Safeguarding policy – version 13

Date approved for use: 26th March 2024

Scope

1.1 This policy is a Dimensions Group policy. This means it applies to all its subsidiaries as listed in Dimensions Group company information.

1.2 The Safeguarding Panel has approved this policy on behalf of the Dimensions Group Board.

1.3 We have this policy to help make sure we are all aware of our responsibility to promote the human rights and wellbeing of people we support. Its main focus is to help stop people coming to harm through abuse, neglect, and exploitation. Also, to make sure we all know what to do when we are concerned somebody may come to harm or has been harmed.

1.4 The policy applies to all colleagues, including Board members/trustees and volunteers. However, the procedures it describes are especially relevant to direct support colleagues.

1.5 You can find the documents, forms and other policies mentioned in this policy on the Hub (Dimensions intranet).

1.6 To go straight to the policy content click on the hyperlink section title below or go to the page:

Section

What the law says Page 3

The 10 Types of abuse, additionally:

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Raising and responding to a safeguarding concern Page 14
Policy statement

We believe everyone has the right to live free from abuse or neglect regardless of any protected characteristic.

We are committed to creating and maintaining a safe and positive environment and an open, listening culture where people feel able to share concerns without fear of retribution.

We acknowledge that safeguarding is everybody’s responsibility and are committed to prevent abuse and neglect through safeguarding the welfare of all adults involved.

We will be consistent with the principles of adult safeguarding ensuring that any action taken is prompt, proportionate and that it includes and respects the voice of the adult concerned.

2.1 We will do all we can to help colleagues promote the human rights of people we support and stop them being harmed, abused, neglected, and coerced. This means we will give them all the training and information they need to understand human rights and to identify abuse and respond to it when they suspect it’s happening.

2.2 We will deal with all allegations and concerns appropriately. This means, we will:

- report allegations and concerns to the right people and agencies
- investigate them when we need to, and
- learn from them and share what we learn with the wider organisation.

We will also share what we learn with external colleagues where appropriate.
2.3 When a colleague harms a person we support, we will take disciplinary action as appropriate.

2.4 We will support anyone we are concerned about as well as we can. This includes involving them as fully as possible in all safeguarding procedures. We will also involve their family or other representatives as appropriate.

The impact of not implementing this policy

3.1 If you don’t follow this policy, people we support may suffer a breach of their human rights or be abused. Or they may come to some other kind of harm.

3.2 They and their representatives may lose confidence in us as their support provider, and you, personally. They and/or their representatives might not want us to support them anymore.

3.3 You could also get us in trouble with our regulators. That’s:
   - the person’s local authority (LA)
   - in England, the Care Quality Commission (CQC)
   - in Wales, the Care Inspectorate Wales (CIW) and Social Care Wales (SCW)
   - the Charities Commission (CC).

3.4 If you don’t report a crime that’s been committed, you might even get in trouble with the police.

3.5 So to help keep the people we support and the organisation safe, we might take action against any colleague who goes against this policy. That might be performance management action or disciplinary action.

Policy content

What the law says

4.1 In England, The Care Act 2014 sets out the legal framework that we and the local authorities work to when it comes to safeguarding. In Wales, it’s the Social Services and Well-being (Wales) Act 2014. The Department of Health’s and National Assembly of Wales’ guidance differs in detail. But their aims and language are similar. So, in this section, we have borrowed from these to give an overview of safeguarding.
4.2 Safeguarding duties apply to any adult who:

- has care and support needs
- is experiencing, or at risk of, abuse or neglect, and
- as a result of their needs, can’t protect themselves

4.3 It’s the LAs responsibility to investigate, or to get someone else to investigate, safeguarding concerns and to decide whether to take action. In England, this is called a section 42 enquiry. In Wales, it’s a section 126 enquiry. (See Enquiries and investigations).

