



# **POLICY & PROCEDURES FOR SAFEGUARDING ADULTS**

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**Clare Morley**

Chief Executive Officer

## 1. Introduction

- 1.1. Safeguarding adults is everybody's business. Rise is committed to creating and maintaining a safe and positive environment and accepts our responsibility to safeguard the welfare of all adults in accordance with the Care Act 2014.
- 1.2. This safeguarding adults policy and procedures applies to all sporting opportunities and physical activities organised under the auspices of Rise. Rise will encourage and support partner organisations, including community and voluntary sector organisations, clubs and other providers, to adopt and demonstrate their commitment to the principles and practice of equality as set out in this safeguarding adults policy and procedures.
- 1.3. Rise will require any organisations delivering services under its auspices to adopt minimum safeguarding guidelines (e.g. as agreed through contracts / service level agreements).

## 2. Principles

- 2.1. The guidance given in this policy and procedures is based on the following principles:

### The six principles of adult safeguarding

The Care Act sets out the following principles that should underpin the safeguarding of adults:

- **Empowerment** - People being supported and encouraged to make their own decisions and informed consent.  
"I am asked what I want as the outcomes from the safeguarding process and these directly inform what happens."
- **Prevention** – It is better to take action before harm occurs.  
"I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help."
- **Proportionality** – The least intrusive response appropriate to the risk presented.  
"I am sure that the professionals will work in my interest, as I see them and they will only get involved as much as needed."
- **Protection** – Support and representation for those in greatest need.  
"I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want."
- **Partnership** – Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.  
"I know that staff treat any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me."

- **Accountability** – Accountability and transparency in delivering safeguarding.

"I understand the role of everyone involved in my life and so do they."

Also underpinning safeguarding adults is 'Making Safeguarding Personal' – when the adult has capacity to make their own decisions, any action should be taken in line with their wishes as far as is appropriate.

- 2.2. All adults, regardless of age, ability or disability, gender, race, religion or beliefs, ethnic origin, sexual orientation, marital/civil partnership or gender status have the right to be protected from abuse and poor practice, and be able to participate in sport and physical activity in an enjoyable and safe environment.
- 2.3. Rise will seek to try to ensure that sport and physical activity delivery locally is inclusive and makes reasonable adjustments for any ability, disability or impairment, and will also commit to continuous development, monitoring and review.
- 2.4. The rights, dignity and worth of all adults will always be respected.
- 2.5. We recognise that ability and disability can change over time, such that some adults may be additionally vulnerable to abuse, for example those who have a dependency on others or have different communication needs. It is important that the needs of those additionally vulnerable adults are fully considered, they are protected from harm and abuse, and they are able to take part in physical activity in a safe environment.
- 2.6. We recognise that some adults, such as a disabled adult, may or may not identify themselves as, or be identified as, an adult 'at risk'.
- 2.7. We all have a shared responsibility to ensure the safety and well-being of all adults and will act appropriately and report concerns whether these concerns arise within Rise's activities, or other activities within the wider community, for example the inappropriate behaviour of a coach or activity leader.
- 2.8. All allegations will be taken seriously and responded to quickly in line with Rise's Safeguarding Adults Policy and Procedures.
- 2.9. Rise recognises the role and responsibilities of the statutory agencies in safeguarding adults and is committed to complying with the procedures of the Local Safeguarding Adults Boards.

### 3. Guidance and Legislation

- 3.1. The practices and procedures within this policy are based on the principles contained within UK legislation and Government Guidance and have been developed to complement the Safeguarding Adults Boards' policies and procedures, and take the following into consideration:
  - The Data Protection Act 1994, 1998 and 2018
  - The Care Act 2014
  - The Protection of Freedoms Act 2012
  - Domestic Violence, Crime and Victims (Amendment) Act 2012

- The Equality Act 2010
- The Safeguarding Vulnerable Groups Act 2006
- Mental Capacity Act 2005
- Sexual Offences Act 2003
- The Human Rights Act 1998

## 4. Definitions

To assist working through and understanding this policy, a number of key definitions need to be explained:

- 4.1. **Adult at Risk** is a person aged 18 or over who is in need of care and support regardless of whether or not they are receiving it, and because of those needs they are unable to protect themselves against abuse or neglect. In recent years there has been a marked shift away from using the term 'vulnerable' to describe adults potentially at risk from harm or abuse.
- 4.2. **Abuse** is a violation of an individual's human and civil rights by another person or persons. Please see section 5 for further explanations.
- 4.3. An **Adult** is anyone aged 18 or over.
- 4.4. **Adult safeguarding** is protecting a person's right to live in safety, free from abuse and neglect.
- 4.5. **Capacity** refers to the ability to make a decision at a particular time, for example, when under considerable stress. The starting assumption must always be that a person has the capacity to make a decision unless it can be established that they lack capacity (Mental Capacity Act 2005).

