Date of policy	18/03/2026
Date to be reviewed	17/03/2027
Chairperson 's signature	David Hutchinson

This policy is to be read in conjunction with :
Health and Safety Policy
Safeguarding Policy
Child Protection Policy

Introduction
Mickleton Village Hall Association (MVHA), which incorporates our trustees, committee members and our volunteers, is committed to ensuring that all those associated with the hall have positive enjoyable experiences. Consequently, we are committed to ensuring that all who take part in our activities are kept free from harm, including 'adults at risk'.

The term 'adult at risk' is detailed in the Care Act 2014 and focuses on the situation causing the risk, rather than the characteristics of the adult concerned. Safeguarding duties apply to any adult (18 years and over) who meet the following criteria:

- has needs for care and support (whether or not the local authority is meeting any of those needs)
- is experiencing, or at risk of, abuse or neglect
- 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.

Within the Care Act 2014 there are 10 elements of Abuse:

1. Physical abuse - This can include assault, hitting, slapping, pushing, and misuse of medication, restraint or inappropriate physical sanctions.

2. Domestic violence - Including psychological, physical, sexual, financial, emotional abuse; so called 'honour' based violence.

In 2013, the Home Office announced changes to the definition of domestic abuse:

- Incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse... by someone who is or has been an intimate partner or family member regardless of gender or sexuality
- Includes: psychological, physical, sexual, financial, emotional abuse; so called 'honour' based violence; Female Genital Mutilation (FGM); forced marriage.

Age range extended down to 16.

3. 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.

4. 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

5. 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

6. Modern slavery

Difference between smuggling and trafficking: Trafficking is further exploitation after movement.

Sexual /Forced Labour –

- Prostitution, Escorts, involved in producing pornography.
- Very often vulnerable males are preyed on at homeless shelters, soup kitchens, job centres. Slaves are kept by some travelling communities they are sold between families; they are made to work in Tarmacking/paving and general building.
- Nail bars – recruit vulnerable young women, who are further exploited
- Large Agencies supply exploited staff to factories, agriculture, fishing, cleaning teams and care homes. Very often they do not receive any wages.
- Hand Car Washes – look for people wearing inappropriate clothes for cold wet weather, do they handle the money, can they speak English, how do they arrive and leave
- Domestic Servitude Wealthy families who bring in their own servants from abroad, invisible to our authorities. Kept for years without documents or means to leave

Financial
Personal documents passports etc removed, bank accounts set up; benefit fraud, claimants never see any of the money

Child Trafficking - Child sexual exploitation

Criminal Exploitation- Pick pocketing gangs, cannabis farms etc

Illegal adoption

7. Discriminatory abuse including forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion. A hate crime is any criminal offence that is motivated by hostility or prejudice based upon the victim's:

- disability
- race
- religion or belief
- sexual orientation

- transgender identity.

Hate crime can take many forms including:

- physical attacks such as physical assault, damage to property, offensive graffiti and arson
- threat of attack including offensive letters, e-mails, abusive or obscene telephone calls, groups hanging around to intimidate and unfounded, malicious complaints.
- verbal abuse, insults or harassment, taunting, offensive leaflets and posters, abusive gestures, dumping of rubbish outside homes or through letterboxes, and bullying at school or in the workplace.
- The use of electronic media to abuse, insult, taunt or harass.

8. 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.

9. 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.

Medication errors where the patient has incurred harm will be classified as a safeguarding concern. Likewise medication incidents where the patient has not necessarily incurred harm but the perpetrator is the same member of staff for multiple incidents will be classified as a safeguarding concern.

Grade 3 and 4 pressure ulcer ulcers are considered in this context if elements of essential care are found to be omitted.

The Mental Capacity Act created the criminal offences of ill-treatment and wilful neglect in respect of people who lack the ability to make decisions. These offences can be committed by anyone responsible for that persons care and support. (Care Act – section 14 - 14.48).

10. 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.

Trust staff will be expected to work sensitively with the patient, identifying care and social needs, offering comprehensive discharge planning with multi-professionals, taking care to respect the patient's lifestyle and wishes

Understanding who may abuse or neglect

Incidents of abuse may be one-off or multiple and affect one person or more.