4.3 Six key principles that underpin safeguarding work:

<table>
<thead>
<tr>
<th>in England</th>
<th>in Wales</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Empowerment</strong> – People being supported and encouraged to make their own decisions and to give informed consent</td>
<td><strong>Responsibility</strong> - Safeguarding is everyone’s responsibility</td>
</tr>
<tr>
<td><strong>Prevention</strong> – It is better to take action before harm occurs</td>
<td><strong>Well-being</strong> - Any actions taken must safeguard the person’s well-being</td>
</tr>
<tr>
<td><strong>Proportionality</strong> – The least intrusive response appropriate to the risk presented</td>
<td><strong>Person-centred approach</strong> - Understand what outcomes the adult wishes to achieve and what matters to them</td>
</tr>
<tr>
<td><strong>Protection</strong> – Providing support and representation to those in need</td>
<td><strong>Voice and control</strong> - Expect people to know what is best for them and support them to be involved in decision making about their lives</td>
</tr>
<tr>
<td><strong>Partnership</strong> – Local solutions through services working with their communities. Communities have a part to play in preventing, detection and reporting neglect and abuse</td>
<td><strong>Language</strong> - Make an active offer of use of the Welsh language and use professional interpreters where other languages are needed</td>
</tr>
<tr>
<td><strong>Accountability</strong> – Accountability and transparency in delivering safeguarding</td>
<td><strong>Prevention</strong> - It is better to take action before harm occurs</td>
</tr>
</tbody>
</table>

4.4 The safeguarding process should be personal. This means everybody involved must do all they can to make sure it’s person-led and outcome-focussed.
4.5 All public bodies must work together to make sure that care and support is joined up. ‘Public bodies’ include – but this isn’t a list of all of them:

- all Multi-agency Public Protection Arrangements (MAPPA) representatives
- The Police
- The Probation Service
- Health-related agencies
- Housing services
- Support providers – that is, organisations like us.

4.6 The law provides a framework for making decisions on behalf of adults who can’t make decisions for themselves (Mental Capacity Act 2005).

4.7 The law provides a framework for good practice in safeguarding that makes the overall well-being of the adult at risk a priority of any intervention.

Types of abuse

5.1 It is important to have an awareness of the categories of abuse that are recognised. However, if you notice that something isn’t right, and you think someone is at risk, but you are not sure what category of abuse this is, it is important to still report it.

Safeguarding legislation in England and Wales lists categories of abuse differently however, they all include the following categories. We have listed these below along with possible indicators for each:

1. **Physical abuse** – including assault, hitting, slapping, pushing, misuse of medication, restraint, or inappropriate physical sanctions.

   **Possible indicators**
   - No explanation for injuries or inconsistency with the account of what happened.
   - Injuries are inconsistent with the person’s lifestyle.
   - Bruising, cuts, welts, burns and/or marks on the body or loss of hair in clumps.
   - Frequent injuries.
   - Unexplained falls.
• Subdued or changed behaviour in the presence of a particular person.
• Signs of malnutrition.
• Failure to seek medical treatment or frequent changes of GP.

2. Sexual abuse – 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 to, lacks the capacity to consent to or was pressured into consenting to.

Possible indicators
• Bruising, particularly to the thighs, buttocks and upper arms and marks on the neck.
• Torn, stained or bloody underclothing.
• Bleeding, pain or itching in the genital area.
• Unusual difficulty in walking or sitting.
• Foreign bodies in genital or rectal openings.
• Infections, unexplained genital discharge, or sexually transmitted diseases.
• Pregnancy in a woman who is unable to consent to sexual intercourse.
• The uncharacteristic use of explicit sexual language or significant changes in sexual behaviour or attitude.
• Incontinence not related to any medical diagnosis.
• Self-harming.
• Poor concentration, withdrawal, sleep disturbance.
• Excessive fear/apprehension of, or withdrawal from, relationships.
• Fear of receiving help with personal care.
• Reluctance to be alone with a particular person.

3. Psychological abuse – 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.

Possible indicators
• Change in presentation when a particular person is present.
• Withdrawal or change in the psychological state of the person.
• Insomnia.
• Low self-esteem.
• Uncooperative and aggressive behaviour.
• A change of appetite, weight loss/gain.
• Signs of distress: tearfulness, anger.
• Apparent false claims, by someone involved with the person, to attract unnecessary treatment.

4. **Financial or material abuse** – 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.

