

Cambridge Rock Festival

Adult at Risk Policy and Procedure



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Adult At Risk Policy

1. The definition of who is an Adult At Risk As defined by the Care Act 2014

- The term 'Adult at Risk', is a short form of the phrase 'An adult at risk of abuse or neglect' and refers to adults who may have safeguarding needs according to the Care Act (2014).

An Adult at Risk (sometimes referred to as AAR) is an adult (someone aged 18 or older) who:

- a) has needs for care and support (whether or not the authority is meeting any of those needs),
- b) is experiencing, or is at risk of, abuse or neglect, and
- c) as a result of those needs, is unable to protect himself or herself against the abuse or neglect or the risk of it.

As set out in the Care Act 2014, statutory Adult Safeguarding duties exist when adults who are experiencing, or at risk of, abuse or neglect cannot protect themselves due to their care and support needs.

2. What are Care and Support Needs?

Injury, illness, or impairment, either mental or physical, can mean that a person needs help or support to live well. For example, a person may have care and support needs as a result of:

- physical disability, learning disability or sensory impairment
- mental health needs, including dementia or a personality disorder
- long-term health conditions
- Substances or alcohol misuse to the extent that it affects ability to manage day-to-day living

An adult may be considered to be at risk, even if:

- A formal assessment of care needs has not been carried out
- The adult pays for their care and support themselves
- Care and support needs are being met by family or friends

Having care and support needs does not automatically mean that an adult cannot protect him or herself from abuse; it is important not to make assumptions about an adult's vulnerability based on the presence of care and support needs alone.

3. Making Safeguarding Personal (MSP)

Statutory requirements regarding the Safeguarding of Adults at Risk are set out in the Care Act 2014

Making Safeguarding Personal requires all involved to find out about the lived experience of the adult and use this to inform decisions and outcomes which are in the best interest of the individual.

Making safeguarding personal means, it should be person-led and outcome-focused. 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, wellbeing and safety.

4. The Care Act 2014 guidance list the following type of neglect and abuse.

- **Physical abuse:** including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.
- **Domestic violence:** including psychological, physical, sexual, financial, emotional abuse; so called 'honour' based violence.
- **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.
- **Psychological abuse:** including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.
- **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.
- **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.
- **Discriminatory abuse:** including forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or Religion.
- **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 4 poor professional practice as a result of the structure, policies, processes and practices within an organisation.
- **Neglect and acts of omission:** including ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating
- **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.

In addition to these categories of abuse other potential abusive situations such as radicalisation, prevent and coercive control should also be considered.

5. Making a referral

5.1 - When a disclosure is made, it is the Designated Safeguarding person's responsibility to make sure that all information is collected in a non-biased and objective way.

The Designated Safeguarding Lead is Emma Thomas.

The Deputy Safeguarding Leads are Chris Stapleton, and Debbie Drew.

5.2 - When it is recognised that person meets the criteria for an 'adult at risk' a set of procedures must be adhered to.

5.3 - Gaining Consent: There may be circumstances where consent cannot be obtained because the adult at risk lacks the capacity to give it or is subject to coercion or undue influence. There are occasions when you may need to raise a safeguarding concern without the person's consent, for example:

- it is in the public interest,
- there is a risk to other 'adults at risk', or children, or
- the concern is about organisational abuse, or
- the concern or allegation of abuse relates to the conduct of an employee or volunteer within an organisation providing services to adults at risk
- note that risk to other "adults at risk" may include financial scams or other forms of exploitation
- the adult at risk lacks the capacity to make the specific decision to consent to share information, and a decision is made to raise a safeguarding concern in the person's "Best Interests" (Mental Capacity Act 2005)
- the adult at risk is subject to coercion or undue influence, to the extent that they are unable to give consent
- it is in the adult at risk's vital interests (to prevent serious harm or distress or life-threatening situations)

The Designated Safeguard Lead or their Deputies will assess whether there is a cause for concern that has met the reporting threshold. If they are unsure as to whether the threshold has been met they will seek advice from the Cambridgeshire and Peterborough Partnership Board (0345 045 5202).

6. Risk Assessment:

The Designated Safeguarding person must assess if the individual is at immediate risk. If this is the case the police or an ambulance must be called straight away on 999.

7. Record disclosure/concern:

7.1 - The disclosure/concern facts must be recorded as soon as possible on an 'Incident Record Form'. This includes the dates, times of disclosure, what the individual has disclosed in bullet points if they feel they are currently at risk, and what they would like the following steps. Again, this MUST be the fact and no bias or point of view of the person recording the incident.

7.2 - Report to Multi-Agency Safeguarding Hub (MASH): The Safeguarding Lead must contact MASH using the online referral form and telephone.

7.3 - There may be occasions when the designated safeguarding lead is unsure whether to report or not, e.g. the adult has refused consent to share the information, or the adult's vulnerability is uncertain. If in any doubt, the designated person must consult the MASH via the Council's Customer Services for advice

Contact details

Customer Services (8 am to Monday to Friday, 9 am to 1 pm on Saturday)

Telephone 0345 045 5202

Email: referral.centre-adults@cambridgeshire.gov.uk

7.4 - If someone is in danger and unable to protect themselves or cannot remain in the community without immediate intervention, telephone the Emergency Duty Team on 01733 234 724.

7.5 - Referral to the Multi-Agency Safeguarding Hub via the Council's Customer Services must be made on the same day using the Adult Safeguarding Referral form (Online for Cambridgeshire).

Reporting should not be delayed by the need to complete the form.

7.6 - Recording Safeguarding Concerns & Safeguarding Disclosures

Concerns about safeguarding abuse against an adult at risk must be recorded as soon as possible and always on the same day. Good record keeping is an essential from the first contact with an adult at risk to case closure. Record keeping is central to the processes of risk assessment, safeguarding. Whenever a concern or allegation of abuse is made, all must keep clear and accurate records. Records must provide accurate, factual, verifiable information and specify where they are based on direct observation.

8. Further relevant contacts

Cambridgeshire

Cambridgeshire and Peterborough Customer Services (8am to 6pm Monday to Friday, 9am to 1pm on Saturday)

Telephone 0345 045 5202

Email: referral.centreadults@cambridgeshire.gov.uk

In an emergency, outside office hours, if someone is in danger and unable to protect themselves or cannot remain in the community without immediate intervention telephone 01733 234 724 and / or dial 999