

LIFE CHURCH

BATH

SAFEGUARDING ADULTS POLICY

Policy reviewed: August 2023
Date of next review: August 2024

Do you have concerns about an adult?

Safeguarding is everyone's responsibility.

If you have concerns about an adult's safety and/or wellbeing, you must act on these.

It is not your responsibility to decide whether or not an adult has been abused. It is, however, your responsibility to act on any concerns.

You identify a concern about a possible or alleged abuse, poor practice, or wider welfare issues.	
Does the person need immediate medical attention?	
NO	YES
<p>Step 1: What does the adult want to happen? Include their views throughout the process</p> <p>Step 2: Speak to the Safeguarding Team and report your concerns. Makes notes and complete a 'Cause for concern' report.</p>	<p>Step 1: Contact emergency services on 999</p> <p>Step 2: Speak to the Safeguarding Team and report your concerns. Makes notes and complete a 'Cause for concern' report.</p>

CHURCH DETAILS

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INTRODUCTION

Life Church Bath is committed to creating and maintaining a safe and positive environment and accepts our responsibility to safeguard the welfare of all adults involved in the activities we run. Life Church Bath safeguarding adult's policy and procedures apply to all adults involved in Life Church Bath activities.

Please also see our Introduction to Working with Adults Policy.

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PRINCIPLES

The guidance given in the policy and procedures is based on the following principles:

- All adults, regardless of age, ability or disability, gender, race, religion, ethnic origin, sexual orientation, marital or gender status have the right to be protected from abuse and poor practice and to participate in an enjoyable and safe environment.
- Life Church Bath will seek to ensure that our activities are inclusive and make reasonable adjustments for any ability, disability or impairment. We will also commit to continuous development, monitoring and review.
- The rights, dignity and worth of all adults will always be respected.
- We recognise that ability and disability can change over time, such that some adults may be additionally vulnerable to abuse, in particular those adults with care and support needs.
- 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 Life Church Bath, for example inappropriate behaviour, or in the wider community.
- All allegations will be taken seriously and responded to quickly in line with Life Church Bath's Safeguarding Adults Policy and Procedures.
- Life Church Bath 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.

THE SIX PRINCIPLES OF ADULT SAFEGUARDING

The Care Act 2014 sets out the following principles that should underpin 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.”

MAKING SAFEGUARDING PERSONAL

‘Making safeguarding personal’ means that adult safeguarding should be person led and outcome focussed. It engages the person in a conversation about how best to respond to their safeguarding situation in a way that enhances involvement, choice and control. As well as improving quality of life, well-being and safety.

Wherever possible discuss safeguarding concerns with the adult to get their view of what they would like to happen and keep them involved in the safeguarding process, seeking their consent to share information outside of the organisation where necessary.

WELLBEING PRINCIPLE

The concept of wellbeing is threaded throughout the Care Act and it is one that is relevant to adult safeguarding. Wellbeing is different for each of us, however the Act sets out broad categories that contribute to our sense of wellbeing. By keeping these themes in mind, we can all ensure that adult participants can fully take part in the life of Life Church Bath.

- Personal dignity (including treatment of the individual with respect)

- Physical and mental health and emotional wellbeing
- Protection from abuse and neglect
- Control by the individual over their day-to-day life (including over care and support provided and the way they are provided)
- Participation in work, education, training or recreation
- Social and economic wellbeing
- Domestic, family and personal domains
- Suitability of the individual's living accommodation
- The individual's contribution to society.

LEGISLATION

The practices and procedures within this policy are based on the principles contained within the UK legislation and Government Guidance and have been developed to complement the Safeguarding Adults Boards policy and procedures. They take the following into consideration:

- 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
- The Data Protection Act 1998

DEFINITIONS

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

- **Adult** is anyone aged 18 or over.
- **Adult at Risk** is a person aged 18 or over who:
 - Has needs for care and support (whether or not the local authority is meeting any of those needs); and;
 - Is experiencing, or is at risk of, abuse or neglect; and;
 - As a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of, abuse or neglect.
- **Adult in need of care and support** is determined by a range of factors including personal characteristics, factors associated with their situation, or environment and social factors.
 - Naturally, a person's disability or frailty does not mean that they will inevitably experience harm or abuse.
 - In the context of safeguarding adults, the likelihood of an adult in need of care and support experiencing harm or abuse should be determined by considering a range of social, environmental and clinical factors, not merely because they may be defined by one or more of the above descriptors.
 - 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 – but see below
- **Abuse** is a violation of an individual's human and civil rights by another person or persons. See section 4 for further explanations.
- **Adult safeguarding** is protecting a person's right to live in safety, free from abuse and neglect.
- **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 (MCA 2005). See Appendix 2 for guidance and information.