**Possible indicators**

• Missing personal possessions.
• Unexplained lack of money or inability to maintain lifestyle.
• Unexplained withdrawal of funds from accounts.
• Power of attorney or lasting power of attorney (LPA) being obtained after the person has ceased to have mental capacity.
• Failure to register an LPA after the person has ceased to have mental capacity to manage their finances, so that it appears that they are continuing to do so.
• The person allocated to manage financial affairs is evasive or uncooperative.
• The family or others show unusual interest in the assets of the person.
• Signs of financial hardship in cases where the person’s financial affairs are being managed by a court appointed deputy, attorney or LPA.
• Recent changes in deeds or title to property.
• Rent arrears and eviction notices.
• A lack of clear financial accounts held by a care home or support setting.
• Failure to provide receipts for shopping or other financial transactions carried out on behalf of the person.
• Disparity between the person’s living conditions and their financial resources – for example insufficient food in the house.
• Unnecessary property repairs.

5. **Neglect and acts of omission** – including ignoring medical, emotional, or physical 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.

**Possible indicators**
• Poor environment – dirty or unhygienic.
• Poor physical condition and/or personal hygiene.
• Pressure sores or ulcers.
• Malnutrition or unexplained weight loss.
• Untreated injuries and medical problems.
• Inconsistent or reluctant contact with medical and social care organisations.
• Accumulation of untaken medication.
• Uncharacteristic failure to engage in social interaction.
• Inappropriate or inadequate clothing.
• An isolated action, or lack of action that poses a risk to the person

**In England, the Care Act statutory guidance defines 10 types of abuse in total; the additional categories are listed below.**

6. **Domestic abuse** – including psychological, physical, sexual, financial, emotional abuse; so-called ‘honour’ based violence, female genital mutilation and forced marriage (age range in England extended to 18).

**Possible indicators**
• Low self-esteem.
• Feeling that the abuse is their fault when it is not.
• Physical evidence of violence such as bruising, cuts, broken bones.
• Verbal abuse and humiliation in front of others.
• Fear of outside intervention.
• Damage to home or property.
• Isolation – not seeing friends and family.
• Limited access to money.

7. **Modern slavery** – 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.

**Possible indicators**
• Signs of physical or emotional abuse.
• Appearing to be malnourished, unkempt or withdrawn.
• Isolation from the community, seeming under the control or influence of others.
• Living in dirty, cramped, or overcrowded accommodation and or living and working at the same address.
• Lack of personal effects or identification documents.
• Always wearing the same clothes.
• Avoidance of eye contact, appearing frightened or hesitant to talk to strangers.
• Fear of law enforcers.

8. **Discriminatory abuse** – including forms of harassment, slurs, or similar treatment, because of any protected characteristic. Please see our [Equality statement](#) for details.

**Possible indicators**
• The person appears withdrawn and isolated.
• Expressions of anger, frustration, fear or anxiety.
• The support on offer does not take account of the person’s individual needs in terms of a protected characteristic.

9. **Organisational abuse** – 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 ongoing ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes, and practices within an organisation.

**Possible indicators**

- Lack of flexibility and choice for people using the service.
- Inadequate staffing levels.
- People being hungry or dehydrated.
- Poor standards of care.
- Lack of personal clothing and possessions and communal use of personal items.
- Lack of adequate procedures.
- Poor record-keeping and missing documents.
- Absence of visitors.
- Few social, recreational and educational activities.
- Public discussion of personal matters.
- Unnecessary exposure during bathing or using the toilet.
- Absence of individual care plans.
- Lack of management overview and support.

10. **Self-neglect** – this covers a wide range of behaviour from neglecting to care for one’s personal hygiene, health or surroundings and includes behaviour such as hoarding.

**Possible indicators**

- Very poor personal hygiene.
- Unkempt appearance.
- Lack of essential food, clothing or shelter.
- Malnutrition and/or dehydration.
- Living in squalid or unsanitary conditions.
- Neglecting household maintenance.
- Hoarding.
• Collecting a large number of animals in inappropriate conditions.
• Non-compliance with health or care services.
• Inability or unwillingness to take medication or treat illness or injury.

