

Adult Safeguarding Training



This course is mandatory for everyone.

Learning Outcomes

- **Understand** what safeguarding means
- **Explain** why safeguarding is everyone's business
- **Know** how to draw links to legislative framework
- **Understand** different types of abuse and neglect
- **Understand** your role in protecting others

Content warning

This training may include material that some individuals find emotionally challenging or distressing. If you experience any discomfort during or after the session, please speak with your line manager for support. Thank you.

≡ What is Safeguarding?

-  **Why Safeguarding?**
-  **Making Safeguarding Personal**
-  **Risk in Safeguarding**
-  **What is abuse and neglect?**
-  **Safeguarding is everybody's business - What does that mean?**
-  **Safeguarding Legislation -Know how to draw links to the legislative framework**
-  **Reporting a concern - Understand how to report a concern**
-  **Summary**
-  **Quiz**
-  **Congratulations!**
-  **Additional resources**

What is Safeguarding?

What is Safeguarding?

The six principles of safeguarding

Empowerment



This means:

- People being supported and encouraged to make their own decisions and informed consent.
- We asked what we want as the outcomes from the safeguarding process and these directly inform what happens.
- We believe that our residents are best placed to make decisions about their lives, future and circumstances.
- We ensure the voices of our residents are heard and respected in all our interactions and interventions.
- We support people to make informed decisions and support positive risk taking. We support those who cannot make decisions for themselves by involving families, carers, friends and advocates and by ensuring we reach decisions in collaboration with the person and/or others

and in line with our statutory duties under the Care Act (2014) and associated guidance and principles.

- We use strengths-based practice principles in all our interactions and build on those strengths.

Prevention



It's better to take action before harm occurs.

- We risk assess to consider the presenting risks of harm, and how these risks may be managed.
- We use a strengths-based approach in our work, not just focusing on presenting needs but considering the person holistically, as a whole.
- We connect residents with advice, information, support and services in their local community and work towards delaying and preventing needs from arising.
- We connect residents to support, using centrally managed online resources for consistency and accuracy that enables them to live healthy lives and build on their own strengths and resources.

Proportionality



The response should be the least intrusive that's appropriate to the risk. That means:

- We will ensure a person-centred approach, working centrally to the interests of the adult, and will only get involved as much as is needed.

- Our response and level of intervention is proportionate to the presenting issues, risks, and needs.
- We use professional judgement to inform our decision making and respond in a way that is meaningful and purposeful to our residents.
- We always consider the strengths and aspirations of our residents and tailor our response to build on these.

Protection



That means:

- We get help and support to report abuse and neglect.
- We get help so that I am able to take part in the safeguarding process to the extent to which I want.
- We should always work to protect adults with care and support needs and other people from abuse, harm, and neglect.
- If a person with care and support needs is at risk of abuse or neglect
- we must act immediately. An effective response must be in place to protect the person in need.
- We consider a person's capacity when making decisions about our involvement and understand our legal remit to protect vulnerable residents.
- Whilst a person's preferences must always be considered, sometimes this has to be distinguished from their need for care.
- The wishes of the individual may be a primary influence, but they do not amount to an overriding consideration that would be in breach of our statutory duties.
- We always consider whether independent advocacy in line with the Care Act (2014) is needed, to ensure the voice of the person is being heard. If 10 advocacy is needed
- we ensure that a referral is being made promptly and that advocacy is being provided.

Partnership



Local solutions should be found through services working with their communities.

- We work in collaboration with others, using each other's expertise, experience and skills when appropriate.
- We are aware of information governance principles and protect the privacy of our residents whilst balancing this with the need to work in partnership with others in order to achieve our statutory protection obligations.
- We consider who is best placed to support and guide our residence to enable our residence to live their best life.

Accountability



Safeguarding practices should be transparent and accountable.

- We keep up-to-date records of our interventions and ensure that we are all accountable for the quality of our work/practice.
- We ensure decisions are informed and evidence based.
- We ensure interventions and decisions are communicated clearly and in a timely way.
- We ensure that we capture the voice of our residents, carers and their families and record these in a timely way.
- We also make sure everyone in our organisation is clear about their role and responsibilities.
- We consider financial implications and financial pressures working in a way that provides best value for money.

