

Safeguarding Induction Booklet

June 2025



HALTON
SAFEGUARDING
ADULTS
BOARD

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This induction booklet has been produced for people working with and in contact with, adults who are at risk of abuse or neglect, to help them understand what abuse is; how to recognise abuse and neglect and how to raise concerns they may have about abuse.

It is the responsibility of everyone to recognise suspected or actual abuse and to take appropriate action in line with Halton's Safeguarding Adults Policy and Procedures. **Ignoring abuse is not an option**

All individuals regardless of age, ability, race, gender, sexual orientation, faith or beliefs or any other characteristic should have the greatest possible control over their lives

People should be able to live as independently as possible and to make informed decisions about their own lifestyles, including the opportunity to take risks if they choose to do so, without fear of harm or abuse from others

Your understanding of adult safeguarding and your actions, can make a positive difference to adults at risk of abuse or neglect.

The key message is that we all have a responsibility to safeguard adults at risk from abuse. It is recommended that you should read and understand the guidance provided in this booklet, as it sets out the responsibilities you have to promote the safety of adults at risk and it will help you fulfill your responsibilities. This guidance is complementary to Halton's Safeguarding Adults Policy and Procedures which are listed and links to access them are provided in Section 26 of this booklet.

1. Introduction





2. Care Act

The Care Act was implemented in 2015 and put adult safeguarding on a statutory legal footing for the first time. In order to fulfill their legal requirements for adult safeguarding, all Local Authorities need to:

Lead a multi-agency local safeguarding system that seeks to prevent abuse and neglect and stop it quickly when it happens

Make enquiries, or request others to make them when they think an adult with care and support needs may be at risk of abuse or neglect and they need to find out what action may be needed

Establish a Safeguarding Adults Board with Local Authority, NHS and Police as core members and develop, share and implement a joint safeguarding strategy

Carry out a Safeguarding Adult Review (SAR) when someone with care and support needs dies as a result of abuse or neglect and there is concern that the Local Authority or its partners, could have done more to protect them

Arrange for an Independent Advocate to represent and support someone who is the subject of a safeguarding enquiry or review, if required

3. Six Principles of Safeguarding

Empowerment	Adults are encouraged to make their own decisions and are provided with support and information	<i>"I am consulted about the outcomes I want from the safeguarding process and these directly inform what happens"</i>
Prevention	Strategies are developed to prevent abuse and neglect and that promote resilience and self-determination	<i>"I am provided with easily understood information about what abuse is, how to recognise the signs and what I can do to seek help"</i>
Proportionate	A proportionate and least intrusive response is made balanced with the level of risk	<i>"I am confident that professionals will work in my interest and only get involved as much as needed"</i>
Protection	Adults are offered ways to protect themselves, and there is a co-ordinated response to adult safeguarding	<i>"I am provided with help and support to report abuse. I am supported to take part in the safeguarding process to the extent to which I want and to which I am able. I feel part of the safeguarding process and it is not something which happens around me. I am allowed to take risks"</i>
Partnerships	Local solutions through services working together within their communities	<i>"I am confident that information will be appropriately shared in a way that takes into account its personal and sensitive nature. I am confident that agencies will work together to find the most effective responses for my own situation"</i>
Accountable	Accountability and transparency in delivering a safeguarding response	<i>"I am clear about the roles and responsibilities of all the people involved in the response"</i>

4. What is Safeguarding?

Safeguarding is defined as:

“protecting an adult’s right to live in safety, free from abuse and neglect.”

Care and support statutory guidance, Chapter 14

Adult safeguarding is about preventing and responding to concerns of abuse, harm or neglect of adults. Staff should work together in partnership with adults so that they are:

- ❖ Safe and able to protect themselves from abuse and neglect
- ❖ Treated fairly and with dignity and respect
- ❖ Protected when they need to be
- ❖ Easily able to get the support, protection and services that they need



5. Aims of Adult Safeguarding

Stop abuse or neglect wherever possible

Prevent harm and reduce the risk of abuse or neglect to adults with care and support needs

Safeguarding adults in a way that supports them in making choices and having control about how they want to live

Promote an approach that concentrates on improving life for the adults concerned

Raise public awareness so that communities as a whole, alongside professionals, play their part in preventing, identifying and responding to abuse and neglect

Provide information and support in accessible ways to help adults understand the different types of abuse, how to stay safe and what to do to raise a concern about the safety or wellbeing of an adult

Address what has caused the abuse

6. Who do Adult Safeguarding duties apply to?

An adult who:

- ❖ Has needs for care and support (whether or not the authority is meeting any of those needs) **and**
- ❖ Is experiencing, or is at risk of, abuse or neglect **and**
- ❖ As a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it



7. Who abuses and neglects adults?

Anyone can abuse or cause neglect, including:

- ❖ Spouses/Partners
- ❖ Other family members
- ❖ Neighbours
- ❖ Friends
- ❖ Acquaintances
- ❖ Local residents
- ❖ People who deliberately exploit adults they perceive as vulnerable to abuse
- ❖ Paid staff or professionals (people in a position of trust)
- ❖ Volunteers
- ❖ Strangers
- ❖ Carers
- ❖ Other adults with care and support needs



8. Where does abuse take place?



Abuse can happen anywhere, for example:

- ❖ In someone's home
- ❖ In a public place
- ❖ In hospital
- ❖ In a care home
- ❖ In a college
- ❖ In a service that is based in the community

It can take place when an adult lives alone or with others

9. Types of Abuse

Types of Abuse	Description / Supporting Guidance
Discriminatory	<p>Discrimination on the grounds of race, religion, age, disability, gender, sexual orientation and political views, along with racist, sexist, homophobic or ageist comments or jokes, or comments and jokes based on a person's disability or any other form of harassment, slur or similar treatment. Excluding a person from activities on the basis they are "not liked" is also discriminatory abuse, for example, hate crime.</p>
Domestic Abuse	<p>The cross-government definition of domestic violence and abuse is: Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between people aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass but it is not limited to:</p> <ul style="list-style-type: none">➤ Psychological➤ Sexual (including female genital mutilation)➤ Financial➤ Emotional➤ Forced marriage➤ Honour-based violence <p>A new offence of coercive and controlling behaviour in intimate and familial relationships was introduced in the Serious Crime Act 2015. The offence closes the gap in the law around patterns of coercive and controlling behaviour during a relationship between intimate partners, former partners who still live together, or family members. Sending a clear message that it is wrong to violate the trust of those closest to you, providing better protection to victims experiencing continuous abuse allowing for earlier identification, intervention and prevention.</p>

Types of Abuse

Types of Abuse	Description / Supporting Guidance
Financial or Material Abuse	<p>Theft, fraud, internet scamming, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.</p> <p>Internet scams, postal scams and doorstep crime are more often than not, targeted at adults at risk and all forms of financial abuse. These scams are becoming ever more sophisticated and elaborate.</p> <p>For example: Internet scammers can build very convincing website. People can be referred to a website to check the caller's legitimacy but this may be a copy of a legitimate website. Post scams are mass produced letters which are made to look like personal letters or important documents. Doorstep criminals call unannounced at the adult's home under the guise of legitimate business and offering to fix an often non-existent problem with their property. Sometimes they pose as police officers or someone in a position of authority.</p> <p>In all cases, this is financial abuse and the adult at risk can be persuaded to part with large sums of money in some cases, their life savings. These instances should always be reported to the local police service and local authority Trading Standards for investigation. The SAB will need to consider how to involve local Trading Standards in its work. These scams and crimes can seriously affect the health, including mental health, of an adult at risk. Agencies working together can better protect adults at risk. Failure to do so can result in an increased cost to the state, especially if the adult at risk loses their income and independence.</p>

Types of Abuse

Types of Abuse	Description / Supporting Guidance
Modern Slavery	<p>Modern slavery can be defined as slavery, servitude and forced or compulsory labour.</p> <p>A person commits an offence if:</p> <ul style="list-style-type: none">➤ The person holds another person in slavery or servitude and the circumstances are such that the person knows or ought to know that the other person is held in slavery or servitude <p>or</p> <ul style="list-style-type: none">➤ The person requires another person to perform forced or compulsory labour and the circumstances are such that the person knows or ought to know that the other person is being required to perform forced or compulsory labour <p>There are many different characteristics that distinguish slavery from other human rights violations, however, only one needs to be present for slavery to exist. Someone is in slavery if they are:</p> <ul style="list-style-type: none">❖ Forced to work – through mental or physical threat❖ Owned or controlled by an “employer”, usually through mental or physical abuse or the threat of abuse❖ Dehumanised, treated as a commodity or brought and sold as property❖ Physically constrained or has restrictions placed on his/her freedom of movement❖ Subject to human trafficking

