Safeguarding Adults Policy

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1 York CVS Safeguarding Adults Policy Statement

Safeguarding means protecting a person's health, wellbeing, and human rights, enabling them to live free from harm, abuse and neglect (NHS England 2025). It includes self-neglect in some circumstances. It is everybody's business.

For the purpose of safeguarding, an 'Adult at Risk' is any person over the age of eighteen years old who:

- Has needs for care and support (whether or not the local authority is meeting any of those needs).
- 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. (S42. Care Act 2014)

York CVS is committed to zero tolerance of vulnerable adult abuse. Our policy and procedure is in line with the City of York Joint Multi Agency Policy and Procedures and have been developed to ensure that we:

- Implement processes which enable us to meet the requirements of the Multi - Agency Safeguarding Adults Policy and Procedures for York
- Promote good practice and work in a way that prevents harm, abuse and coercion occurring.
- Make sure any allegations, disclosures of abuse or suspicions are dealt with appropriately and support the person experiencing abuse.
- Stop that abuse occurring.

In order to implement the policy we will work to:

- Manage services in a way which promotes safety and prevents abuse
- Promote the freedom and dignity of the person who has or is experiencing abuse
- Promote the rights of all people to live free from abuse and to be able to make their own choices
- Protect the safety and well-being of people who do not have the capacity to decide how they want to respond to abuse that they are experiencing
- The adult safeguarding statutory principles of: empowerment, protection, prevention, proportionality, partnership and accountability

We will:

- Make sure all our trustees, staff, consultants, volunteers are familiar with this policy and how to make alerts to a named person where appropriate, and make sure that copies are available to service users and members.
- Work with other agencies within the framework of the City of York Safeguarding Adults Multi-Agency Policy and Procedures to make sure that any cause for concern is properly investigated at the appropriate level.
- Be an active member of the York Safeguarding Adults Board (SAB) which gained statutory status from April 2015.
- Promote adult safeguarding best practice and learning through the relevant CVS Forums.

- Act within our Privacy Policy and try to gain permission from service users before sharing information about them with another agency
- Inform service users that where a person is in danger, a child is at risk or a serious crime has been committed then we may take the decision to pass information to another agency without the service user's consent
- Make a referral to City of York Safeguarding Adults service as appropriate (See Appendix B)
- Keep up to date with national developments relating to preventing abuse and welfare of adults
- Make sure that the named persons understand their responsibility to refer incidents of adult abuse to the relevant statutory agencies (Police/ Safeguarding Adults service).

- York CVS' Board of Trustees has overall responsibility for safeguarding vulnerable adults.
- Day-to-day responsibility for overseeing the implementation of this policy sits with the Chief Executive.
- This policy should be read in conjunction with the City of York Safeguarding Adults Multi-Agency Policy and Procedures.
- York CVS will make sure that the Safeguarding Adults Policy is reviewed **annually** by the Board of Trustees. The named person for Safeguarding Adults will be involved in this process and can recommend any changes.
- York CVS will also review its Complaints and Whistleblowing procedures in line with the Safeguarding Adults Policy, to ensure they keep pace with any changes.

2 Introduction

York CVS provides a range of services to people in York. We are committed to ensuring safeguards and measures are in place to reduce the likelihood of any abuse taking place within our services, and we will treat everyone using our services with dignity and respect.

These procedures are cross referenced to and should be read in conjunction with the following policies and procedures:

- Staff, Volunteer and Student/Intern recruitment policies and practices
- Staff and Volunteer Handbooks
- Health and Safety Policy
- Disciplinary and Grievance Policy
- Whistleblowing procedure
- Complaints Policy
- Equality and Diversity Policy

3 Statutory Requirements

'Safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect.' (Care Act, 2014)

The Care Act 2014 was implemented in April 2015 consolidating existing community care legislation, therefore placing safeguarding adults on a statutory footing.

Care and Support Statutory Guidance (2016 – Updated July 2025) was issued under the Care Act 2014 and replaces previous Guidance: No Secrets (2000).