5.2 Anyone can carry out abuse. This includes:
• spouses or partners
• other family members
• neighbours
• co-tenants
• friends
• acquaintances
• local residents
• people who deliberately exploit adults they perceive as vulnerable to abuse
• paid staff or professionals
• volunteers
• strangers
• online contacts.

And abuse can happen anywhere – for example, in:
• someone’s own home
• the workplace
• a public place
• a hospital
• a care home
• a college
• online.
The following are other categories of abuse that are not identified in the Care Act 2014, however are other recognised forms of abuse.

**Grooming and mate crime**

5.3 Grooming is when someone pretends to be friendly but in order to use or harm their victim. For example, financially or sexually. It might happen over a long period of time. So, the person at risk often isn’t even aware that it’s happening.

5.4 Mate crime is a ‘catch-all’ term often used for the various crimes a ‘pretend friend’ might commit. A mate crime could be financial, sexual, physical or psychological.

5.5 A person with a learning disability is especially vulnerable because groomers may think they will be more easily deceived than other people.

**Cyber or online bullying**

5.6 Cyber or online bullying might fall into any one of the categories listed above. But specifically, it happens through:

- text messages
- emails, or
- on social media platforms.

5.7 There are seven typical types of cyber bullying:

- **Harassment** – this is when someone sends offensive, rude or insulting messages again and again.

- **Denigration** – this is when someone spreads information about a person that’s fake and damaging.

- **Flaming** – this is when someone uses extreme and offensive language in order to distress a person. Typically, ‘trolls’ engage in this activity. Their intention is to upset people, usually in an online community – a forum or chat room – or on a blog.

- **Impersonation** – this is when someone hacks into a person’s email or social networking account to use their online identity to post nasty or embarrassing material.

- **Outing and trickery** – this is when someone shares personal information about a person or tricks them into telling secrets and forwards it to others.
• **Cyber stalking** – this is when someone sends messages to a person again and again that include threats or harassment or intimidating messages.

• **Exclusion** – this is when someone deliberately leaves a person out of group messages, online apps, gaming sites and so on.

5.8 Online grooming is very common because it's easier to deceive someone online than in real life. Groomers often operate in gaming communities, pretending to share interests with genuine gamers as a way of getting to know them.

**County lines**

5.9 County lines is a term used to describe gangs and organised criminal networks who deal drugs out of cities into suburban and rural areas. They are likely to recruit children and adults they can manipulate to act as 'runners' to avoid getting caught themselves.

5.10 However, as well as drugs, county lines criminals are associated with:

- Sexual exploitation
- Money laundering
- Human trafficking.

5.11 For more detailed guidance and a case study, see *Criminal exploitation of vulnerable adults*.

**Cuckooing**

5.12 Cuckooing is when a drug dealer grooms the person at risk in order to use their home as a base for dealing drugs. The person at risk may be a drug user themselves, but not necessarily. Whether they are or not, once they’ve been cuckooed, they will be even more vulnerable to more types of abuse.

**The Prevent strategy and Channel programme**

6.1 ‘Prevent’ is a key part of the government’s overall counter-terrorism strategy CONTEST. The ‘Channel’ programme is a key part of Prevent. It uses a multi-agency approach to protect young and vulnerable people from radicalisation. Radicalisation means being drawn into a group with extreme beliefs that could be dangerous. For example, because they encourage terrorism.

The programme aims to protect by:
• identifying people at risk
• assessing that risk, and
• developing a support plan for the person.

6.2 Its purpose is to protect people from all forms of ideological radicalisation. The most significant of these threats is currently from organisations associated with Al Qa’ida, Daesh, terrorists associated with extreme right-wing ideologies and lone actors inspired by them.

6.3 The Counter-Terrorism and Security Act says that certain kinds of organisation should help keep people from getting involved in terrorism. And Home Office guidance identifies people with learning disabilities as a vulnerable group. This means, we need to be aware for people we support being groomed for terrorism.

If you have any suspicions, report them. Your local authority and/or police force will have a Prevent lead and a reporting process. You can include their details on Safeguarding contacts and protocols grab-sheet. Or you can contact our Safeguarding & Quality Governance Manager for advice.