Types of Abuse

Types of Abuse	Description / Supporting Guidance
	<p>Contemporary slavery takes various forms and affects people of all ages, gender and race. Adults who are enslaved are not always subject to human trafficking.</p> <p>Recent court cases have found homeless adults promised paid work opportunities, enslaved and forced to work and live in dehumanising conditions and adults with a learning difficulty restricted in their movements and threatened to hand over their finances and work for no gains. From 1st November 2015, specified public authorities have a duty to notify the Secretary of State of any person identified in England and Wales as a suspected victim of slavery or human trafficking under Section 52 of the Modern Slavery Act 2015.</p>
Neglect and Acts of Omission	<p>Ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, social care or educational services and the withholding of the necessities of life, such as, medication; adequate nutrition and heating.</p> <p>Neglect also includes a failure to intervene in situations that are dangerous to the person concerned or to others, particularly when the person lacks the mental capacity to assess risk themselves.</p>
Organisational Abuse	<p>Is the mistreatment, abuse or neglect by a regime or people in a setting or service where the adult lives or that they use. Such abuse violates the person's dignity and represents a lack of respect for their human rights.</p>
Physical Abuse	<p>Assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.</p>

Types of Abuse

Types of Abuse	Description / Supporting Guidance
Psychological Abuse	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.
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 and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.
Self-Neglect	This covers a wide range of behaviour concerning a person's personal hygiene, health or surroundings and includes behaviour such as hoarding. It should be noted that self-neglect may not prompt a Section 42 Enquiry. An assessment should be made on a case-by-case basis. A decision on whether a safeguarding response is needed will depend on the person's ability to protect themselves by controlling their own behaviour. There may come a point when they are no longer able to do this, without external support.

10. Signs of what constitutes Abuse and Neglect

Types of Abuse	Signs which constitute Abuse or Neglect
Physical Abuse	<ul style="list-style-type: none">❖ Assault❖ Hitting❖ Slapping❖ Pushing❖ Misuse of medication❖ Restraint❖ Inappropriate physical sanctions
Domestic Abuse	<ul style="list-style-type: none">❖ Psychological❖ Physical❖ Sexual❖ Financial❖ Emotional Abuse❖ So called “honour” based violence
Sexual Abuse	<ul style="list-style-type: none">❖ Rape❖ Indecent exposure❖ Sexual harassment❖ Inappropriate looking or touching❖ Sexual teasing or innuendo❖ Sexual photography

Signs of what constitutes Abuse and Neglect

Types of Abuse	Signs which constitute Abuse or Neglect
	<ul style="list-style-type: none">❖ Subject to pornography or witnessing sexual acts❖ Sexual assault❖ Sexual acts which the adult has not consented or was pressured into consenting
Psychological Abuse	<ul style="list-style-type: none">❖ 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 or Material Abuse	<ul style="list-style-type: none">❖ Theft❖ Fraud

Signs of what constitutes Abuse and Neglect

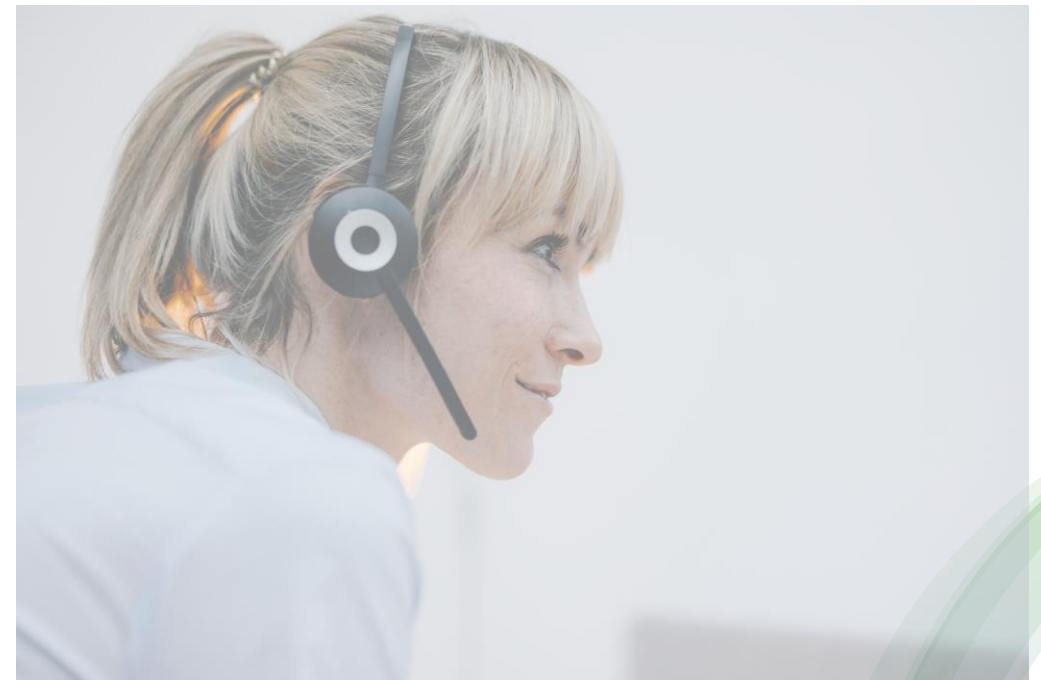
Types of Abuse	Signs which constitute Abuse or Neglect
	<ul style="list-style-type: none">❖ Internet scamming❖ Coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions❖ The misuse or misappropriation of property, possessions or benefits
Modern Slavery	<ul style="list-style-type: none">❖ 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
Discriminatory Abuse	<ul style="list-style-type: none">❖ Harrassment❖ Slurs or similar treatment because of:<ul style="list-style-type: none">➤ Race➤ Gender or Gender Identity➤ Age➤ Disability➤ Sexual Orientation➤ Religion