Statutory Guidance to the Care Act 2014 has identified six principles of safeguarding., originally published in a Department of Health statement on Safeguarding Adults (Department of Health, 2011) These are; Empowerment, Prevention, Proportionality, Protection, Partnership and Accountability.

4 Description of an adult at risk

Within this policy, an adult at risk is someone who falls within this description. An adult at risk may therefore be a person who, for example:

- Is an older person who is frail due to ill-health, physical disability or cognitive impairment
- Has a learning impairment
- Has a physical and/or sensory impairment
- Has mental health needs including dementia or a personality disorder
- Has a long term illness/condition
- Misuses substances or alcohol
- Is an unpaid carer such as a family member/friend who provides personal assistance and care to adults and is subject to abuse
- Lacks mental capacity to make particular decisions and is in need of care and support.

This list will not be exhaustive.

5 Aims of safeguarding adults

The aims of safeguarding adults are to:

- Stop abuse or neglect wherever possible
- Prevent harm and reduce the risk of abuse or neglect to adults with care and support needs
- Safeguard 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, alongside professionals play their part in preventing, identifying and responding to abuse and neglect.
- Providing information and support in accessible ways to help people understand the different types of abuse, how to stay safe and how to Raise a concern about the safety and well-being of an adult; and
- Address what caused the abuse or neglect.

6 Definitions of Abuse

Abuse of an adult at risk can take many forms. The following list is not exhaustive but is rather illustrative of the kinds of abuse that might be experienced. It is important not to limit abuse or neglect as it may take various forms and can be dependent on the circumstances of the case and the individual.

Abuse can be intentional or unintentional and may be single or repeated acts. It can occur in any setting including residential and nursing home settings, family homes, day care settings, social settings, public places and hospitals.

Abuse, harm, and neglect often incorporate a misuse, or abuse, of power and an individual's dependence on others. In addition to exploitation the following list, reproduced from the Care and Support Statutory Guidance (2014), gives examples of different types of abuse.

- Physical abuse, hitting, slapping, punching, burning
- Domestic Violence and abuse
- Sexual abuse, rape, indecent assault, inappropriate touching
- Psychological abuse; this is sometimes referred to as emotional abuse
- Financial or material abuse, stealing, selling assets
- Modern slavery, or servitude includes slavery, human trafficking, forced labour, and domestic servitude.
- Discriminatory abuse; this may include other types of abuse experienced by someone because of their: race, gender, gender identity, age, disability, sexual orientation, or religion.
- Organisational abuse; formerly known as 'institutional abuse'
- Neglect and acts of omission,
- Self-neglect
- Prevent
- Female Genital Mutilation (FGM)

These are described in further detail at Appendix A.

7 Preventing and minimising abuse

York CVS will help to prevent and minimise abuse in the following ways:

1. We will work within the current legal framework for reporting staff who are abusers.

2. Encouraging people to let us know if they have any safeguarding concerns about our services or facilities and publishing our compliments and complaints policy, and our safeguarding policy on our website.

3. We will provide service users with simple and straightforward ways to report their concerns, and we will support them to do this.

4. We will make information accessible and is in a form that can be easily understood.

5. Applying safe recruitment practices for paid staff, volunteers and trustees. This includes enhanced DBS disclosures for staff, volunteers and trustees where appropriate, ensuring references are taken up.

6. We will provide all staff, volunteers and trustees with information and training about our safeguarding policies and procedures during their induction period to make sure they have a basic awareness of signs and symptoms of abuse and how to make an alert.

7. We will make sure that the named persons and all other members of staff and volunteers, who have contact with vulnerable adults as part of their role with York CVS, have access to training on Safeguarding Vulnerable Adults.

8. We will provide staff and volunteers with opportunities to discuss general issues around Safeguarding and to debrief if they have made an alert via their supervision.

The Trustee Board will receive a regular update report on the measures that are in place to monitor Safeguarding policies and processes along with any changes to legislation.

8 Making Safeguarding Personal

In 2010, a national programme, 'Making Safeguarding Personal' was launched with the aim of promoting a shift in culture away from a process driven intervention to a person-centred response.