6.4 We give an overview of Prevent in our online Safeguarding adults course (see Training and prevention). But if you work with people who have been identified as at risk, do the Radicalisation module, too.

Relevant legislation, guidance and related policies and templates

**Legislation**

15.1 Health and Social Care Act 2008 (Regulated Activities) (Amendment) Regulations 2015
15.2 The Care Act 2014
15.3 Social Services and Well-being (Wales) Act 2014
15.4 Regulation and Inspection of Social Care (Wales) 2016
15.5 Mental Capacity Act 2005
15.6 Human Rights Act 1998
15.7 Counter-Terrorism and Security Act 2015
15.8 Data Protection Act 2018
15.9 General Data Protection Regulations (UK-GDPR)
15.10 The Equality Act 2010

Guidance

16.1 Guidance for providers on meeting the regulations (Care Quality Commission, 2015)
16.2 Care and Support Statutory Guidance Care issued under Care Act 2014, Department of Health, 2014
16.3 Statutory guidance in relation to part 7 (Safeguarding) of Social Services and Well-being (Wales) Act, 2014
16.4 Domiciliary Care Standards
16.5 Channel Duty Guidance: Protecting Vulnerable People from being drawn into terrorism (HM Government 2015)
16.6 Adult safeguarding: sharing information, Social Care Institute of Excellence
16.7 How to report a serious incident in your charity
16.9 Wales Safeguarding Procedures 2019
16.8 Employee Assistance Programme (EAP)

Group policies

17.1 Accident and incident reporting
17.2 Concerns, complaints and compliments
17.3 Confidentiality
17.4 Data handling and protection
17.5 Duty of candour (being open and honest)
17.6 Managing people’s money
17.7 Mental capacity and DOLS
17.8 Safeguarding children and young people
17.9 Speaking Up (Whistleblowing)
17.10 Equality, diversity and inclusion
17.11 What Dimensions does about... Abuse - easy read policy

Related procedures, decision flowcharts and forms

18.1 Criminal exploitation of vulnerable adults
18.2 Safeguarding contacts and protocols grab-sheet
18.3 Somebody is worried about you
18.4 Telling a relative or friend that a safeguarding concern has been raised
18.5 Supported decision making: a guide for supporters
18.6 CQC’s ‘Abuse or allegation of abuse concerning a person who uses the service’ notification form
18.7 CQC’s ‘Serious injury to a person who uses the service’ notification form
18.8 CQC’s ‘Incidents reported to or investigated by the police’ notification form
18.9 CQC’s 'Death of a person using the service' notification form
18.10 Modern slavery and human trafficking statement
18.11 Safeguarding enquiries protocol

Equality statement

19.1 Dimensions is committed to adhering to the Equality Act 2010 and the Public Sector Equality Duty. We aim to achieve this by promoting equality, respecting diversity and ensuring inclusion, eliminating unlawful discrimination for our colleagues and the people we support.

14.2 We adhere to the Equality Act 2010 by promoting equality, diversity, and human rights by treating all people we support and employ fairly and equitably whatever their protected characteristic:

- age
- disability
- gender reassignment
- marriage and civil partnership
- pregnancy and maternity
- race
- religion or belief
- sex
- sexual orientation

14.3 The equality impact analysis (EIA) is available on request by emailing the Head of Equality, Diversity and Inclusion.
Data protection statement

20.1 This policy involves handling personal data. So, when you carry out any procedures this policy describes, you should also think about what our **Data handling and protection policy** says.

20.2 Our **Data handling and protection policy** is our promise to handle personal data correctly under the Data Protection Act 2018 and the General Data Protection Regulation (UK-GDPR). It tells you how to keep that promise. It balances everyone’s rights to data privacy with the work we do.

20.3 For information on how we handle personal and sensitive data, please see our privacy notices.

Review

21.1 We will review this policy annually. But if changes in legislation, regulation or best practice mean we need to, we will review sooner.

21.2 If the changes are big, we will equality impact analyse (EIA) the policy again and send out to consultation in line with our **Policy development and consultation policy**.