Patterns of abuse vary and include:

- Serial abuse, in which the perpetrator seeks out and 'grooms' individuals. Sexual abuse sometimes falls 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 or persistent psychological abuse
- Opportunistic abuse, such as theft occurring because money or jewellery has been left lying around

In the same way that it should never be assumed that an adult is not able to be abused, it should also never be assumed that an adult is not able to abuse or neglect someone else.

Most cases of abuse and neglect are perpetrated by people that the victim knows, often in a position of power or trust. Anyone can perpetrate abuse or neglect, including:

- Spouses / partners
- Other family members
- Neighbours
- Friends
- Acquaintances
- Local residents
- Volunteers
- People who deliberately exploit adults they perceive as vulnerable to abuse
- Paid staff, or professionals including carers
- Strangers

The six safeguarding principles

The Care Act 2014 sets out the following principles that should underpin the safeguarding of adults.

1. Empowerment: people are supported and encouraged to make their own decisions and informed consent
2. Prevention: it is better to act before harm occurs
3. Proportionality: the least intrusive response appropriate to the risk presented
4. Protection: support and representation for those in greatest need
5. Partnership: services offer local solutions by working closely with their communities. Communities have a part to play in preventing, detecting, and reporting neglect and abuse
6. Accountability: accountability and transparency in delivering safeguarding

Concern about an older person or a volunteer who might be 'at risk'.

When there is a concern about an older person or a fellow volunteer it is important to maintain an open mind and understand that any adult, in any situation, could be the victim of abuse or neglect. When concerned about the welfare of an older person or a fellow volunteer, volunteers must always act in the best interests of the person and act immediately.

If the older person or volunteer is in immediate danger then it may be the best course of action to call the police on 999, and advice and support will be given.

The police will ask for key information, so it is important to share what you have, even if it is only a name and telephone number and explain what you have seen or heard. The police will advise of the steps to take.

If the is a concern about the welfare or safety of an older person or a fellow volunteer, it must be reported to the safeguarding lead at the first possible opportunity and no later than one working day after being informed about a concern. The information recorded must be factual and not based on opinions, recording what the person has said or what has been witnessed, with the specific nature of the concern.

When a disclosure is made from an adult about an allegation of abuse you should:

- Reassure them and allow them to speak without interruption
- Listen carefully to what is said even if it sounds fanciful, do not dismiss, trivialise, or exaggerate the issue
- Record what they have been told / witnessed as soon as possible
- Not make suggestions, coach, or lead the person in any way
- Remain calm and do not show shock or disbelief
- Reassure the adult that they have done the right thing in telling you
- Tell the adult that they are not to blame
- Tell the person that the information will be treated seriously
- Not interrogate or ask detailed or probing questions
- Never promise to keep a secret and explain that you have a responsibility for their safety and must have a confidential conversation with the safeguarding specific point of contact
- Let the adult know that there are others who can help them and that they are not alone

After a disclosure is made
After a disclosure is made it is vitally important that the safeguarding incident is recorded and shared with the safeguarding lead.

The designated safeguarding lead will contact the adult to discuss the concern and decide, based on the information provided, whether a referral should be made to their local safeguarding services.

All safeguarding concerns involving older people are treated as ‘adult at risk’ and that this status is reviewed as part of the safeguarding decision-making process.

If it is decided that the concern, or incident potentially meets the threshold for a referral, the designated safeguarding lead make the referral to the local authority safeguarding team and will liaise with those involved.

Referrals are made to Durham Safeguarding Adult Partnership by calling Social Care Direct 24 hours a day on 03000 267 979 or for text messaging on 0753 745 3102. A trained officer will listen carefully to any concerns, give advice, and accept a safeguarding adults report if necessary, anonymously, if necessary.

Please note: the threshold will be met when there is reasonable cause to suspect that an adult who has care and support needs, is at risk of or experiencing abuse and neglect.

The designated safeguarding lead is responsible for recording further details and outcomes of safeguarding referrals. The designated safeguarding lead is also responsible for

monitoring and overseeing concerns and incidents and for providing assurance that they are being managed appropriately.

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