Under Care Act statutory guidance, all agencies have a responsibility to 'engage a person in a conversation about how best to respond to their safeguarding situation in a way that enhances involvement, choice and control as well as improving quality of life, well-being and safety'. (Department of Health, 2014)

<u>What it is:</u>

- A personalised approach that enables safeguarding to be done with, not to, people
- A practice that focusses on achieving meaningful improvement to people's circumstance's rather than just on 'investigation' and 'conclusion'
- An approach that uses social work skills rather than just taking people through a process
- An approach that enables practitioners, families, teams and SAB's to know that difference has been made.

The 6 principles of Making Safeguarding Personal:

1. Empowerment – presumption of person-led decisions and informed consent
2. Prevention – better to take action before harm occurs
3. Proportionality + least intrusive response
4. Protection – support and representation for those in greatest need
5. Partnerships – local solutions

6. Accountability and transparency in delivering safeguarding

In practice, following a Making Safeguarding Personal approach with adults at risk means working with individuals to answer the three Making Safeguarding Personal questions of:

- What difference is wanted or desired?
- How will you work with someone to enable this to happen?
- How will you know that a difference has been made?

Seeking answers to these questions when concerns are identified is good practice, and should be the norm rather than the exception. Making Safeguarding Personal offers an opportunity to educate individuals about their right to live a life free from abuse, harm or neglect and about the safeguarding process as a toll to enable change.

9 Named person for safeguarding adults

York CVS has named persons responsible for dealing with any Safeguarding Adults concerns.

Named People for Safeguarding Adults

Alison Semmence (Chief Executive)
Work telephone number: 01904 621133
Email address: alison.semmence@yorkcvs.org.uk

Safeguarding Adults Deputy: Peter Otter (Deputy Chief Executive)
Work telephone number: 01904 621133
Email address: peter.otter@yorkcvs.org.uk

Siân Balsom - for training (Manager of Healthwatch York)
Work telephone number: 01904 621133
Email address: sian.balsom@yorkcvs.org.uk

The roles and responsibilities of the named persons are to:

- Make sure that all staff, volunteers and trustees are aware of what they should do and who they should go to if they have concerns that someone may be experiencing, or has experienced abuse or neglect – how to make an alert.
- Make sure that concerns are acted on, clearly recorded and referred to Adult Social Care following the City of York Multi Agency Safeguarding Adults Policy and Procedures where necessary.
- Co-operate with safeguarding investigations carried out under the City of York Multi Agency Safeguarding Adults Policy and Procedures.
- Follow up any referrals and make sure the issues have been addressed.
- Make sure that staff, trustees and volunteers adhere to good practice regarding confidentiality and security.

- Make sure that staff and volunteers working directly with someone who has experienced abuse, or who is experiencing abuse, are well supported through appropriate supervision.
- Make sure that disciplinary procedures are co-ordinated where appropriate as part of the ongoing management of any allegation.

10 Responding to people who have experienced or are experiencing abuse

York CVS recognises its duty to act on reports or suspicions of abuse or neglect. Anyone who has contact with vulnerable adults and hears disclosures or allegations or has concerns about potential abuse or neglect has a duty to pass them on to the named person.

How to respond if you receive a disclosure:

- Reassure the person concerned
- Listen to what they are saying
- Take initial rough notes of what has been said/observed as soon as possible
- Remain calm and do not show shock or disbelief
- Tell them that the information will be treated seriously
- Don't start to investigate or ask detailed or probing questions
- Don't promise to keep it a secret.

If you witness abuse or abuse has just taken place the priorities will be to:

- Call an ambulance if required
- Call the police if a crime has been committed
- Preserve evidence
- Keep yourself, staff and service users safe
- Inform the named person.

Contact the named person, see section 9. Complete the City of York Council Safeguarding Adult's Concern Form. Copies of the completed forms will be stored in a secure online folder.

You must discuss all situations of abuse or alleged abuse with the named Safeguarding person, or one of the Safeguarding deputies named in section 9. You must tell the alleged victim that this will happen. This stage is called 'making the alert'.

The named person can then take advice, see Appendix B.