- **Someone may be described as 'vulnerable'** who is going through, or who has recently gone through a situation making them in need of extra pastoral help and support

TYPES OF ABUSE AND NEGLECT

There are different types and patterns of abuse and neglect, and different circumstances in which they may take place. The Care Act 2014 identifies the following as an illustrative guide and is not intended to be exhaustive list as to the sort of behaviour which could give rise to a safeguarding concern:

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.

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.

Domestic Abuse and coercive control – including psychological, physical, sexual, financial and emotional abuse. It also includes so called 'honour' based violence. It can occur between any family members.

Discriminatory Abuse – 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.

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

Physical Abuse – including hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions.

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.

Financial or Material Abuse – including theft, fraud, internet scamming, coercion in relation to an adult’s financial affairs or arrangements, including in connection to wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

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.

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.

Not included in the Care Act 2014 but also relevant:

Spiritual Abuse (or abuse linked to faith or belief)

There is a growing awareness and interest in spiritual abuse in faith communities as a subject (Oakley 2016). Existing work around this experience (which is characterised by a systematic pattern of controlling and coercive behaviour in a religious context) is still in its infancy, to the extent there is not currently universal agreement about this as a term. There is some discussion about it being categorised as a form of emotional and / or psychological abuse. It has been suggested that this form of abuse may include: manipulation and exploitation, enforced accountability, censorship of decision making, requirement for secrecy and silence, coercion to conform, control through the use of sacred texts or teaching, requirement of obedience to the abuser, the suggestion that the abuser has a ‘divine’ position, isolation as a means of punishment, and superiority and elitism, (Oakley 2018)

We are pursuing awareness and understanding on this topic, currently basing on our knowledge on the following report published by thirtyoneeight: and ‘Understanding Spiritual Abuse in Christian Communities’ by Dr Lisa Oakley and Justin Humphreys

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.

Forced Marriage – forced marriage is a term used to describe a marriage in which one or both of the 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 make it a criminal offence to force someone to marry. The forced marriage of adults with learning disabilities occurs when the adult does not have the capacity to consent to the marriage.

Mate Crime – a ‘mate crime’ as defined by the Safety Net Project as ‘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 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.

Radicalisation – the aim of radicalisation is to attract people to their reasoning, inspire new recruits and embed their extreme views and persuade vulnerable individuals of the legitimacy of their cause. This may be direct through a relationship, or through social media.

SIGNS AND INDICATORS OF ABUSE AND NEGLECT

Abuse can take place in any context and by all manner of perpetrator. Abuse may be inflicted by someone at Life Church Bath, or may happen elsewhere and we become aware that it is happening. There are many signs and indicators that may suggest someone is being abused or neglected.

These may include but are not limited to:

- Unexplained bruises or injuries – or lack of medical attention when an injury is present.
- Person has belongings or money going missing.
- Person is not attending / no longer enjoying coming to Life Church Bath activities.
- Someone losing or gaining weight / an unkempt appearance.
- A change in the behaviour or confidence of a person.
- They may self-harm.
- They may have a fear of a particular group or individual.
- They may tell you / another person they are being abused – i.e. a disclosure.
- Harassing of a church member because they are or are perceived to have protected characteristics.

WHAT TO DO IF YOU HAVE A CONCERN OR SOMEONE RAISES A CONCERN WITH YOU

- It is not your responsibility to decide whether or not an adult has been abused. It is, however, everyone's responsibility to respond to and report concerns.
- If you are concerned someone is in immediate danger, contact the relevant emergency service on 999 straight away.
 - Where you suspect that a crime is being committed, you must involve the police.
 - Make clear the reason for your action to the person involved and seek their agreement
 - Consult a member of the Safeguarding Team
- If you have concerns and or you are told about possible or alleged abuse, poor practice or wider welfare issues you must report this to a member of the Safeguarding Team
- When raising your concern with a member of the Safeguarding Team, remember *Making Safeguarding Personal*. (See page 17) It is good practice to seek the adult's views on what they would like to happen next and to inform the adult you will be passing on your concern.

- It is important when considering your concern that you keep the person informed about any decisions and action taken, and always consider their needs and wishes.