## 5. Types of Abuse and Neglect - Definitions from the Care Act 2014

- 5.1. This is not intended to be an exhaustive list but an illustrative guide as to the sort of behaviour or issues which could give rise to a safeguarding concern.
  - 5.1.1. **Self-neglect** – this covers a wide range of behaviours: neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding.
  - 5.1.2. **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.
  - 5.1.3. **Domestic Abuse** – including psychological, physical, sexual, financial and emotional abuse. It also includes so called 'honour' based violence. Sport/physical activity providers may notice a power imbalance between a participant and a family member. For example, a participant with Downs syndrome may be quiet and withdrawn when their brother comes to collect them from sessions, in contrast to their personal assistant whom they greet with a smile.

- 5.1.4. **Discriminatory** – discrimination is abuse which centres on a difference or perceived difference particularly with respect to race, gender or disability or any of the protected characteristics of the Equality Act. This could be, for example, the harassing of a club member or participant because they are or are perceived to be transgender.
  - 5.1.5. **Organisational Abuse** – includes 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 because of the structure, policies, processes and practices within an organisation.
  - 5.1.6. **Physical Abuse** – includes hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions. This could, for example, be a coach or activity leader intentionally striking a participant.
  - 5.1.7. **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 or was pressured into consenting. This could, for example, be a fellow participant who sends unwanted sexually explicit text messages to an adult with learning disabilities that they are participating/training alongside.
  - 5.1.8. **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. This could be, for example, someone taking equipment from a participant with dementia.
  - 5.1.9. **Neglect** – including ignoring medical or physical care needs, failure to provide access to appropriate health social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating. For example, this could be a coach/activity leader not ensuring participants have access to water.
  - 5.1.10. **Emotional or Psychological Abuse** – this includes threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks. This could be, for example, a participant threatening another participant with physical harm and persistently blaming them for poor performance.
- 5.2. The following are not included in the Care Act 2014 but are also relevant:
- 5.2.1. **Cyber Bullying** - cyber bullying occurs when someone repeatedly makes fun of another person online, or repeatedly picks on another person through emails or text messages, or uses online forums with the intention of harming, damaging, humiliating or isolating another person. It can be used to carry out many different types of bullying (such as racist bullying, homophobic bullying,

or bullying related to special educational needs and disabilities) but instead of the perpetrator carrying out the bullying face-to-face, they use technology as a means to do it.

- 5.2.2. **Forced Marriage** - forced marriage is a term used to describe a marriage in which one or both parties are married without their consent or against their will. A forced marriage differs from an arranged marriage, in which both parties consent to the assistance of a third party in identifying a spouse. The Anti-Social Behaviour, Crime and Policing Act 2014 makes it a criminal offence to force someone to marry.
- 5.2.3. **Mate Crime** - a 'mate crime', as defined by the Safety Net Project, is 'when vulnerable people are befriended by members of the community who go on to exploit and take advantage of them. It may not be an illegal act but still has a negative effect on the individual.' Mate Crime is carried out by someone the adult knows and it often happens in private. In recent years there have been a number of Serious Case Reviews relating to people with a learning disability who were murdered or seriously harmed by people who purported to be their friend.
- 5.2.4. **Radicalisation** - the aim of radicalisation is to attract people to that individual's reasoning, inspiring new recruits and embedding their extreme views and persuading vulnerable individuals of the legitimacy of their cause. This may be done directly through a relationship, or through social media.