- We ensure we communicate our financial processes and policies to our residents clearly and accurately throughout our interactions with them.



Surrey County Council staff in AWHP statutory teams should follow the values and principles in the AWHP Practice Framework, available on Tri-X. Staff outside these teams should refer to their own Safeguarding Policies and Procedures (ask your Line Manager if unsure where to find them).

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Why Safeguarding?

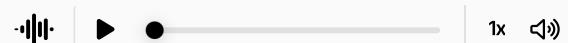
Understand the importance of Safeguarding



Safeguarding adults is essential for several reasons:

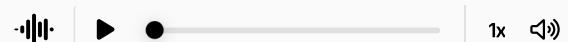
Protection from Harm

Adults, especially those who are vulnerable due to age, disability, or mental health issues, need protection from abuse, neglect, and exploitation.



Preservation of Dignity

Safeguarding ensures that adults are treated with respect and dignity, maintaining their self-worth and human rights.



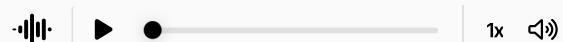
Legal Obligations

There are legal frameworks in place, such as the Care Act 2014 in the UK, that mandate the protection of vulnerable adults. Adhering to these laws is a legal responsibility for individuals and organizations.



Prevention of Abuse

Effective safeguarding practices help identify and mitigate risks early, preventing abuse and neglect before they occur.



Community Trust

Ensuring the safety and well-being of adults builds trust within communities, fostering a supportive and caring environment



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Making Safeguarding Personal



Chapter 14.15 of the Care and Support Statutory Guidance states that:

“Making safeguarding personal means it should be person-led and outcome-focused. It engages the person in a conversation about how best to respond to their safeguarding situation in a way that enhances involvement, choice and control as well as improving quality of life, wellbeing and safety.”

To achieve this in practice, we apply the following methods:

Personalised Approach: MSP tailors safeguarding interventions to the specific needs and preferences of the individual, ensuring their voice is heard and respected.

Outcomes-Focused: By focusing on personal outcomes, MSP leads to more meaningful and sustainable improvements in individuals' well-being and safety.

Empowerment: MSP empowers individuals by involving them in decision-making processes and supporting them to take control of their own safety and well-being.

Collaboration: Working collaboratively with other agencies and professionals to provide holistic and coordinated support.

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Risk in Safeguarding

Risk in Safeguarding

This section will help you to recognise what may increase safeguarding risks

Before you check the slides, please click the play icon to view the video on the screen titled *Safeguarding adults: helping people to protect themselves from crime*



 YOUTUBE

Safeguarding adults: helping people to protect themselves from crime



Safeguarding adults: helping people to protect themselves from crime

See also: SCIE resources for safeguarding adults <http://bit.ly/1RPAxXR>

[VIEW ON YOUTUBE >](#)

What factors increase Risk?



Alcohol and Drugs: Substance misuse can lead to severe health issues, both physical and mental, which can increase vulnerability. Drugs can affect decision-making abilities, making it harder for individuals to recognise or avoid abusive situations. Individuals may become dependent on drugs, leading to financial difficulties and potentially exploitative situations to fund their addiction. Substance misuse can lead to isolation from family and friends, reducing the support network that can help protect them against abuse and neglect.



Physical Illness – Illness can weaken an individual's physical strength, making them less able to defend themselves or escape from harmful situations. Chronic illness can lead to mental health issues such as depression or anxiety, which can increase vulnerability.



Disability: Disabilities may have an impact upon an adult's ability to protect themselves from harm. This may include physical and learning disabilities. Some examples of

potential impact may include reduced mobility, significant impact upon independent living skills, or executive functioning difficulties making it more difficult for the adult to have a plan to protect themselves from harm, or to protect or defend themselves in an instance of active abuse or neglect.



Homelessness: Homeless individuals often lack a support network, making them more vulnerable to exploitation and abuse. Homelessness often exacerbates physical and mental health problems, increasing the adult's vulnerability. Homeless individuals may be forced to live in unsafe environments, exposing them to greater risks of abuse, neglect and violence.