Signs of what constitutes Abuse and Neglect

Types of Abuse	Signs which constitute Abuse or Neglect
Organisational Abuse	Neglect and poor care practice within an institution or specific care setting such as hospital or care home, for example, or in relation to care provided in one's 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
Neglect and Acts of Omission	<ul style="list-style-type: none">❖ Ignoring medical, emotional or physical care needs❖ Failure to provide access to appropriate health, care, support or educational services❖ The withholding of the necessities of life, such as medication, adequate nutrition and heating
Self-Neglect	This covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding. It should be noted that self-neglect may not prompt a Section 42 Enquiry. An assessment should be made on a case-by-case basis. A decision on whether a response is required under safeguarding will depend on the adult's ability to protect themselves by controlling their own behaviour. There may come a point when they are no longer able to do this, without external support

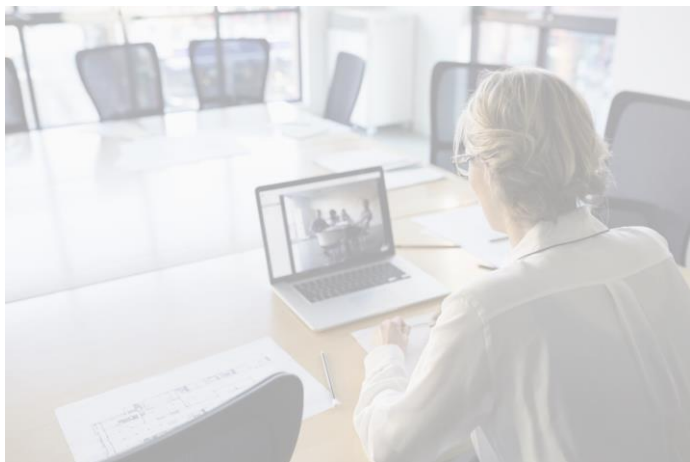
11. Provider Led Concerns

It was recognised that there will be occasions when it is appropriate for provider agencies to respond to incidents of poor practice, without the need to initiate multi-agency safeguarding procedures. Poor practice will always require a response because if it is not challenged, it can result in a further deterioration in standards. In many instances, the Provider Manager will be the appropriate person to take remedial action. HBC Guidance for Reporting Adult Safeguarding and Provider Led Concerns outlines those circumstances in which the Provider Service should take responsibility for responding to incidents of poor practice without the need to raise a safeguarding concern.



12. What is a safeguarding disclosure and how should it be dealt with?

A disclosure is when an adult at risk tells another person what has happened to them. If someone discloses abuse it is important to respond in the correct way:



Do	Do Not
Listen patiently and calmly to what the person is saying even if it does not make sense	Do not ask questions. It is not your job to investigate
Observe the adult at risk and what is happening to them	Do not dismiss what someone is telling you, even if it appears unlikely
Stay calm	Do not appear shocked or disgusted
Offer reassurance that they are doing the right thing	Do not promise that “everything will be ok”
Respect confidentiality as far as you are able	Do not promise to keep secrets
Tell the adult at risk what you are going to do next	Do not keep information to yourself.
Report straight away to your manager and record exactly what you have heard	Do not confront the person alleged to have caused harm

The first person aware of possible abuse needs to act as follows:

MAKE SAFE

- Take reasonable steps to ensure the adult is in no immediate danger – **INTERIM MEASURES**
- Seek emergency help (first aid, medical treatment, police involvement) if there are immediate risks to health or safety
- Do **NOT** confront the person alleged to have caused harm.