## **6. Signs and indicators of abuse and neglect**

- 6.1. Abuse can take place in any context and by all manner of perpetrator. Abuse may be inflicted by anyone a participant comes into contact with in a sporting / physical activity environment. Likewise, club members, participants, workers, volunteers, coaches or activity leaders may suspect that a participant is being abused or neglected outside of the club/activity setting, for example by spouses, partners, family members or members of the wider community etc.
- 6.2. There are many signs and indicators that may suggest someone is being abused or neglected, these include but are not limited to:
  - 6.2.1. Unexplained bruises or injuries – or a lack of medical attention when an injury is present.
  - 6.2.2. A person has belongings or money that is going missing.
  - 6.2.3. A person is not attending / no longer enjoying their sessions.
  - 6.2.4. Someone losing or gaining weight / having an unkempt appearance.
  - 6.2.5. A change in the behaviour or confidence of a person.
  - 6.2.6. They may self-harm.
  - 6.2.7. They may have a fear of a particular group or individual.
  - 6.2.8. They may tell you / another person they are being abused – i.e. a disclosure.

## **7. What to do if you have a concern or someone raises concerns with you**

- 7.1. You may become aware that abuse or poor practice is taking place, suspect abuse or poor practice may be occurring, or be told about something that may be abuse or poor practice. In such cases, you must report this to either Rise's Lead or Deputy Safeguarding Adults Officer in the first instance, or, if they are not available, follow the Referral Procedure provided in Appendix 1. Please note that if the Lead Safeguarding Adults Officer is being implicated you should report it to the Deputy, and vice versa.
- 7.2. It is important when considering your concern that you also consider the needs and wishes of the person at risk, taking into account the nature of the alert. More information on this is given in Appendix 2 - 'Legislation and Government Initiatives'.

## **8. How to Record a Disclosure**

- 8.1. Make a note of what the person has said using his or her own words as soon as practicable. To do this, please complete the Report Form (see Appendix 1) and submit it to Rise's Lead or Deputy Safeguarding Adults Officer.
- 8.2. As long as it does not increase the risk to the individual, you should explain to them that it is your duty to share your concern with your Lead/Deputy Safeguarding Adults Officer or other relevant professional body.
- 8.3. Describe the circumstances in which the disclosure came about.
- 8.4. Take care to distinguish between fact, observation, allegation and opinion. It is important that the information you have is accurate.
- 8.5. Be mindful of the need to be confidential at all times, this information must only be shared with your Lead/Deputy Safeguarding Adults Officer and others on a need to know basis.
- 8.6. If the matter is urgent and relates to the immediate safety of an adult at risk then contact the police immediately.

## **9. Roles and responsibilities of those within Rise**

- 9.1. Rise is committed to having the following in place:
  - 9.1.1. A Lead and Deputy Safeguarding Adults Officer to produce and disseminate guidance and resources to support the policy and procedures.
  - 9.1.2. A clear line of accountability within the organisation for work on promoting the welfare of all adults.
  - 9.1.3. Procedures for dealing with allegations of abuse or poor practice against members of staff and volunteers.
  - 9.1.4. A Steering Group or Case Management or Case Referral Group that effectively deals with issues, manages concerns and refers to a disciplinary panel where necessary (i.e. where concerns arise about the behaviour of a Rise employee). Where concerns arise about individuals who are not a member of Rise staff, they will be referred in line with the procedures contained within Appendix 1 to relevant trained experts, or the employing

organisation, and hence an internal Case Management Group will not need to be formed.

- 9.1.5. A Disciplinary Panel will be formed as required for a given incident, if appropriate and should a threshold be met.
- 9.1.6. Making arrangements to work effectively with other organisations to safeguard and promote the welfare of adults, including arrangements for sharing information.
- 9.1.7. Appropriate whistle blowing procedures and an open and inclusive culture that enables safeguarding and equality and diversity issues to be addressed.

## 10. Good practice, poor practice and abuse

### 10.1. Introduction

It can be difficult to distinguish poor practice from abuse, whether intentional or accidental.

It is not the responsibility of any Rise employee to make judgements regarding whether or not abuse is taking place, however, all Rise employees have the responsibility to recognise and identify poor practice and potential abuse, and act on it if they have concerns.

### 10.2. Good practice

Rise recommends that those delivering sport/physical activity to adults have:

- Adopted and endorsed an appropriate Code of Conduct.
- Completed a course in basic awareness in working with Adults at Risk, and a safeguarding course.
- Have appropriate training/qualifications in place.