Race: Some ethnic minority groups are more likely to experience social exclusion, poverty, unemployment and neighbourhood deprivation. These social factors increase the likelihood of involvement in crime and antisocial behaviour as both perpetrators and victims.



Care Needs: Simply by having care and support needs and the impact this has upon relying on others for everyday tasks can increase an adult's safeguarding vulnerability.



Gender: Gender can increase risks for certain types of abuse and crime. Gender presents a risk factor in relation to hate crime, particularly for the LGBTQ+ community and non-binary gender types. Women are also more likely to experience certain types of abuse,

such as domestic violence, sexual abuse, and financial exploitation, especially in older age and within care settings.



Mental Health: Mental health conditions can increase a person's risk of being subject to abuse or neglect, due to a range of factors which might include: impaired judgement and perception of risk, low self-esteem and dependency factors, as well as reduced social networks or social isolation and practical vulnerabilities such as financial or housing insecurity. There are also wider issues such as stigma and discrimination, which may impact a person's access to services, or of abuse or neglect concerns being provided the seriousness and attention they merit.



Self Neglect: In Surrey, the starting point in cases of self-neglect begins with an assumption that an adult safeguarding enquiry is not the best response to a concern about self-neglect or hoarding. This is with the essential caveat that it is probable other statutory duties may apply, and starts from the principle of engaging with the individual to address the self-neglecting behaviour and working with them to address the risks associated with this.

However, this assumption can be overturned if it is recognised that the framework provided by Section 42 of the Care Act (2014) is an appropriate means of addressing the issues identified.

It is recommended to review Chapter 5.1 of Surrey Safeguarding Adults Board Policy and Procedures, which provides further guidance in relation to this stance. Staff working with self-neglect, in particular hoarding, are also encouraged to review Surrey County Council's Hoarding SharePoint site, and to seek support in utilising the Woking Hoarding Protocol where it is indicated as appropriate.



Older Age - Older Adults, which is a term used to define anybody over the age of 65, may be at more risk in safeguarding situations, due to increased vulnerability from physical frailty, cognitive decline, social isolation, and dependence on others.

CONTINUE

What is abuse and neglect?

Abuse

Any action that harms an adult's well-being, safety, or health. Abuse can take many forms

Neglect

A failure to meet a person's basic needs – including physical, emotional, social or psychological needs – which can result in serious harm or distress, and/ or negatively affect a person's wellbeing



Understand the different types of abuse and neglect



How many types of abuse and neglect are there?

Spend a few minutes to reflect on how many types of abuse you can think of and when you are ready you can click continue.

CONTINUE

Types of Abuse and Neglect

Physical Abuse



Assault
Hitting
Slapping
Pushing
Misuse of medication

Restraint
Inappropriate physical sanctions

Sexual Abuse



Rape
Indecent exposure
Sexual harassment
Inappropriate looking or touching
Sexual teasing or innuendo
Sexual photography
Subjection to pornography or witnessing sexual acts
Indecent exposure
Sexual assault
Sexual acts to which the adult has not consented or was pressured into consenting

Domestic Violence



Psychological
Physical
Sexual
Financial
Emotional abuse
So called 'honour' based violence

Psychological/Emotional Abuse



Emotional abuse
Threats of harm or abandonment
Deprivation of contact
Humiliation
Blaming
Controlling
Intimidation
Coercion
Harassment
Verbal abuse
Cyber bullying
Isolation
Unreasonable and unjustified withdrawal of services or supportive networks

Financial/Material Abuse



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
the misuse or misappropriation of property, possessions or benefits

Modern Slavery



Slavery
Human trafficking
Forced labour and domestic servitude.
Traffickers and slave masters using whatever means they have at their disposal to Coerce, deceive and force individuals into a life of abuse, servitude and inhumane Treatment

Discrimination



Harassment
Slurs or similar treatment:
Because of race
Gender and gender identity
Age
Disability
Sexual orientation
Religion

Organisational



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

Neglect and acts of omission including



Ignoring medical
Emotional or physical care needs
Failure to provide access to appropriate health, care and support or educational Services
The withholding of the necessities of life, such as medication, adequate nutrition and heating



1:06

1x



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Do you think people always recognise they have been abused or are neglected?