INFORM

- A Line Manager or other Senior Manager immediately
- The Police, if a crime has been committed

RECORD

- Details of the disclosure, concern or suspicion
- The actions taken so far and the reasons for any decisions
- Follow your own organisational record keeping procedures

Stages of the Safeguarding Process

Stage 1: Safeguarding Concern

- This is the action of reporting concerns and allegations to the multi-agency safeguarding adults contact point in Halton. All safeguarding concerns must be raised via the Halton Borough Council Contact Centre on 0151 907 8306 or, if reported by HBC Adult Social Care, they should be loaded onto Eclipse.
- **Target timescale: Same day as concerns are identified**

Stage 2: Risk Assessment

- Having received the safeguarding concern, IASU will triage to determine whether to refer it for further enquiries under the safeguarding adults procedures.
- **Target timescale: By the end of the next working day following the concern being raised**

Stage 3: Section 42 Enquiry

- Safeguarding activities are undertaken in line with the agreed risk assessment. The risk assessment and protection plan are kept under review throughout.
- **Target timescale: Completed within 28 days of the alert**

Stage 4: Case Closure

- The responsible team co-ordinating the safeguarding enquiries will complete the case closure form on Eclipse, which also includes the Making Safeguarding Personal questionnaire which is to be completed with the adult at risk at the conclusion of the enquiries. Feedback should also be provided to the referrer of the safeguarding concern as to the outcome of the S42 enquiry.
- **Target timescale: Completed at the conclusion of the Section 42 Enquiry**

13. What is a Safeguarding Enquiry?

This refers to any enquiries made or instigated by the local authority **AFTER** receiving a safeguarding concern. There are two types of safeguarding enquiries. If the adult fits the criteria outlines in Section 42 of the Care Act, then the Local Authority is required by law to conduct enquiries or ensure, that enquiries are made. These will be referred to as **Statutory Safeguarding Enquiries**. Local authorities will sometimes decide to make safeguarding enquiries for an adult who does not fit the Section 42 criteria. These enquiries are not required by law and therefore will be referred to as **Non-Statutory Enquiries**.

Non-Statutory Enquiries – these are safeguarding enquiries carried out on behalf of adults who do not fit the criteria outlined in Section 42 of the Care Act. These enquiries may relate to an adult who:

Is believed to be experiencing, or is at risk of, abuse or neglect

Does not have care and support needs (but might just have support needs)

Who can carry out an Enquiry?

Although the local authority is the lead agency for making enquiries, it may cause others to do so. The specific circumstances will often determine who is the most appropriate person/agency to carry out an enquiry such as:

- ❖ **Care Provider**
- ❖ **Health Professional**
- ❖ **Social Worker**

The Local Authority will determine who is the most relevant person/agency to carry out an enquiry. The Police will lead criminal investigations. The Local Authority will decide when a case can be closed.



14. Guidance for Staff

Safe Practice:

Your behaviour should be open and transparent

You must adopt high standards of personal conduct

Your behaviour in or out of the setting must not compromise your position within the setting

Avoid being alone with a person behind a closed, windowless door

Never give your personal mobile number or personal email address to a child or adult at risk

Be aware of the dangers of Social Media (Facebook; Instagram; Tik Tok; Threads etc)

Challenging and reporting worrying behaviour and/or practice by others:

Self-report if you think you got it wrong or may be misinterpreted

Voice your concerns, suspicions or uneasiness as soon as possible

Pinpoint what practice is concerning you and why

Don't think "What if I'm wrong?" think "What if I'm right?"

Information to be recorded:

Names of people involved, including the person at risk of harm and the person alleged to have caused harm

What you heard

What you saw

Date and time

Sign and print name

Pass it to the Designated Safeguarding person for action, secure storage, monitoring and reviewing. However, you must ensure you tell them of your concerns as soon as possible without delay, even if you have not yet written them down

Importance of information sharing:

People get the services they need when they need them

To prevent significant harm arising to people

Ensuring effective, coordinated, cooperative and collaborative practice across agencies

Confidential Information:

Confidential information is information that is sensitive, not already in the public domain or shared in confidence

This information can be shared if authorised to be shared by the person who provides it or to whom it relates

Can be shared – even if not authorised by the person – if there is evidence of reasonable belief that they are suffering, or at risk of suffering, significant harm or they lack capacity to give informed consent for sharing the information and it has been deemed in their Best Interests to do so

Whether to share or not – you **MUST** record the reasons for your decision

15. Safeguarding Adults Boards

As mentioned earlier, there are certain statutory duties which must be fulfilled under the Care Act 2014. Each Local Authority must set up a Safeguarding Adults Board (SAB).