HOW TO RESPOND TO A CONCERN

- Make a note of your concerns.
- Make a note of what the person has said using his or her own words as soon as practicable. Complete a 'Cause for Concern' form and submit to Safeguarding Coordinator.
- Remember to make safeguarding personal. Discuss your safeguarding concerns with the adult, obtain their view of what they would like to happen, but inform them it's your duty to pass on your concerns to the Safeguarding Coordinator, or in her absence, a member of the Safeguarding Team
- Describe the circumstances in which the disclosure came about.
- Take care to distinguish between fact, observation, allegation and opinion. It is important that the information you have is accurate.
- Be mindful of the need to be confidential at all times. This information must only be shared with the Safeguarding Team and others on a need-to-know basis.
- If the matter is urgent and relates to the immediate safety of an adult at risk then contact the emergency services immediately.

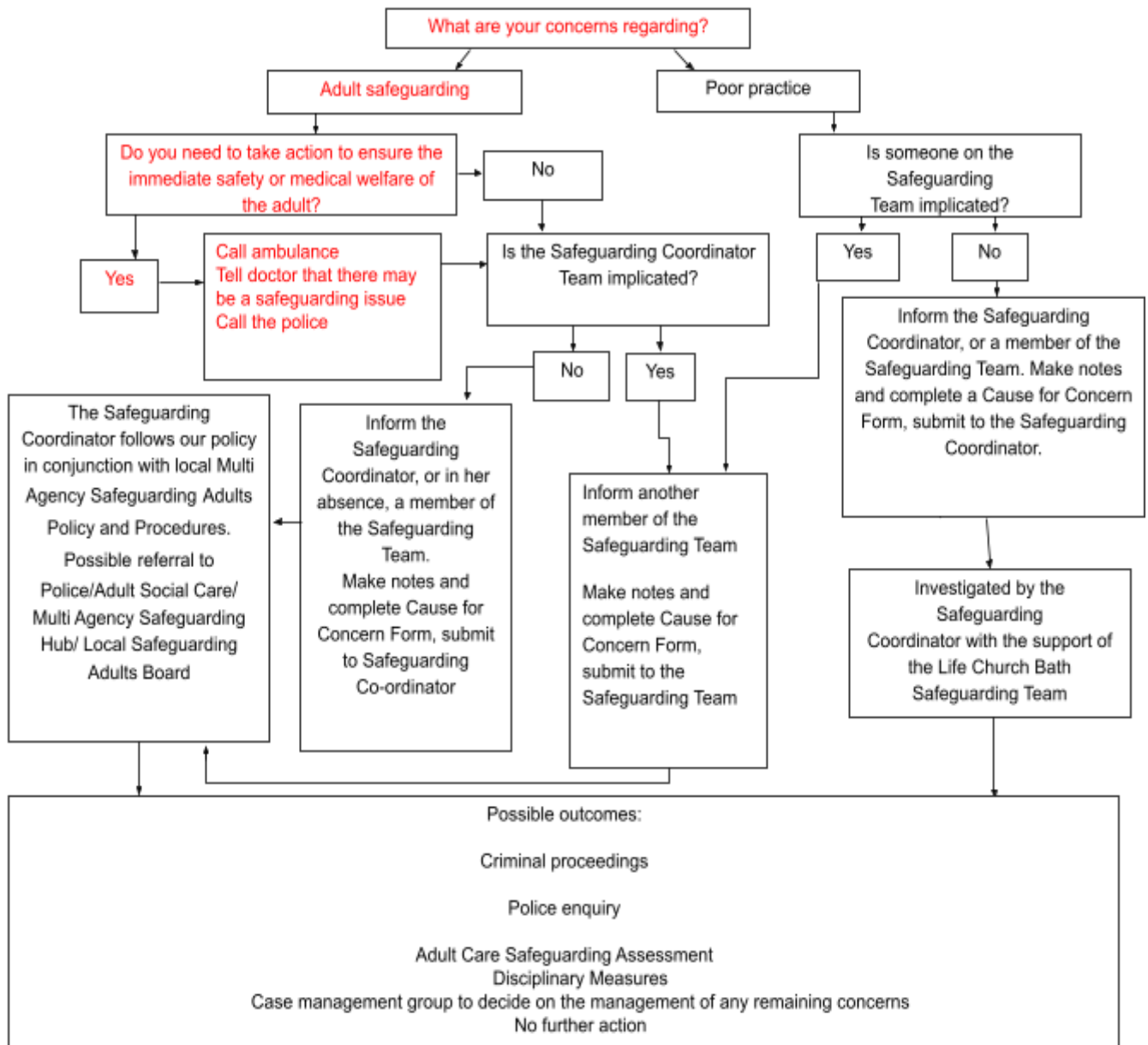
SAFEGUARDING ADULTS FLOWCHART

Dealing with Concerns, Suspicions or Disclosure

There are concerns/suspicions about a person's behaviour

OR

There has been a disclosure or an allegation about a person's behaviour



The Trustees are responsible for:

- Following all national and local safeguarding legislation and procedures
- Providing the necessary resources for on-going safeguarding training and development for all its workers
- Ensuring that the premises meet the requirements of the Equality Act 2010 and all other relevant legislation
- Supporting the Safeguarding Team in their work and in any action they may need to take in order to protect adults

The Leadership Team are responsible for:

- Following the Safeguarding Policy
- Supporting the Safeguarding Team in their work and in any action, they may need to take in order to protect adults, especially those with care and support needs
- Supporting all those working with adults, especially those adults with care and support needs
- Engaging with all members of the Life Church Bath community who have been impacted by abuse to consider their needs and how to respond to these pastorally

The Safeguarding Coordinator is responsible for:

- The preparation of, and ensuring the awareness of, the safeguarding policy and its annual review
- Implementing the safeguarding policy and procedures and supporting others to follow the policy and procedures
- Developing a safeguarding culture and awareness
- Ensuring that adults are supported in finding information on where to get help and advice in relation to abuse, discrimination, bullying or any other matter where they have a concern
- Arranging and making sure workers and leaders attend relevant training
- Keeping accurate records relating to safeguarding concerns confidentially
- Regularly informing the leadership on good practice issues
- Working in partnership with statutory and other agencies

- Collating and clarifying the precise details of an allegation or suspicion, and reporting safeguarding concerns onto statutory agencies

The Safeguarding Team is responsible for:

- Covering in the absence of the safeguarding coordinator (eg illness or holiday)
- Being an alternative should ever an allegation be made against the coordinator or someone close to them making it inappropriate for them to deal with the issue
- Assisting in the annual review of the safeguarding policy
- Advising on best practice

Good practice, poor practice and abuse

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

It is not the responsibility of any individual involved in Life Church Bath to make judgements regarding whether or not abuse is taking place. However, all Life Church Bath personnel, whether staff or volunteers, have the responsibility to recognise and identify poor practice and potential abuse, and act on this if they have concerns.

The Safeguarding Team will also communicate with any adult within the Life Church Bath community who has concerns regarding poor practice

STAFF AND VOLUNTEERS

Please also see our [‘Introduction to working with Adults’ Policy](#).

Safer recruitment

Life Church Bath will ensure that paid staff and volunteers working with adults with known care and support needs will be appointed, trained, supported and supervised in accordance with government guidance on safe recruitment.

Training

Life Church Bath is committed to ongoing safeguarding training and development opportunities for all workers, developing a culture of awareness of safeguarding issues to help protect everyone.

Management of Staff and Volunteers

Life Church Bath is committed to supporting all workers and ensuring they receive support and supervision through regular team meetings.

Whistle Blowing

We recognise that as a church, we have a duty to conduct ourselves in a responsible and transparent way and to take into account legal requirements, the requirements of funding bodies, the Charity Commission and any other public body.

As a church we will follow the principles contained in the Public Interest Disclosure Act 1998. Therefore, we expect all employees (paid or voluntary) to report improper actions and omissions. Whilst all malpractice and acts of omission will be investigated, it is especially important that suspicions of abuse are immediately reported to the Safeguarding Team.

Further Information

Policies, procedures and supporting information are available on the Life Church Bath website at www.lifechurchbath.com

The Safeguarding Coordinator can be contacted on safeguarding@lifechurchbath.com

Review date

This policy will be reviewed annually or sooner in the event of legislative changes or revised policies and best practice.

Making Safeguarding Personal

There has been a cultural shift towards Making Safeguarding Personal within the safeguarding process. This is a move from prioritising outcomes demanded by bureaucratic systems. The safeguarding process used to involve gathering a detailed account of what happened and determining who did what to whom. Now the outcomes are defined by the person at the centre of the safeguarding process. The safeguarding process places a stronger emphasis on achieving satisfactory outcomes that take into account the individual choices and requirements of everyone involved.