Yes, they can

Sometimes people may not realise they are being abused or neglected

SUBMIT

Why do people not recognise they are being abused or are being neglected?



Normalisation

When abuse or neglect is a regular part of someone's environment, they may not see it as abnormal or harmful.

Manipulation

Abusers can distort the victim's perception, making them believe the abuse is their fault or a normal aspect of the relationship.

Fear and Shame

Victims may feel too ashamed or afraid to acknowledge the abuse, fearing judgment or negative consequences.

Lack of awareness —

Some individuals might not understand what constitutes abuse or neglect, especially if it is non-physical.

Dependence —

Those reliant on their abuser for financial support, housing, or care may fear losing these essentials if they acknowledge the abuse.

Isolation —

Abusers often isolate their victims from support networks, making it harder for them to recognise and seek help for their situation

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Safeguarding is everybody's business - What does that mean?

Safeguarding Adults is a statutory duty



Local Authority's Role -For those working in the Local Authority, we will recognise that for us, Safeguarding Adults is a statutory duty. We are all part of the Local Authority and working in Adult Social Care we hold additional professional expectation and responsibilities to recognise signs of abuse and neglect of vulnerable people and take action as necessary when doing so.

Daily Protection -Every person in society does a lot of things every day, in our work life as well as their private life, where we may interact with incidences where we have witnessed directly or seen signs of a person who is experiencing or at risk of abuse or neglect. The term 'Safeguarding is everyone's business' applies in these situations, meaning everyone in a community has a role to play in protecting vulnerable individuals, by being aware of the signs of abuse or neglect, reporting concerns, supporting victims, and promoting a society where people can live in safety and dignity. It emphasizes that safeguarding is a collective effort, involving the public, volunteers, and professionals across all sectors, rather than being solely the responsibility of social or health care services



▶ ● 1:24 1x ⏪
Professional Duty and Responsibilities - The Local Authority has a statutory duty to accept referrals where any person, professional or public, wishes to raise a concern that an adult with an appearance of care and support needs is experiencing or is at risk of abuse and/or neglect. If that person is found to meet the Section 42(1) criteria under the Care Act (2014), then the Local Authority must make, or cause to be made, whatever enquiries it thinks necessary to enable it to decide whether any action should be taken in the adult's case to protect them from harm.

It is important to recognise the key role that our professional partners play in both identifying and responding to protect adults experiencing or at risk from abuse or neglect. Although the Local Authority is the primary agency holding the statutory duty to formally recognise and cause enquiries to be made, it is important to recognise that our professional partners hold equal responsibilities and accountabilities to safeguard and protect vulnerable persons from abuse and neglect. This includes reporting concerns immediately where they are recognised and taking any necessary immediate steps to protect the person from the identified harm, and to engage them in any ongoing planning and support to address Adult Safeguarding concerns identified.

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Duty of Candour - Section 81 of the Care Act (2014) places a statutory duty on all health and social care organisations in the case of an incident of suspected abuse or neglect affecting a person's safety during the person being provided with a service. Failure of an organisation to meet their Duty of Candour obligations could result in serious consequences for that organisation, including for example Regulatory Action by the Care Quality Commission (CQC), or even legal action such as court proceedings which may result in fines or disciplinary actions from professional bodies responsible for the oversight of the functions of that organisation.

—
We are all humans!

Can you stop for a minute to reflect?



0:18

1x



Can you think of an example where you were mistreated or experienced something that doesn't feel right?



How did that feel?



What makes us human?

CONTINUE

Professional Curiosity



2:35

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Professional curiosity - In the world of social work and occupational therapy you will often hear the term Professional Curiosity.

Professional curiosity is not just important in safeguarding work but in everything we do.

We start off by recognising that it doesn't matter whether a concern is a safeguarding concern or not. Our role is to ask the right questions, remain unbiased and explore with the person how they feel about what has happened.