If it is appropriate and there is consent from the individual, or there is a good reason to override consent, such as risk to others, the named person will make a referral to adult social care, using the City of York Safeguarding Adults Referral process below.

If the individual experiencing abuse does not have the mental capacity to understand what is happening to them, the named person will make a referral without that person's consent.

Making a referral (the role of the named person)

- Once the named person has established or believes that there is an allegation of abuse, you have a duty to make a referral to City of York Adult Social Care.
- Before the named person makes a referral, they need to gather as much information as they can about the allegation. Complete as much of the **Inter-agency Safeguarding Adults Concern Form** (See Appendix B). All items relating to the concern, including initial rough notes, must be attached to the form.
- **Lack of access to the necessary information should NOT delay the referral.**
- A referral will then lead to the implementation of the next stages of the City of York Multi agency Safeguarding Adults policy and procedures. The named person should have an overview of this process so they can explain it to the person concerned and offer all relevant support to the process. This could be practical support e.g. providing a venue, or information and reports and emotional support.
- Information should be provided to the individual. This could be signposting to other sources of help or information that could enable them to decide what to do about their experience, help them to recover and help them to seek justice.

11 Managing allegations made against member of staff or volunteer

York CVS will make sure that any allegations made against a member of staff, a volunteer or a trustee will be dealt with swiftly.

We will inform the police immediately where it is believed that a member of staff / volunteer / trustee has committed a criminal offence or a crime has been witnessed.

Where the allegation involves alleged abuse of a vulnerable adult, we will make a referral following the process in section 10.

The safety of the individual(s) concerned is paramount. We will make sure that they are safe and away from the person(s) who are the alleged perpetrators.

We are aware of our responsibilities in regards to People in Positions of Trust (PiPoT) and will follow local authority guidelines in relation to PiPoT if allegations of this nature are made.

The named person will liaise with the Safeguarding Manager at City of York Council to discuss the best course of action. They will also make sure that York CVS Disciplinary Procedure is coordinated with any other enquiries taking place as part of the ongoing management of the allegation.

12 Recording and managing confidential information

York CVS will maintain confidentiality wherever possible and information on Safeguarding Adults issues will be shared only with those who need to know. Therefore, confidentiality cannot be guaranteed and where vulnerable adults are considered to be at risk, alerts will be made.

Wherever possible, we will offer the person disclosing abuse information about where to find further support.

We will retain copies of all allegations / disclosures / concerns in a secure online folder.

For staff recording disclosures, make sure that the information given is factual and not based on opinions. Record what the person tells you, what you have seen and witnesses if appropriate.

We will keep records securely and in accordance with the GDPR guidelines.

13 Appendix A: Types of Abuse and Possible Indicators of Abuse

13.1 What constitutes abuse?

‘Abuse is a violation of an individual’s human and civil rights by any other person or persons’ [No secrets DH 2000]

Abuse may consist of a single act or repeated acts. It may be physical, verbal or psychological, it may be an act of neglect or an omission to act, or it may happen when a vulnerable person is persuaded to enter into a financial or sexual transaction to which he or she has not consented or cannot consent to.

Abuse can happen in any relationship and may result in significant harm to, or exploitation of, the person subjected to it.

An accepted definition of significant harm is: "…ill-treatment (including sexual abuse and forms of ill treatment that are not physical); the impairment of, or an avoidable deterioration in, physical or mental health; and the impairment of physical, emotional, social or behavioural development". [Law Commission 1995]

13.2 Signs and indicators of abuse

Please note that these indicators are a guide only. All situations must be discussed with the appropriate line manager. A full investigation and assessment is required to establish the existence of abuse leading to the significant harm of a vulnerable adult.

Typically an abusive situation will involve indicators from a number of groups in combination.

13.3 Domestic abuse

Domestic abuse is defined in the Domestic Abuse Act 2021 as ‘any incident or pattern of behaviour between two people that are personally connected to each other’. It can consist of physical, sexual, psychological, emotional and/or financial abuse; as well as controlling or coercive behaviour.

13.4 Physical abuse

Physical injuries which have no satisfactory explanation or where there is a definite knowledge, or a reasonable suspicion that the injury was inflicted with intent, or through lack of care, by the person having custody, charge or care of that person, including hitting, slapping, pushing, misuse of or lack of medication, restraint, or inappropriate sanctions.