A SAB has three core duties:

It must publish a Strategic Plan for each financial year. This plan should state how the board will meet its main objectives and what the members will do to achieve this

It must publish an annual report detailing what the SAB has done during the past year to achieve its main objectives

It must conduct any Safeguarding Adult Reviews in accordance with Section 44 of the Care Act

The following organisations must be represented on the SAB:

- ❖ **Local Authority**
- ❖ **Police**
- ❖ **Health**



16. Safeguarding Adult Reviews

The Care Act requires a SAB to arrange a Safeguarding Adult Review (SAR) if:

There is reasonable cause for concern about how the SAB, its members or organisations worked together to safeguard the adult

AND

The person has died (including death by suicide) and the SAB knows/suspects this resulted from abuse or neglect (whether or not it knew about this before the person died)

OR

The person is still alive but the SAB knows or suspects they have experienced serious abuse/neglect, sustained potentially life-threatening injury, serious sexual abuse/permanent impairment of health or development

The purpose of a Safeguarding Adult Review is to:

- ❖ **Determine what might have been done differently to prevent the harm or death**
- ❖ **Identify lessons and apply these to future cases to prevent similar harm again**
- ❖ **Review the effectiveness of multi-agency safeguarding arrangements and procedures**
- ❖ **Inform and improve future practice and partnership working**
- ❖ **Improve practice by acting on learning (developing best practice)**
- ❖ **Highlight any good practice identified**

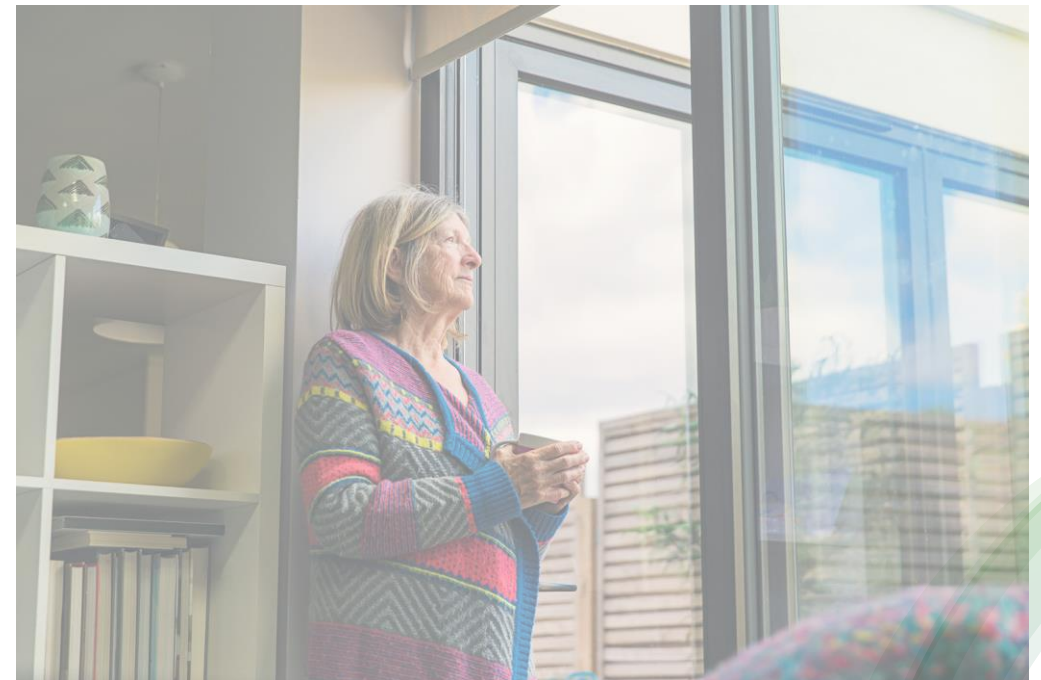


17. Making Safeguarding Personal

Halton adopts the principle of **“no decision about me without me”** and means that the adult, their families and carers are working together with agencies to find the right solutions to keep the person safe and to support them in making informed choices.

A person led approach leads to services which are: person-centred and focused on the outcomes identified by the person; planned, commissioned and delivered in a joined-up way between organisations; responsive and which can be changed when required.

Personalised care and support is for everyone, but some people will need more support than others to make choices and manage risks. Making risks clear and understood is crucial to empowering and safeguarding adults and in recognising people as “experts in their own lives”. A person led approach is supported by personalised information and advice and where needed, access to advocacy support.