To do so, we need to understand that people rarely come to us and say 'I have been abused. Please protect me.' Not only do we need to recognise potential signs or abuse and neglect but also work well with people to protect them. That means understanding what matters to them.

Professional curiosity is the practice of being inquisitive and open-minded in a professional setting, particularly when working with vulnerable individuals. It involves actively seeking to understand the full context of a situation, rather than accepting things at face value.

Below are some key components of professional curiosity:

Asking the right Questions: Proactively asking questions to gather more information and gain a deeper understanding of a situation. Imagine what you would do if the concern would have involved someone close to you. What questions would you want to ask. Make sure you don't just focus on facts but also emotions. This can be a powerful way for people to open up.

Observe: Paying attention to subtle signs and behaviours that might indicate underlying issues. Use your senses and trust your gut instinct. When something doesn't feel right, ask more questions.

Challenge Assumptions: Not taking things for granted and being willing to question initial impressions or explanations.

Seek Clarification: Ensure that you fully understand the information provided by not hesitating to ask for clarification when it's needed.

Connecting the Dots: Looking for patterns or inconsistencies that might reveal more about a person's circumstances than immediately is recognisable.

Reflective Practice: Continuously reflecting on your own practice and decisions to improve your understanding and approach.

Professional curiosity is crucial in safeguarding because it helps professionals identify and address potential risks or concerns that might otherwise go unnoticed. It encourages a thorough and thoughtful approach to working with individuals, ensuring their safety and well-being.

CONTINUE

Safeguarding Legislation -Know how to draw links to the legislative framework



Care Act



Section 42 of the Care Act 2014 places a statutory duty on local authorities to analyse potential Adult Safeguarding risks referred to it or that we become aware of in the course of our work. There are two main components to Section 42 that guide when and how we intervene in safeguarding matters referred to the local authority, these are Section 42(1) and Section 42(2).

Section 42(1)

is the initial statutory basis to gather further information to make a triage decision as to whether or not a Section 42(2) enquiry is necessary to be completed. In making a determination whether the Section 42(1) criteria are met, we must establish:

is there reasonable cause to suspect that an adult in Surrey:

1. Has needs for care and support (whether or not the authority is meeting any of those needs),

2. Is experiencing, or is at risk of, abuse or neglect,
3. And, as a result of those needs, is unable to protect themselves from the abuse or neglect or the risk of it.

Section 42(2) Enquiry

If we have sufficient information to warrant that all three of the above criteria are met, or have gathered further information that finds this, then we have a statutory duty to complete a Section 42(2) enquiry. This provides the local authority with a duty that we must make enquiries, whether this be completed by ourselves, or cause enquiries to be made by relevant other agencies and organisations that we think are necessary, to enable us to decide whether any action should be taken in the adult's case, and if so, what and by whom.

The purpose of a safeguarding enquiry is not to assign blame or pursue legal action, but rather to:

- Establish the facts: What happened, when, and who was involved.
- Understand the context: How and why the situation occurred.
- Identify learning: What could have been done differently to reduce or prevent the abuse or neglect from having occurred.
- Promote accountability: Ensure the key agencies and professionals reflect on their roles, as necessary on a case-by-case basis.
- Prevent recurrence: Put measures in place to reduce the risk of future harm to the individual or others.

Safeguarding is a multi-agency responsibility, and the enquiry process should be collaborative, transparent, and focused on improving outcomes for adults at risk. It is essential that safeguarding is approached with a learning mindset, recognising that systemic issues, communication breakdowns, or procedural gaps may contribute to harm.

Ultimately, the safeguarding process aims to protect individuals, promote their wellbeing, and strengthen practice across health and social care systems.

Safeguarding Legislation – Know how to draw links to the legislative framework



Other legislative frameworks that govern safeguarding



The Human Rights Act of 1998



The Human Rights Act of 1998 protects fundamental rights and freedoms of all persons who are within the UK, whether they are a resident of the UK or not. Several Rights are absolute which include prohibition of torture, prohibition of slavery and no punishment without law. All other rights are limited or qualified.