21.3 For smaller changes, we will update this same version. We will record this in the Version control section below.

Glossary

22.1 Not all these words and terms appear in this policy. However, you may come across them in a safeguarding context.

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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<tbody>
<tr>
<td>Abuse</td>
<td>Includes physical; sexual; emotional; psychological; financial or material; neglect or acts of omission; discriminatory and organisational; domestic; modern slavery; self-neglect. It may consist of a single act or repeated acts. It can occur in any relationship and may result in harm to, or exploitation of the person subjected to it.</td>
</tr>
<tr>
<td>Association of Directors of Adult Social Care (ADASS)</td>
<td>The national leadership association for directors of local authority adult social care services.</td>
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<tr>
<td>Term</td>
<td>Definition</td>
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<tr>
<td><strong>Adults with care and support needs</strong></td>
<td>This is a person who is over 18 years old and has needs for care and support. Where safeguarding enquiries are concerned it doesn’t matter when it isn’t clear whether the person is entitled to these services.</td>
</tr>
</tbody>
</table>
| **Advocacy**                              | Taking actions to help people  
• say what they want  
• secure their rights  
• represent their interests, and  
• get the services they need. |
| **Best interests**                        | Anything done or decision made on behalf of a person who lacks mental capacity must be done in their best interest and in the least restrictive way. |
| **Care management**                       | This is the process of assessment of need, planning and co-ordinating of care to meet their long-term care needs, improve their quality of life and maintain their independence for as long as possible. |
| **Carer**                                 | Generally, this term refers to unpaid carers – relatives, friends, and so on.                                                           |
| **Case conference**                       | This is a multi-agency meeting held to discuss the outcome of a safeguarding (section 42) enquiry or assessment and to put in place a protection of safety plan. |
| **Coercion**                              | To coerce is to persuade a person by force or threats.                                                                                   |
| **Consent**                               | This is the person at risk’s voluntary and continuing permission for all other concerned parties to intervene on their behalf. They must understand the reasons and likely consequences of the intervention. |
| **Disclosure and Barring Service (DBS)**  | This the organisation responsible for barring unsuitable people from the children’s and adult’s workforce.                                |
| **Emergency duty team**                   | This is what local authorities usually call the team that responds to out-of-hours safeguarding concerns.                                |
| **Enquiry review meeting**                | This is the meeting that brings together people involved in the enquiry process to:  
• review the safeguarding plan  
• review progress of the investigation |
<table>
<thead>
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<tbody>
<tr>
<td>Term</td>
<td>Definition</td>
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<tr>
<td>– share information, and</td>
<td></td>
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<tr>
<td>– agree further action.</td>
<td></td>
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<tr>
<td>Enhanced provider monitoring (EPM)</td>
<td>This is another term for ‘large scale enquiry’.</td>
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<tr>
<td>Evidence</td>
<td>Any information in the form of:</td>
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<tr>
<td>– statements from anybody involved</td>
<td></td>
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<tr>
<td>– documents</td>
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<tr>
<td>– pictures, or</td>
<td></td>
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<tr>
<td>– records.</td>
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<tr>
<td>Female genital mutilation (FGM)</td>
<td>All procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons.</td>
</tr>
<tr>
<td>Large scale enquiry (LSE)</td>
<td>The process that a LA follows when it’s concerned about institutional abuse or provider failure. It offers a framework for multi-agency engagement with the provider to help improve the service or manage risks.</td>
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<tr>
<td>Multi-agency public protection arrangements (MAPPA)</td>
<td>These are the statutory arrangements for managing sexual and violent offenders.</td>
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<tr>
<td>Multi-agency risk assessment conference (MARAC)</td>
<td>This is a multi-agency forum of organisations that manage high-risk cases of domestic abuse, stalking and ‘honour’-based violence.</td>