18. Values – Supporting Adults at Risk of Abuse

Safeguarding has the highest priority across all organisations. Values include:

People are able to access support and protection to live independently and have control over their lives

Appropriate safeguarding options should be discussed with the adult at risk according to their wishes and preferences. They should take proper account of any additional factors associated with the person's disability, age, gender, sexual orientation, race, religion, culture or lifestyle

The adult at risk should be the primary focus of decision making, determining what safeguards they want in place and provided with options so that they maintain choice and control

All action should begin with the assumption that the adult at risk is best placed to judge their own situation and knows best the outcomes, goals and well-being they want to achieve

The person's views, wishes, feelings and beliefs should be paramount and are critical to a personalised way of working with them

There is a presumption that adults have mental capacity to make informed decisions about their lives. If someone has been assessed as not having mental capacity to make decisions about their safety, decision making will be made in their best interests as set out in the Mental Capacity Act 2005 and the associated Code of Practice

Adults at risk will have access to supported decision making to achieve their desired outcomes involving their representative/advocate where appropriate

Adults at risk should be given accessible information, advice and support and be supported to be included in all forums that are making decisions about their lives. The maxim "No decision about me without me" should govern all decision making

All decisions should be made with the adult at risk and promote their wellbeing and be reasonable, justified, proportionate and ethical

Timeliness should be determined by the personal circumstances of the adult at risk

Every effort should be made to ensure that adults at risk are afforded appropriate protection under the law and have full access to the criminal justice system when a crime has been committed

19. Deprivation of Liberty Safeguards

The Deprivation of Liberty Safeguards (DoLS) provide protection to people in hospital and care homes. DoLS apply to people who have mental ill health and do not have the capacity to decide whether or not they should be accommodated in the relevant care home or hospital to receive care or treatment.

The acid test to be applied to decide if DoLS is applicable is:

A person is being deprived on their liberty if they:

Are under continuous supervision and control

Are not free to leave, and

Lack capacity to consent to these things

Requests for authorisation to deprive someone of their liberty, if considered in the person's Best Interests, are made through the Local Authority as the Supervisory Body. All decisions on care and treatment must comply with the Mental Capacity Act (MCA) and the DoLS Code of Practice. In case of serious dispute, it may be necessary for the Local Authority to apply to the Court of Protection.





20. Advocacy and Support

The Care Act requires that a local authority must arrange, where appropriate, for an independent advocate to represent and support an adult who is the subject of a safeguarding enquiry or Safeguarding Adult Review, where the adult has “substantial difficulty” in being involved in the process and where there is no other appropriate individual to help them.

21. Sharing Information

It is good practice to seek consent from individuals before sharing their personal data, though not always practical or realistic in the context of adult safeguarding.

Information sharing agreements do not in themselves make the sharing of personal and sensitive data legal or ethical. The General Data Protections Regulations 2018 sets out the legal context and is the overarching protocol which promotes best practice and cooperation across partner organisations.



22. Whistle Blowing

It is the legal duty of every employee who works with adults at risk to report potential or actual abuse. Therefore, it is the responsibility of the employer to promote openness among staff and promote this process, taking the lead in giving clear priority to the protection of adults at risk. Procedures which empower staff to voice concerns about the practice they encounter, should be owned and promoted by the voluntary, independent, statutory or private sector agencies which employ them. These policies are often known as Codes of Practice/Conduct or Whistle-Blowing Procedures. All members of staff or volunteers, who have concerns about the way a vulnerable person is being treated in their place of work, should follow the whistle-blowing procedures in their own organisation.



23. Record Keeping



Good record keeping is a vital component of professional practice. Whenever a complaint or allegation of abuse is made, all agencies should keep clear and accurate records and each agency should identify procedures for incorporating all relevant records into a file, to record all action taken. When abuse or neglect is raised, managers need to look for past incidents, concerns, risks and patterns. In many situations, abuse and neglect can arise from a range of incidents over a period of time.

24. Care Certificate Standards

The Care Certificate is an identified set of standards that health and social workers adhere to in their daily working life. The Care Certificate gives everyone the confidence that these workers have the same introductory skills, knowledge and behaviours to provide compassionate, safe and high quality care and support.

The 16 standards in the Care Certificate are as follows:

- 1. Understand your role**
- 2. Your personal development**
- 3. Duty of Care**
- 4. Equality, Diversity, Inclusion and Human Rights**
- 5. Working in a person-centred way**
- 6. Communication**
- 7. Privacy and Dignity**
- 8. Fluids and nutrition**
- 9. Awareness of mental health and dementia**
- 10. Adult Safeguarding**
- 11. Safeguarding Children**
- 12. Basic life support**
- 13. Health and Safety**
- 14. Handling information**
- 15. Infection prevention & control**
- 16. Awareness of learning disability & autism**

25. Dignity

The Dignity in Care campaign was launched in November 2006. The campaign's core values are about having dignity in our hearts, minds and actions, changing the culture of services and placing a greater emphasis on improving the quality of care and the experience of adults accessing services.