The Human Rights Act Incorporates the European Convention on Human Rights (ECHR) into British law. This is achieved by defining 16 enforceable core rights for all persons within the United Kingdom. These are known as the Articles, and some examples of these include:

Article 2 – The right to life. This Right ensures that public authorities, such as the police, must take positive steps to protect individuals if their lives are at risk. It is important to note that the views of the individual themselves may be overridden, if for example that

person is actively attempting to end their life – public authorities have a duty to intervene to prevent this from happening.

Article 8 – The right to respect for private and family life. This Right protects individuals from unnecessary interference by public authorities in their personal and family matters. It is important to recognise the complexities presented in affecting this right. For example, where in respecting this right we cannot reasonably protect the person from a life-threatening risk. Or where by respecting one person's article 8 right, this will severely impact that of another person's rights, or where Public Interest overrides this right. This is where the completion of comprehensive assessment of the risks is key to establishing a proportionate response to the individual circumstances of any given situation we encounter.

General Data Protection Regulation (GDPR) and Data Protection Act 2018



General Data Protection Regulation (GDPR) and Data Protection Act 2018

This legislation regulates the processing of personal data to protect a person's privacy and to protect them from harm. It is important to recognise that consent remains a fundamental ethical and legal requirement within the processing of an individual's data, and the consent of the individual should therefore always be a core and primary consideration before any person shares or records personal information. An example of this may include a professional's decision to make a referral on behalf of an adult to the Local Authority. We can override consent, but only where there is a clear, justifiable rationale to do so, and where we need to do so in order to meet another legal duty, which includes where we need to look further into an Adult Safeguarding concern we have received, including as an example, the completion of Section 42(2) enquiry.

Mental Health Act (1983)

Mental Health Act (1983)

Governs the assessment and treatment of people with mental health disorders. At its core, the Mental Health Act is designed to protect the health and safety of the adult and/or others from risks of harm, where it has been assessed that these risks are significant and there are no options available to achieve safe and effective treatment of the adult's mental health in a community setting (i.e. within their own home). The assessed risks must be directly related to the person presenting with a mental health disorder, which is clinically assessed by at least two Doctors and an Approved Mental Health Professional (AMHP). If on outcome of the Mental Health Act assessment the adult is found to meet the criteria for admission to a psychiatric hospital, then the AMHP may make a legal application for the detention and mental health treatment for the adult in a secure psychiatric hospital setting. The most recognised detention frameworks provided by the Mental Health Act include Section 2 and Section 3, as well as voluntary admission, also referred to as informal admission, which falls under Section 131.

Following a period of treatment within hospital, the adult may be discharged absolutely from the hospital and from detention under the Mental Health Act, if it is deemed safe to continue their treatment in the community. There is also an option in some circumstances for their treatment under the Mental Health Act to be extended to the community under provisions such as a Community Treatment Order (or CTO), the framework for which is provided by Section 17A. While subject to a CTO the person remains subject to certain conditions which may result in recall to a psychiatric hospital, for example if they experience a relapse within their mental health condition and the risks to themselves and/or others becomes significant again as a result.

The Mental capacity Act (2005) or MCA

The Mental capacity Act (2005) or MCA

Legal Framework -Provides a legal framework for the protection and empowerment of individuals who may lack mental capacity. There are fundamental principles that complement the MCA, for example, we must never assume a person lacks the mental capacity to make a decision. The MCA operates on a decision specific basis, which means the mental capacity assessment must assess the individual's ability to make a decision based on the specific decision the adult is required to make. Some examples of such decisions we often encounter in safeguarding may include the individual's mental capacity to manage their financial affairs, or the individual's ability to manage certain risks associated with exploitation from others in circumstances such as cuckooing. Anyone can make a mental capacity assessment, since it covers such a broad range of complexity, for example from every day tasks such as deciding what to wear, to highly complex concerns such as a person's ability to recognise and respond to manage risks to themselves of abuse. In all circumstances, the assessor must consider both the diagnostic and functional assessments for mental capacity, with note that no formal clinical qualification is expected. It is however important to recognise the infinite spectrum of complexity that exists when assessing for a person's mental capacity, and therefore in all cases, consideration needs to be given for the most appropriate person to assess for the mental capacity concern.