### 10.3. Everyone should:

- Aim to make the experience of sport and physical activity fun and enjoyable.
- Promote fairness and playing by the rules.
- Not tolerate the use of prohibited or illegal substances.
- Treat all adults equally and preserve their dignity; this includes giving more and less talented members of a group similar attention, time and respect.

### 10.4. Coaches, activity leaders and those working directly with adults at risk should:

- Respect the developmental stage of each participant and not risk sacrificing their welfare in a desire for team or personal achievement.
- Ensure that the training intensity is appropriate to the physical, social and emotional stage of the development of the participant.

- Work with adults at risk, medical advisers and their carers (where appropriate) to develop realistic training and competition schedules which are suited to the needs and lifestyle of the participant, not the ambitions of others, such as coaches, team members, parents or carers.
- Build relationships based on mutual trust and respect, encouraging adults at risk to take responsibility for their own development and decision-making.
- Always be publicly open when working with adults at risk:
  - avoid sessions or meetings where a coach/activity leader and an individual participant are completely unobserved.
- Avoid unnecessary physical contact with people. Physical contact (touching) can be appropriate so long as:
  - It is neither intrusive nor disturbing.
  - The participant's permission has been openly given.
  - It is delivered in an open environment.
  - It is needed to demonstrate during a coaching/activity session.
- Maintain a safe and appropriate relationship with participants and avoid forming intimate relationships with those you are working with as this may threaten the position of trust and respect present between the participant and the coach/activity leader.
- Be an excellent role model by maintaining appropriate standards of behaviour.
- Gain the adult at risk's consent and, where appropriate, the consent of relevant carers, in writing, to administer emergency first aid or other medical treatment if the need arises.
- Be aware of medical conditions, disabilities, existing injuries and medicines being taken and keep written records of any injury or accident that occurs, together with details of treatments provided.
- Arrange that someone with current knowledge of emergency first aid is available at all times.
- Gain written consent from the correct people and fill out relevant checklists and information forms for travel arrangements and trips. This must be the adult themselves if they have capacity to do so.

### 10.5. **Poor practice**

The following are regarded as poor practice and should be avoided:

- Unnecessarily spending excessive amounts of time alone with an individual adult.
- Engaging in rough, physical or sexually provocative games, including horseplay.
- Allowing or engaging in inappropriate touching of any form.

- Using language that might be regarded as inappropriate by the adult and which may be hurtful or disrespectful.
- Making sexually suggestive comments, even in jest.
- Reducing an adult to tears as a form of control.
- Letting allegations made by an adult go uninvestigated, unrecorded, or not acted upon.
- Taking an adult at risk alone in a car on journeys, however short.
- Inviting or taking an adult at risk to your home or office where they will be alone with you.
- Sharing a room with an adult at risk.
- Doing things of a personal nature that adults at risk can do for themselves.

**Note:** *At times it may be acceptable to do some of the above. In these cases, to protect both the adult at risk and yourself, seek written consent from the adult at risk and, where appropriate, their carers, and ensure that the Lead Safeguarding Officer is aware of the situation and gives their approval.*

If, during your care, an adult at risk suffers any injury, seems distressed in any manner, appears to be sexually aroused by your actions, or misunderstands / misinterprets something you have done, report these incidents as soon as possible to another adult in the organisation and make a brief written note of it.

### 11. Relevant Policies

This policy should be read in conjunction with the following policies of Rise:

- Whistle Blowing
- Social Media
- Complaints
- Disciplinary
- Recruitment & Selection
- Equality, Diversity & Inclusion

### 12. Further Information

The contact details of Rise's Lead and Deputy Safeguarding Adults Officers can be found via the safeguardingpage at [www.risenortheast.co.uk](http://www.risenortheast.co.uk).

### 13. Review

This policy will be reviewed every two years or sooner in the event of legislative changes, or revised policies and best practice.

**Appendix 1****Referral Procedure and Report Form**

In the course of your role within Rise, you may have safeguarding concerns or suspicions, or receive allegations of inappropriate behaviour/misconduct/abuse about an individual. All concerns, suspicions and allegations of abuse must be taken seriously. When receiving a disclosure, you should follow the Referral Procedure below. These procedures aim to ensure that all suspicions and/or allegations of abuse against individuals are taken seriously and are dealt with in a timely and appropriate manner.

Please note that if you receive information from an adult at risk who says or indicates that they are being abused, or information is obtained which gives concern that an adult at risk is being abused, you must react as soon as possible that day in line with the procedures.