</tr>
<tr>
<td>Multi-agency safeguarding hub (MASH)</td>
<td>This is a multi-agency forum of organisations created to share information about and make decisions on specific safeguarding concerns.</td>
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<tr>
<td>National Police Chief’s Council (NPCC)</td>
<td>The NPCC brings police forces in the UK together to help policing coordinate operations, reform, improve and provide value for money.</td>
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<tr>
<td>Person at risk</td>
<td>This the person we are concerned about.</td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
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<tr>
<td>-----------------------------------------------------------</td>
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<tr>
<td>Person in position of trust (PIPOT)</td>
<td>This is someone who works with or cares for adults with care and support needs in a paid or voluntary capacity.</td>
</tr>
<tr>
<td>Planning discussion</td>
<td>This is the initial discussion between the investigating agency and relevant others to:</td>
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<tr>
<td></td>
<td>• clarify concerns</td>
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<td>• identify the harm and the current risk</td>
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<td></td>
<td>• agree an interim protection plan, and</td>
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<td></td>
<td>• plan the enquiry.</td>
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<tr>
<td>Potential source of risk</td>
<td>This is anyone who we believe to be responsible for or implicated in the abuse of an adult.</td>
</tr>
<tr>
<td>Review</td>
<td>The process of re-examining a safeguarding plan for its effectiveness.</td>
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<tr>
<td>Runner</td>
<td>Someone who takes illegal drugs from one place to another.</td>
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<tr>
<td>Safeguarding Adults Board (SAB)</td>
<td>This is the board made up of the various organisations in a local authority involved in safeguarding adults.</td>
</tr>
<tr>
<td>Safeguarding enquiry (section 42 enquiry)</td>
<td>This is the process a local authority undertakes to:</td>
</tr>
<tr>
<td></td>
<td>• establish the facts of the case</td>
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<td></td>
<td>• ascertain the person at risk’s views and wishes</td>
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<td></td>
<td>• assess their need for protection and support</td>
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<tr>
<td></td>
<td>• protect them if needed</td>
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<tr>
<td></td>
<td>• decide what follow-up action is needed, and</td>
</tr>
<tr>
<td></td>
<td>• enable them to achieve resolution and recovery.</td>
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<tr>
<td></td>
<td>The duty to make an enquiry lies with the LA, but they can ask another agency to make the enquiry on their behalf.</td>
</tr>
<tr>
<td>Safeguarding plan</td>
<td>This the written plan that outlines the measures in place to protect and support the person at risk.</td>
</tr>
<tr>
<td>Safeguarding adults review</td>
<td>This is a review of the practices of agencies involved in a safeguarding matter. The SAB will commission it. Its aim is to learn lessons and improve the way we work.</td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
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<tr>
<td>----------------</td>
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<tr>
<td>Sanction</td>
<td>A punishment. So, examples of a physical sanction are a slap or stopping a person from accessing a particular room for behaving in a certain way.</td>
</tr>
<tr>
<td>Troll</td>
<td>Someone who leaves an intentionally annoying or offensive message on the internet in order to upset someone or to cause trouble.</td>
</tr>
<tr>
<td>Wilful neglect</td>
<td>This is a deliberate omission or failure to carry out an act of care by someone who has care of a person who lacks capacity to care for themselves.</td>
</tr>
</tbody>
</table>

**People and groups involved in writing and approving this policy**

<table>
<thead>
<tr>
<th>Policy owner:</th>
<th>Rhoda Iranloye, Quality, Governance &amp; Lived Experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy author/reviewer:</td>
<td>Jennifer Hickson, Safeguarding and Quality Governance Manager</td>
</tr>
</tbody>
</table>
| People and groups consulted: | Diversity Matters  
National Colleague Forum Policy Subgroup  
Dimensions Safeguarding Panel |

**Version control**

<table>
<thead>
<tr>
<th>Version number</th>
<th>Approved date:</th>
<th>Communication date:</th>
<th>Summary of minor changes</th>
</tr>
</thead>
</table>
| 13             | Policy approved on:  
1st February 2024 (Safeguarding Panel)  
21st March 2024 (Board)  
26th March 2024 | 26th March 2024 | Reviewed and updated to latest Group policy standards.  
Change of policy author/reviewer.  
Re-written policy, including more information regarding safeguarding in Wales, and included PiPoT procedures. |

Next review due: March 2025