Person Lacking Capacity-If the person is found to lack capacity, then the Best Interest framework will apply for any decisions made on behalf of the adult. We encourage you to read the Mental Capacity Act Code of Practice which can be accessed for free online through any search engine. Chapter 5 of the Code of Practice covers Making Decisions in Someone's Best Interests.

Safeguarding Options -The MCA also introduced some important safeguarding options which are important to be aware of. These include, Lasting Power of Attorney (LPA), replacing Enduring Power of Attorney, which allowed individuals, referred to as donors, to appoint a person or persons to manage their property and financial affairs, or their health and welfare matters. The Office of the Public Guardian oversees applications for LPA and the appropriate use of LPA's. They can investigate and intervene if there is concern the person with Power of Attorney is misusing or abusing these powers.

Court Protection-It also introduced the new Court of Protection, which provides additional powers to the Court in relation to both financial and personal welfare decisions

for individuals lacking mental capacity. The Court of Protection also handles complex or sensitive cases where a resolution is deemed to not be possible without involvement of the court to hear the circumstances of the concern and resolve the concern with a binding decision on how to proceed.

Removal of Power of Attorney–The Court also has the power to remove and/or appoint new individuals as Power of Attorney, and can also appoint persons as a Deputy where it is not possible for the adult, i.e. the ‘donor’, to apply for Lasting Power of Attorney. This occurs in circumstances where the adult has since lost the mental capacity to be able to apply themselves to appoint a person as their Power of Attorney.

Policing laws



The Police play a critical role in safeguarding vulnerable individuals, and they have professional responsibilities, and additional legislative powers to safeguard vulnerable individuals in specific circumstances.

Core responsibilities of the Police include protecting life, preventing crime and bringing offenders to justice.

Some examples of their legislative powers include:

The Police and Criminal Evidence Act (1984), often referred to as PACE, provides Police officers with the power to enter and search premises without a warrant in specific circumstances, including: to save ‘life or limb’, and the power for Police to arrest a person for certain offences if there is an immediate threat or need to detain an adult who is posing danger to themselves or others.

Domestic Abuse: In situations of domestic abuse, Police can use powers under the Domestic Abuse Act (2021), to intervene in circumstances where domestic abuse is present. Some central components of the act include the power of Officers to issue:

- **Domestic Abuse Protection Notices (DAPN's).** Issued directly by Police at the scene of an incident to provide immediate protection to victims, and which can prohibit the abuser from contacting or approaching the victim or returning to a shared residence.
- **Domestic Abuse Protection Orders (DAPO's).** These are court issued and can follow a DAPN, or they can be applied for independently. They offer longer term protection and can include conditions such as mandatory rehabilitation (of offenders), or restrictions on behaviour.
- **Section 26 of the Serious Crime Act (2015).** This legislation introduced the recognition in law of the offence of controlling or coercive behaviour in an intimate or family relationship, which introduced grounds for Police to intervene even when physical violence isn't present.

CONTINUE

Reporting a concern - Understand how to report a concern



Imagine you're in a situation where you're interacting with someone who may be vulnerable or at risk. You might be the only person who has taken the time to ask them questions that no one else has asked before. These questions can uncover hidden concerns, fears, or issues that the person might not have felt comfortable sharing with others.

When you ask, "How are you really feeling?" or "Is there anything that's been worrying you?" you open the door for them to express their true feelings and experiences. This act of professional curiosity and empathy can make a significant difference. It shows that you care and are genuinely interested in their well-being.

By asking these questions, you validate their feelings and give them a voice.

You might discover that they are struggling with loneliness, fear, or even potential abuse or neglect. Your willingness to listen and understand can be the first step in addressing these issues and ensuring they receive the support they need.

This approach highlights the importance of safeguarding. It's not just about following procedures but about genuinely caring for and understanding the individuals we support. Your curiosity and empathy can help identify risks and provide the necessary interventions to protect vulnerable individuals.

Remember, safeguarding is everyone's business, and by being attentive and asking the right questions, you can make a significant impact on someone's life.



What must you do if you are concerned?