“What good is it making someone safer if it merely makes them miserable?” – Lord Justice Mundy, *“What Price Dignity?”* (2010)

What this means in practice is that adults should be more involved in the safeguarding process. Their views, wishes, feelings and beliefs must be taken into account when decisions are made.

The Care Act 2014 builds on the concept, stating that *“We all have different preferences, histories, circumstances and lifestyles so it is unhelpful to prescribe a process that must be followed whenever a concern is raised.”*

However, the Act is also clear that there are key issues that should be taken into account when abuse or neglect are suspected, and that there should be clear guidelines regarding this.

<https://www.local.gov.uk/topics/social-care-health-and-integration/adult-social-care/making-safeguarding-personal>

Capacity – Guidance on Making Decisions

The issue of capacity or decision making is a key one in safeguarding adults. It is useful for organisations to have an overview of the concept of capacity.

We make many decisions every day, often without realising. We make so many decisions that it's easy to take this ability for granted.

But some people are only able to make some decisions, and a small number of people cannot make any decisions. Being unable to make a decision is called “lacking capacity”.

To make a decision we need to:

- Understand information
- Remember it for long enough
- Think about the information

- Communicate our decision

A person's ability to do this may be affected by things like learning disability, dementia, mental health needs, acquired brain injury, and physical ill health.

The Mental Capacity Act 2005 (MCA) states that every individual has the right to make their own decisions and provides the framework for this to happen.

The MCA is about making sure that people over the age of 16 have the support they need to make as many decisions as possible.

The MCA also protects people who need family, friends, or paid support staff to make decisions for them because they lack capacity to make specific decisions.

Our ability to make decisions can change over the course of a day.

Here are some examples that demonstrate how the timing of a question can affect the response:

- A person with epilepsy may not be able to make a decision following a seizure.
- Someone who is in an acute mental health crisis may not be able to make a decision at that point.
- A person may not be able to respond as quickly if they have just taken some medication that causes fatigue.

In each of these examples, it may appear as though the person cannot make a decision. But later in the day, presented with the same decision, they may be able to at least be involved.

The MCA recognises that capacity is decision-specific, so no one will be labelled as entirely lacking capacity. The MCA also recognises that decisions can be about big life-changing events, such as where to live, but equally about small events, such as what to wear on a cold day.

To help you to understand the MCA, consider the following five points:

1. Assume that people are able to make decisions, unless it is shown that they are not. If you have concerns about a person's level of understanding, you should check this with them, and if applicable, with the people supporting them.
2. Give people as much support as they need to make decisions. You may be involved in this – you might need to think about the way you communicate or provide information, and you may be asked your opinion.
3. People have the right to make unwise decisions. The important thing is that they understand the implications. If they understand the implications, consider how risks might be minimised.
4. If someone is not able to make a decision, then the person helping them must only make decisions in their "best interests". This means that the decision must

be what is best for the person, not for anyone else. If someone was making a decision on your behalf, you would want it to reflect the decision you would make if you were able to.

5. Find the least restrictive way of doing what needs to be done.

Remember:

- You should not discriminate or make assumptions about someone's ability to make decisions, and you should not preempt a best-interests decision merely on the basis of a person's age, appearance, condition, or behaviour.
- When it comes to decision-making, you could be involved in a minor way, or asked to provide more detail. The way you provide information might influence a person's ultimate decision. A person may be receiving support that is not in-line with the MCA, so you must be prepared to address this.

Consent and Information Sharing

Workers and volunteers should always share safeguarding concerns in line with our policy, and with a member of the Safeguarding Team in the first instance, except in emergency situations. As long as it does not increase the risk to the individual, the worker or volunteer should explain to them that it is their duty to share their concern with a member of the Safeguarding Team.

The Safeguarding Team will then consider the situation and plan the actions that need to be taken, in conjunction with the adult at risk and in line with our policy and procedures and local safeguarding adults board policy and procedures.

To make an adult safeguarding referral you need to call the local safeguarding adults team. This may be part of a MASH (Multi-Agency Safeguarding Hub). A conversation can be had with the safeguarding adults team without disclosing the identity of the person in the first instance. If it is thought that a referral needs to be made to the safeguarding adults team, consent should be sought where possible from the adult at risk.

Individuals may not give their consent to the sharing of safeguarding information with the safeguarding adult's team for a number of reasons. Reassurance, appropriate support and revisiting the issues at another time may help to change their view on whether it is best to share information.