The feelings caused by the discovery of potential abuse by a member of staff or member of a partner organisation will raise different issues, e.g. disbelief that a member would act in this way. **Please note that it is not the responsibility of the individual receiving the information to decide whether or not someone has been abused, however, it is the responsibility of the individual to act on any concerns.**

**Please also note that any information regarding allegations etc should only be discussed with those who need to know, and in the best interests of the adult at risk.**

These procedures have been produced so that everyone in Rise knows what to do should they receive information about an allegation, disclosure or complaint relating to safeguarding issues (e.g. a phone call from a member of the public). However, whenever possible all issues of a safeguarding nature should be referred to Rise's Lead Safeguarding Adults Officer or Deputy Officer, who have lead responsibility for this area of work.

In the absence of the above individuals, the person dealing with the issue should complete the 'Reporting Form' overleaf to record all of the details about the incident, including the reporter's, alleged victim's and alleged abuser's contact details (if known). This will ensure that Rise have information about the incident and the action we have taken, which can be referred to if necessary. It is important to record accurately everything that is said. The form should be placed in an envelope marked private and confidential and given to one of Rise's safeguarding lead officers. It will then be filed in an appropriate secure place. A copy may also be shared with Adult's Services / the Police, if applicable.

**When deciding who to contact/refer the person on to, you should consider the seriousness of the information given:**

1. If the information you have received has given you **serious concerns** about the safety of an adult at risk, or you need to make an allegation or disclosure of abuse, the police or relevant adult's services department should be contacted

immediately (please make sure you make a record of the name and contact details of the member of staff to whom the concerns were passed):

### **Durham County Council – Adult Services (for Adults at Risk)**

Office Hours: 03000 267 979

Out of Office Hours: 03000 267 979

### **Gateshead Council – Adult Services (for Adults at Risk)**

Office Hours: 0191 433 7033

Out of Office Hours: 0191 433 7033

### **Newcastle City Council – Adult Services (for Adults at Risk)**

Office Hours: 0191 278 8377

Out of Office Hours: 0191 278 7878

### **North Tyneside Council – Adult Services (for Adults at Risk)**

Office Hours: 0191 643 2777

Out of Office Hours: 0191 200 6800

### **Northumberland County Council – Adult Services (for Adults at Risk)**

Office Hours: 01670 536 400

Out of Office Hours: 01670 536 400

### **South Tyneside Council – Adult Services (for Adults at Risk)**

Office Hours: 0191 424 6000

Out of Office Hours: 0191 456 2093

### **Sunderland City Council – Adult Services (for Adults at Risk)**

Office Hours: 0191 561 8934 or 0191 561 8936

Out of Office Hours: 0191 520 5552

2. If the information you have received, or the concern, is **not serious** and does not require immediate action, the relevant NGB's/club's/organisation's

safeguarding officer/welfare officer should be contacted. Alternatively, you/the reporter may wish to speak to the relevant adult's services department above or one of the contacts listed below for advice and support.

### **Ann Craft Trust (responsible for safeguarding adults at risk in sport/physical activity)**

Tel: 0115 951 5400 / [ann-craft-trust@nottingham.ac.uk](mailto:ann-craft-trust@nottingham.ac.uk)

Website: [www.anncrafttrust.org](http://www.anncrafttrust.org)

### **National Governing Body Lead Safeguarding Officers**

Please visit the NSPCC Sport (formally the Child Protection in Sport Unit – CPSU) website <https://sport.nspcc.org.uk/help-advice/deal-with-a-concern/> and click on the 'contact your national governing body' tab on the left hand side to find the contact details of the relevant officer.

3. If the information you have received, or the concern, is related to **poor practice**, the relevant activity organiser should be contacted.