13.5 Possible indicators of physical abuse

- History of unexplained falls or minor injuries.
- Unexplained bruising – in well protected areas, on the soft parts of the body or clustered as from repeated striking.
- Unexplained burns in unusual location or of an unusual type.

- Unexplained fractures to any part of the body that may be at various stages in the healing process.
- Unexplained lacerations or abrasions.
- Slap, kick, pinch or finger marks.
- Injuries/bruises found at different stages of healing or such that it is difficult to suggest an accidental cause.
- Injury shape similar to an object.
- Untreated medical problems.
- Weight loss – due to malnutrition or dehydration; complaints of hunger.
- Appearing to be over-medicated.

13.6 Psychological Abuse

Psychological abuse includes the use of threats, fears or bribes to negate a vulnerable adult's choices, independent wishes and self-esteem; cause isolation or over-dependence (as might be signalled by impairment of development or performance) or prevent a vulnerable adult from using services which would provide help.

Possible indicators of psychological abuse:

- Ambivalence about carer.
- Fearfulness expressed in the eyes; avoids looking at the carer, flinching on approach.
- Deference.
- Overtly affectionate behaviour to alleged perpetrator.
- Insomnia/sleep deprivation or need for excessive sleep.
- Change in appetite.
- Unusual weight gain/loss.
- Tearfulness.
- Unexplained paranoia.
- Low self-esteem.
- Excessive fears.
- Confusion.
- Agitation.
- Self-neglect
- Modern slavery
- Domestic violence

13.7 Sexual Abuse

Sexual acts which might be abusive include non-contact abuse such as looking, pornographic photography, indecent exposure, harassment, unwanted teasing or innuendo, or contact such as touching breasts, genitals or anus, masturbation, penetration or attempted penetration of vagina, anus or mouth, with or by penis, fingers or other objects.

Possible indicators of sexual abuse:

- A change in usual behaviour for no apparent or obvious reason.

- Sudden onset of confusion, wetting or soiling.
- Withdrawal, choosing to spend the majority of time alone.
- Overt sexual behaviour/language by the vulnerable person.
- Self-inflicted injury.
- Disturbed sleep pattern and poor concentration.
- Difficulty in walking or sitting.
- Torn, stained, bloody underclothes.
- Love bites.
- Pain or itching, bruising or bleeding in the genital area.
- Sexually transmitted urinary tract/vaginal infections.
- Bruising to the thighs and upper arms.
- Frequent infections.
- Severe upset or agitation when being bathed / dressed / undressed / medically examined.
- Pregnancy in a person not able to consent.

13.8 Financial Abuse

Usually involves an individual's funds or resources being inappropriately used by a third person. It includes the withholding of money or the inappropriate or unsanctioned use of a person's money or property or the entry of the vulnerable adult into financial contracts or transactions that they do not understand, to their disadvantage.

Possible indicators of financial abuse:

- Unexplained or sudden inability to pay bills.
- Unexplained or sudden withdrawal of money from accounts.
- Person lacks belongings or services, which they can clearly afford.
- Lack of receptiveness to any necessary assistance requiring expenditure, when finances are not a problem – although the natural thriftiness of some people should be borne in mind.
- Extraordinary interest by family members and other people in the vulnerable person's assets.
- Power of Attorney obtained when the vulnerable adults is not able to understand the purpose of the document they are signing.
- Recent change of deeds or title of property.
- Carer only asks questions of the worker about the user's financial affairs and does not appear to be concerned about the physical or emotional care of the person.
- The person who manages the financial affairs is evasive or uncooperative.
- A reluctance or refusal to take up care assessed as being needed.
- A high level of expenditure without evidence of the person benefiting.
- The purchase of items which the person does not require or use.
- Personal items going missing from the home.
- Unreasonable and/or inappropriate gifts.