If they still do not consent, then their wishes should usually be respected. However, there are circumstances where information can be shared without consent such as when the adult does not have the capacity to consent, it is in the public interest because it may affect other people or a serious crime has been committed. This

should always be discussed with the Safeguarding Co-ordinator and the local authority safeguarding adults team.

If someone does not want you to share information outside of the organisation or you do not have consent to share the information, ask yourself the following questions:

- Is the adult placing themselves at further risk of harm?
- Is someone else likely to get hurt?
- Has a criminal offence occurred? This includes: theft or burglary of items, physical abuse, sexual abuse, forced to give extra money for lessons (financial abuse) or harassment.
- Is there suspicion that a crime has occurred?

If the answer to any of the questions above is 'yes' - then you can share without consent and need to share the information.

When sharing information there are seven Golden Rules that should always be followed.

1. Seek advice if in any doubt
2. Be transparent - The Data Protection Act (DPA) is not a barrier to sharing information but to ensure that personal information is shared appropriately; except in circumstances where by doing so places the person at significant risk of harm.
3. Consider the public interest - Base all decisions to share information on the safety and well-being of that person or others that may be affected by their actions.
4. Share with consent where appropriate - Where possible, respond to the wishes of those who do not consent to share confidential information. You may still share information without consent, if this is in the public interest.
5. Keep a record - Record your decision and reasons to share or not share information.
6. Accurate, necessary, proportionate, relevant and secure - Ensure all information shared is accurate, up-to-date and necessary, and share with only those who need to have it.
7. Remember the purpose of the Data Protection Act (DPA) is to ensure personal information is shared appropriately, except in circumstances where by doing so may place the person or others at significant harm.

Appendix B: Cause For Concern Form (Adults)

For use by staff and volunteers. Please take care in writing legibly.

Date of incident:	
Time of incident:	
Name of person completing this form:	
Signed:	
Dated:	
Adult's Name:	
Date of birth or age:	
Address (or approx. area):	
Contact Details:	
<p>Nature of concern:</p> <p><i>(e.g. disclosure, change in behaviour, demeanour, appearance, injury. Please include as much factual detail as possible.</i></p> <p><i>Continue on a separate sheet as necessary.)</i></p>	

<p>How did the concern come to light:</p> <p><i>Is it your own concern or raised by someone else?</i></p>	
<p>If raised by someone else, please provide their full name and contact details:</p>	
<p>If known, provide details of the person causing harm:</p>	
<p>Any other relevant information:</p>	
<p>Action taken so far:</p>	
<p>Date and time of discussion with a member of the Safeguarding Team:</p>	
<p>Name of Safeguarding Team you discussed this with:</p>	

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

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

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

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/dbs-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

<http://www.local.gov.uk/documents/10180/5852661/Making+Safeguarding+Personal+-+Guide+2014/4213d016-2732-40d4-bbc0-d0d8639ef0df>

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

Appendix D: Useful Contacts

Safeguarding Coordinator	Amy Wyatt	07446 905 899
Deputy Safeguarding Coordinator	Ruth Martin	07971 925 484
Designated Elder	Jonathan Horsfall	07511 003 496

Life Church Bath Safeguarding Team: safeguarding@lifechurchbath.com

Emergency services: 999 – for someone is in immediate danger

Adult Safeguarding Team: 01225 394200, and during out of hours the Emergency Duty Team on 01454 615165, – if you are concerned that an adult is at risk of being abused or neglected

Police: 999 – if someone is in immediate danger from domestic abuse

Avon and Somerset Police: 101 – for someone not in immediate danger from domestic abuse

Southside: 01225 331243 – offers independent advice and expert support for victims of domestic abuse

National Domestic Violence Freephone Helpline: 0808 2000 247 – offers independent advice and expert support for victims of domestic abuse

Forced Marriage Unit: 020 7008 0151 if you are trying to stop a forced marriage or for someone who needs help leaving a marriage that they have been forced into

Avon and Wiltshire Partnership (Mental Health): 0300 303 1320 – 24-hour response in a mental health crisis

B&NES Mental Health Intensive Team: 01225 362814 – for mental health advice

Ann Craft Trust – Safeguarding Adults: 0115 951 5400

Website: www.anncrafttrust.org; Email: Ann-Craft-Trust@nottingham.ac.uk

Age UK: 0800 169 65 65