimisation.

Appendix 2

Nominated Officers for Adults at risk Protection

Ray Lee, Strategic Director
(Lead officer for adult at risks and safeguarding)

01372 474700

The lead member for adult at risk protection is Councillor *****

Appendix 2 Urgent referral process Adult at risks