13.9 Neglect / Acts of Omission

Neglect can be both physical and emotional. It is about the failure to keep a vulnerable adult clean, warm and to promote optimum health, or to provide adequate nutrition, medication, or being prevented from making choices. Neglect of a duty of care or the breakdown of a care package may also give rise to safeguarding issues i.e. where a carer refuses access or if a care provider is unable, unwilling or neglects to meet assessed needs. If the circumstances mean that the vulnerable adult is at risk of significant harm then Safeguarding Adults procedures should be invoked.

Possible indicators of neglect:

- Poor condition of accommodation.
- Inadequate heating and/or lighting.
- Physical condition of person poor, e.g. ulcers, pressure sores etc.
- Person's clothing in poor condition, e.g. unclean, wet, etc.
- Malnutrition.
- Failure to give prescribed medication or appropriate medical care.
- Failure to ensure appropriate privacy and dignity.
- Inconsistent or reluctant contact with health and social agencies.
- Refusal of access to callers/visitors.

A person with capacity may choose to self-neglect, and whilst it may be a symptom of a form of abuse it is not abuse in itself within the definition of these procedures.

13.10 Prevent

- Responds to the ideological challenge that we face from terrorism and aspects of extremism, and the threat we face from those who promote these views;
- Provides practical help to prevent people from being drawn into terrorism and ensure they are given appropriate advice and support; and
- Works with a wide range of sectors (including education, criminal justice, faith, charities online, and health) where there are risks of radicalisation that we need to deal with.

Prevent covers all forms of terrorism and extremism and some aspects of non-violent extremism.

The Home Office works with local authorities, a wide range of government departments, and community organisations to deliver the Prevent strategy. The police also play a significant role in Prevent, in much the same way as they do when taking a preventative approach to other crimes.

The following changes in behaviour may also be warning signs to look out for:

- General changes of mood, patterns of behaviour, secrecy;
- Changes of friends and mode of dress;
- Use of inappropriate language;
- Possession of violent extremist literature;
- The expression of extremist views;

- Advocating violent actions and means;
- Association with known extremists;
- Seeking to recruit others to an extremist ideology.
- Unexplained absence/leave

It is everyone's duty to report someone you think is/has been radicalised and the reporting procedure is via 10, the local police or to ring the anti-terrorist hotline number which is 0800 789321.

13.11 Female Genital Mutilation/Cutting (FGM)

FGM comprises 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.

13.12 Modern Slavery

Modern slavery is the illegal exploitation of people for personal or commercial gain. It covers a wide range of abuse including sexual exploitation, domestic servitude, forced labour, criminal activity and organ harvesting. It can also include Human Trafficking.

13.13 Self-Neglect

Self-neglect is an extreme lack of self-care and can cover a wide range of behaviours in a person; such as neglecting their own health needs, personal hygiene and that of their surroundings and can include behaviours such as hoarding.

13.14 Discriminatory Abuse

Abuse targeted at a perceived vulnerability or on the basis of prejudice including racism or sexism, or based on a person's disability. It can take any of the other forms of abuse, harassment, slurs or similar treatment.

Discriminatory abuse may be used to describe serious, repeated or pervasive discrimination, which leads to significant harm or exclusion from mainstream opportunities, provision of poor standards of health care, and/or which represents a failure to protect or provide redress through the criminal or civil justice system

Possible indicators of discriminatory abuse:

- Hate mail.
- Verbal or physical abuse in public places or residential settings.
- Criminal damage to property.
- Target of distraction burglary, bogus officials or unrequested building/household services.

13.15 Organisational Abuse

Organisational abuse happens when the rituals and routines in use, force residents or service users to sacrifice their own needs, wishes or preferred lifestyle to the needs of the organisation or service provider. Abuse may be perpetrated by an

individual or by a group of staff embroiled in the accepted custom, subculture and practice of the organisation or service.

Possible indicators of organisational abuse:

- May be reflected in an enforced schedule of activities, the limiting of personal freedom, the control of personal finances, a lack of adequate clothing, poor personal hygiene, a lack of stimulating activities or a low-quality diet – in fact, anything which treats service users as not being entitled to make everyday decisions about how they want to live.
- Organisations may include residential and nursing homes, hospitals, day centres, sheltered housing schemes, group or supported housing projects. It should be noted that all organisations and services, whatever their setting, can have institutional practices which can cause harm to vulnerable adults.