**Rise Reporting Form**

Date &amp; time reported: \_\_\_\_\_

**Your Details**

|                                   | Person reporting the<br>incident to you | Person recording the<br>incident |
|-----------------------------------|-----------------------------------------|----------------------------------|
| Name                              | _____                                   | _____                            |
| Job Role                          | _____                                   | _____                            |
| Relationship to alleged<br>victim | _____                                   | _____                            |
| Contact Address                   | _____                                   | _____                            |
| Tel Number (including<br>mobile)  | _____                                   | _____                            |
| E-mail                            | _____                                   | _____                            |

**Contact Details of the Alleged Victim**

|                      |       |
|----------------------|-------|
| Full Name            | _____ |
| Date of Birth        | _____ |
| Contact Address      | _____ |
| Telephone Number (s) | _____ |
| Gender               | _____ |
| Ethnicity            | _____ |
| Disability           | _____ |

## Incident Details

Location of incident (if relevant)

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Date and time of incident

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**Detailed Information (in person's own words if possible) *Continue on separate sheet if required***

## Details of any Observations made to you by the reporter

(e.g. description of visible bruising, other injuries, person's emotional state). If injuries are present please record size, location and colour, please note – make a clear distinction between what is fact and hearsay. Ask about witnesses too.

## Action Taken So Far

## Alleged / Suspected Abuser's Details (if known)

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Relationship with alleged victim \_\_\_\_\_

Occupation \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number (s) \_\_\_\_\_

Ethnicity \_\_\_\_\_ Disability \_\_\_\_\_

Please refer to the Referral Procedure above for advice to give

## Action Undertaken / Advice Given

Referred to Adult's Services (give details) ☐ \_\_\_\_\_

Referred to other agency (give details) ☐ \_\_\_\_\_

Referred to activity organiser (give details) ☐ \_\_\_\_\_

I acknowledge that the details described are accurate and will remain strictly confidential between 'appropriate reporting channels' and myself.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**Please send this form, in an envelope marked private and confidential, to the Rise Lead Safeguarding Adults Officer or Deputy Officer. It will then be filed in an appropriate secure place. A copy may also be shared with Adult's Services / the Police, or other relevant partners (e.g. the NGB), if applicable.**

## Appendix 2 - Legislation and Government Initiatives

### Sexual Offences Act 2003

<http://www.legislation.gov.uk/ukpga/2003/42/contents>

The Sexual Offences Act introduced a number of new offences concerning vulnerable adults and children. [www.opsi.gov.uk](http://www.opsi.gov.uk)

### Mental Capacity Act 2005

<http://www.legislation.gov.uk/ukpga/2005/9/introduction>

Its general principle is that everybody has capacity unless it is proved otherwise, that they should be supported to make their own decisions, that anything done for or on behalf of people without capacity must be in their best interests and there should be least restrictive intervention. [www.dca.gov.uk](http://www.dca.gov.uk)

### Safeguarding Vulnerable Groups Act 2006

<http://www.legislation.gov.uk/ukpga/2006/47/contents>

Introduced the new Vetting and Barring Scheme and the role of the Independent Safeguarding Authority. The Act places a statutory duty on all those working with vulnerable groups to register and undergo an advanced vetting process with criminal sanctions for non-compliance. [www.opsi.gov.uk](http://www.opsi.gov.uk)

### Deprivation of Liberty Safeguards

<https://www.gov.uk/government/collections/dh-mental-capacity-act-2005-deprivation-of-liberty-safeguards>

Introduced into the Mental Capacity Act 2005 and came into force in April 2009. Designed to provide appropriate safeguards for vulnerable people who have a mental disorder and lack the capacity to consent to the arrangements made for their care or treatment, and who may be deprived of their liberty in their best interests in order to protect them from harm.

### Disclosure & Barring Service 2013

<https://www.gov.uk/government/organisations/disclosure-and-barring-service/about>

Criminal record checks: guidance for employers - How employers or organisations can request criminal records checks on potential employees from the Disclosure and Barring Service (DBS). [www.gov.uk/db-update-service](http://www.gov.uk/db-update-service)

### The Care Act 2014 – statutory guidance

<http://www.legislation.gov.uk/ukpga/2014/23/introduction/enacted>

The Care Act introduces new responsibilities for local authorities. It also has major implications for adult care and support providers, people who use services, carers and advocates. It replaces No Secrets and puts adult safeguarding on a statutory footing.

### Making Safeguarding Personal Guide 2014

<https://www.local.gov.uk/our-support/sector-support-offer/care-and-health-improvement/making-safeguarding-personal#:~:text=Making%20Safeguarding%20Personal%201%20Implementing%20MS>

[P.%20The%20fourth,Other%20resources%20to%20support%20work%20on%20safeguarding%20adults](#)

This guide is intended to support councils and their partners to develop outcomes-focused, person-centred safeguarding practice.