You must Act, Report & Record

Step 2

Act

Do what you feel is right in that moment as long as it is safe for you and the person. This can be 'calling the police', 'calling the ambulance', 'staying with the person', 'keeping someone on the line talking', 'showing understanding', 'signalling support'. Remember that it is one of our core values to show people that we care.

Step 3

Report

Even if the person has not given you consent, you will need to consider sharing the concerns with your manager. Together, you can make a plan on what next steps to take.

Step 4

Record

Write things down.

Follow the three guiding thoughts: Be human; Don't make promises; Be clear what you are concerned about when you report it.

Even if a decision is reached that it's not a safeguarding matter, we may still need to consider:

- Care Act assessments
- Risk Assessments
- Mental Capacity Act assessments and Best Interest decisions
- Reviews
- Providing advice and information

Follow the three guiding thoughts:

- Be human
- Don't make promises
- Be clear what you are concerned about when you report it!

Just because something is not a safeguarding matter under the law, doesn't mean we don't do anything about it

CONTINUE

Summary



Chapter 14.7 of the Care and Support Statutory Guidance provides a concise summary of what Adult Safeguarding is and why it matters. Within this chapter, it states that:

“Safeguarding means protecting an adult’s right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect”.

We hope that in outcome from this training, you can take forward learning to achieve these objectives in your own role in working with vulnerable adults in Surrey, and with our key professional partners in the wider adult safeguarding network.

CONTINUE

Quiz

Time for the Quiz (pass mark is 80%)

If you do not pass.....

Please arrange a time to meet with one of the Safeguarding advisors or designated safeguarding lead. They will be happy to help and support you. Then please do retake the quiz.

Question

01/11

Which one below is not a defined principle of Safeguarding?

Proportionate

Empowerment

Accountability

Harm

Question

02/11

The Care Act (2014) defines an adult at risk as

- Someone who is aged 18 or over
- Has needs for care and support (whether or not the local authority is meeting any of these needs)
- Is experiencing, or at risk of, abuse or neglect
- As a result of those care and support needs is unable to protect him/herself from either the risk of, or the experience of abuse or neglect
- All of the above

Question

03/11

Who has a duty to act when a person discloses a concern?

- Managers
- Safeguarding Team
- Social workers
- Anyone

Question

04/11

What is a type of abuse?

- Physical
- Psychological
- Financial
- All of the Above

Question

05/11

What legislation explains our safeguarding duties as a local authority?

- Equality Act
- Care Act 2014
- Employment Law
- None of the above

Question

06/11

Is there any additional risk factors for people that make them more vulnerable?

- Older People
- Substance dependency
- Mental health
- None of the above, everyone should be treated the same

Question

07/11

Which of the following is NOT a form of abuse as defined by the Care Act 2014?

- Physical abuse
- Financial abuse
- Emotional abuse
- Professional curiosity

Question

08/11

If someone tells us they want us to do nothing even though we are concerned about their safety, would you:

- Accept their decision and close the contact
- Try to persuade them into accepting our support
- Discuss it with a manager to assess the risks and decide next steps
- Call the Next of Kin to tell them you have concerns

Question

09/11

What is the primary focus of Making Safeguarding Personal (MSP)?

- Following strict procedures
- Achieving personal outcomes for individuals
- Reducing paperwork
- Ensuring quick resolutions

Question

10/11

Why is safeguarding considered everyone's business?

- It ensures the safety and well-being of vulnerable individuals
- It is a legal requirement for healthcare professionals only
- It reduces the workload for social services
- It is only relevant in care homes

Question

11/11

What is the role of professional curiosity in safeguarding?

- To follow a checklist of questions
- To actively seek to understand the full context of a situation
- To avoid asking personal questions
- To ensure quick resolutions

Congratulations!



You have passed your Level 1 safeguarding awareness training. If you are a staff member who will be expected to complete Safeguarding Enquiries, please use MyLearning to book on to Level 2.



CONTINUE

Additional resources

Links and material to read

To learn more, please visit the following pages:

- [AWHP Safeguarding](#) – OurSurrey page
- [Surrey Safeguarding Adults Board Homepage](#)