The distinction between abuse in organisations and poor care standards is not easily made and judgements about whether an event or situation is abusive should be made with advice from appropriate professionals and regulatory bodies.

13.16 Predisposing Factors

Abuse can happen in a range of settings, in a variety of relationships and can take several forms. There are several indicators, which could, in some circumstances, in combination with other possibly unknown factors suggest the possibility of abuse. Abuse may be more likely to happen in the following problem situations:

Environmental	Overcrowding/poor housing conditions/lack of facilities
Financial	Low income, a dependent vulnerable adult may add to financial difficulties, unable to work due to caring role, debt arrears, full benefits not claimed.
Psychological and Emotional	Family relationships over the years have been poor and there is a history of abuse in the family or where family violence is the norm.
Communication	The vulnerable person or their carer has difficulty communicating due to sensory impairments, loss or difficulty with speech and understanding, poor memory or other conditions resulting in diminished mental capacity; this also includes people for whom English is a second language.
Dependency	Increased dependency of the person, major changes in personality and behaviour, carers are not receiving practical and/or emotional support.
Organisational	Services which are inward looking, where there is little staff training/knowledge of best practice and where contact with external professionals is resisted increasing the vulnerability of service users. High staff

	turnover or shortages may also increase the risk of abuse.

13.17 Patterns of abuse

Patterns of abuse and abusing vary and reflect very different dynamics.

These include:

- Serial abuse in which the perpetrator seeks out and 'grooms' vulnerable adults. Sexual abuse may fall into this pattern, as do some forms of financial abuse.
- Long term abuse in the context of an ongoing family relationship such as domestic violence between spouses or generations.
- Opportunist abuse such as theft happening because money has been left around.
- Situational abuse which arises because pressures have built up and/or because of difficult or challenging behaviour.
- Neglect of a person's needs because those around him or her are not able to be responsible for their care, for example if the carer has difficulties attributable to such issues as debt, alcohol or mental health problems.
- Stranger abuse: vulnerable adults can be targeted by strangers; this may be an individual, a gang, or people offering services (e.g. the conman who tells the older person he will repair their roof, taking a large amount of money but actually doing nothing). Different forms of abuse can be inflicted in these situations e.g. financial, physical, and emotional. No Secrets states that:

  > "Stranger abuse will warrant a different kind of response from that appropriate to abuse in an ongoing relationship or in a care location. Nevertheless, in some instances it may be appropriate to use the locally agreed inter-agency adult protection procedures to ensure that the vulnerable person receives the services and support that they need. Such procedures may also be used when there is the potential for harm to other vulnerable people."

Further information on Safeguarding procedures and support can be found here:

Information for professionals – Safeguarding Adults York

14 Appendix B: Raising a Concern

If you think you or someone you know is being abused, or neglected you should tell someone you trust.

This could be a friend, a teacher, your family, a social worker, a doctor, a police officer or someone else that you trust. Ask them to help you stop it, report it or make a complaint and remember that you understand abuse or neglect is never your fault.

Supporting people when concerns are raised about abuse or neglect can be very difficult and distressing for everyone involved. Deciding what is the right thing to do can be stressful, particularly if the person you are concerned about is reluctant to accept support. If you are not sure what to do you can always seek advice.

To report a crime:

- In an emergency, contact the police, tel: 999
- If the person is not in immediate danger, contact the police, tel: 101

To report a safeguarding concern:

- Contact **adult** social care, tel: 01904 555111 (office hours)
- Hearing impaired customers can use the text facility 07534 437804
- Out of hours, tel: 0300 131 2131
- Or find out how to report child abuse.

If you are not sure what to do our adult social care team can give you advice.

If you are a paid worker or volunteer, you'll need to use the online Safeguarding Adults Concern form to tell us about your concerns.

Complete an online concern form

https://www.safeguardingadultsyork.org.uk/raise-concern

Please double check you are attaching your completed PDF, not a blank or un-saved version.

15 Appendix C: York CVS Safeguarding Concern Flowchart