There are 10 Dignity Dos which everyone should strive for:

1.	Have a zero tolerance of all forms of abuse
2.	Support people with the same respect you would want yourself or a member of your family
3.	Treat each person as an individual by offering a personalised service
4.	Enable people to maintain the maximum possible level of independence, choice and control
5.	Listen and support people to express their needs and wants
6.	Respect people's right to privacy
7.	Ensure people feel able to complain without fear of retribution
8.	Engage with family members and carers as care partners
9.	Assist people to maintain confidence and positive self-esteem
10.	Act to alleviate people's loneliness and isolation

26. Halton Safeguarding Documents & Resources

For further information on HBCs Safeguarding Policy and Procedures, please refer to the following documents:

Safeguarding Adults Policy April 2024

Safeguarding Adults in Halton: Procedures April 2024

Guidance for Reporting Adult Safeguarding & Provider Led Concerns April 2024

All of these documents can be found within the Adult Social Policy Library on the HBC intranet, which can be accessed via the following link: [ASC Policy Library – Home](#)

There is also a Halton Safeguarding Adults website, which contains a wide range of useful resources for both professionals and members of the public. The website can be accessed via the following link: [Adult Safeguarding | Adult Safeguarding](#)

Halton Safeguarding Adults Board provides a range of training courses which are free to attend and cover a wide range of safeguarding adult topics such as self-neglect; financial abuse and provider led concerns. Details of the courses available can be accessed via the following link:

[Microsoft Word - HSAB training programme 2025-26](#)

27. Adult Safeguarding Glossary

Abbreviation	Meaning	Abbreviation	Meaning
ADASS	Association of Directors of Adult Social Services	AMPH	Approved Mental Health Professional
BIA	Best Interest Assessor	CSE	Child Sexual Exploitation
CSP	Community Safety Partnership	CQC	Care Quality Commission
DA	Domestic Abuse	DASH	Domestic Abuse, Stalking & Harassment and Honour-Based Violence
DASV	Domestic Abuse & Sexual Violence	DBS	Disclosure & Barring Service
DHR	Domestic Homicide Review	DoLS	Deprivation of Liberty Safeguards
DoH	Department of Health	DSL	Designated Safeguarding Lead
DV	Domestic Violence	DVPN	Domestic Violence Protection Notice
DVPO	Domestic Violence Protection Order	EI	Early Intervention
FGM	Female Genital Mutilation	FMU	Forced Marriage Unit
GDPR	General Data Protection Regulations 2018	HBV	Honour Based Violence

Abbreviation	Meaning	Abbreviation	Meaning
ICB	Integrated Care Board	IMCA	Independent Mental Capacity Advocate
IMHA	Independent Mental Health Advocate	IMR	Internal Management Review or Independent Management Review
LA	Local Authority	LPA	Lasting Power of Attorney
LPS	Liberty Protection Safeguards	LSCB	Local Safeguarding Children's Board
MAPPA	Multi Agency Public Protection Arrangements	MARAM	Multi Agency Risk Assessment Management
MAM	Multi Agency Meeting	MARAC	Multi Agency Risk Assessment Conference
MDS	Modern Day Slavery	MDT	Multi Disciplinary Team meeting
MSP	Making Safeguarding Personal	NRM	National Referral Mechanism
OPG	Office of the Public Guardian	PIPOT	Person in a Position of Trust
PLC	Provider Led Concern	PLE	Provider Led Enquiry
S42	Section 42 Enquiry	SAB	Safeguarding Adults Board
SAR	Safeguarding Adults Review	SCIE	Social Care Institute for Excellence
SCR	Serious Case Review		

28. Safeguarding Induction Questionnaire

These questions will demonstrate to your line manager, that you have understood the information contained in this booklet.

1. Using your own words, what does the term “safeguarding” mean?

2. Can you list 8 types of abuse and give 2 examples of each?



3. Whose responsibility is it to recognise possible signs of abuse?

4. Who do safeguarding duties apply to according to the Care Act 2014?



5. What is a safeguarding enquiry and who is able to carry them out?

6. Please list 5 of the Dignity Dos that help maintain a person’s dignity?

7. What would you do if you had a concern about the behaviour or practice of someone who works with adults at risk (this could be in your organisation or another)

Your line manager will check your answers and discuss with you further any which do not demonstrate a clear understanding of safeguarding

Print Name (Employee).....

Signature

Print Name (Line Manager)

Signature

Date