Fences & Frontiers

Safeguarding adults at risk Policy & Procedure

Last Reviewed: 13.11.2026
Next Review: 12.11 2027

Policy

1. Introduction

1.1 This policy outlines the duty and responsibility of staff, volunteers and trustees working on behalf of **Fences & Frontiers** in relation to the protection of vulnerable adults at risk from abuse or harm.

1.2 We will make sure that all vulnerable adults have the same protection regardless of refugee status, age, disability, gender reassignment, race, religion or belief, sex, or sexual orientation.

1.3 A separate policy outlines the duty and responsibility of staff, volunteers and trustees in relation to children's safeguarding and all parties must be familiar with both.

2. The Implementation of this Policy

The Board of Trustees is ultimately accountable for ensuring that Fences & Frontiers abides in full with its legal and regulatory safeguarding obligations.

It discharges that responsibility by:

- ensuring this policy is legally compliant and consistent with best safeguarding practice at all times,
- regarding safeguarding as a governance and risk management priority for the organisation,
- delegating operational responsibility for the implementation and periodic, external, review of this policy to Board and Designated Safeguarding Lead of the charity.

3. Aims of this Policy:

- Protection - Staff and volunteers are responsible for safeguarding vulnerable adults and are aware of what abuse is and how to spot it
- Prevention- Having a clear system for recruiting rigorously and reporting concerns as soon as harm or abuse is identified or suspected
- Proportionality- Abuse is responded to appropriately, respecting confidentiality

3.1. This policy has been written to provide easily accessible and practical advice for Fences & Frontiers members who have concerns about adults they come across in their direct work.

3.2 This policy should be read in conjunction with our other safeguarding and health and safety documents including:. These are available on our website here.

4. Context

4.1 Adult abuse can happen to anyone who is 18 or over. The Care Act 2014 defines an adult at risk as anyone aged 18 or over, who:

- 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; 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.

These adults for example may:

- be frail due to age, ill health, physical disability or cognitive impairment, or a combination of these
- have a learning disability
- have a physical disability and/or a sensory impairment
- have mental health needs including dementia or a personality disorder
- have a long-term illness/condition
- be users of substances or alcohol

- be unable to demonstrate the capacity to make a decision and is in need of care and support

4.2 What is abuse and where does it happen?

4.3 Adult abuse is when something is said or done to an adult at risk that makes them feel upset, hurt or frightened. Abuse is not always intentional but it causes harm so something should be done to stop it from happening again.

4.4 Abuse may be a one-off incident or occur multiple times, and it may affect one person or more. Repeated instances of poor care may be an indication of more serious problems; what we now describe as organisational abuse.

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

4.6 It may be caused by anyone who has power over the person. The person responsible for the abuse is very often well known to the person being abused and could be:

- a spouse or partner
- son or daughter
- a relative
- a friend
- a paid or unpaid carer
- a neighbour
- a health or social care professional
- another resident or service user

4.7 Abuse can be caused by a person deliberately intending to harm or neglect, or failing to take the right action or through their ignorance. It can involve one or a number of people.

4.8 Abuse is any action that harms another person and includes the following:

- 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, coercive control.
- Sexual abuse – including rape, 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 (including withholding affection or causing isolation), humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, 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 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 behavior neglecting to care for one's personal hygiene, health or surroundings and includes behavior such as hoarding.

4.9 Sexual harassment

- Fences & Frontiers is committed to protecting staff and volunteers from harassment, including sexual harassment, from colleagues, participants, or members of the public. Any such concerns should be reported to the DSL and will be acted upon promptly

4.10 Where does abuse take place?

Abuse can happen anywhere at any time in any of the following places:

- In your own home or someone else's home
- In a carer's home
- At a day centre
- In care homes
- In hospital
- At work
- At college
- In a public place

4.11 Abuse is a violation of an individual's human and civil rights by any other person or persons.

5. Purpose

5.1 This policy exists to help Fences & Frontiers prevent and respond to the abuse or exploitation of people using our services

Many people who use our services are vulnerable to abuse and exploitation because of their personal difficulties and experiences. Such experiences may include mental illness, trauma and distress, violence and rape. Some people may have been subject to abuse in their country of origin or on their journey to the UK, and we can help them deal with the effects of that through our holistic services, but this policy deals with safeguarding and therefore is focused on addressing current risks to our clients or potential risks faced by others accessing other services.

6. Processes

6.1. Alertness and Recognition

6.1.1. It is often difficult to recognise abuse and/or exploitation. However, all members should be alert to changes in a client's disposition or demeanor. Staff may see abuse occur, or may also overhear indications of abuse or exploitation, or be informed directly.

6.1.3. The abuse must be reported to the Designated Safeguarding Lead - see.10.1.

4. Dealing with an incident or disclosure

4.1 If a staff member, trustee or volunteer has concerns about the adult's welfare and believes they are suffering or likely to suffer abuse or neglect, they must report this as set out in Section 5 below.

4.2 Staff, trustees and volunteers in whatever circumstances should be clear that cooperating, sharing information, joint working and addressing barriers are likely to lead to better outcomes where a safeguarding incident is being dealt with.

4.3 This means early sharing of information is the key to providing an effective response where there are emerging concerns.

5. Procedure in the event of an incident or allegation or disclosure made to a staff member, trustee or volunteer

5.1 In the event of an incident or disclosure:

DO

- Make sure the individual is safe
- Assess whether emergency services are required and if needed call them
- Offer support and reassurance
- Take all necessary precautions to preserve forensic evidence
- Ascertain and establish the facts
- Record the events in writing (hard copy or soft copy) including dates, times, places, persons present, and stick to the facts
- Explain areas of confidentiality
- As soon as possible consult with the Designated safeguard lead
- Make referrals/seek advice as agreed with the Designated safeguarding lead

DO NOT

- Ignore the allegation/disclosure
- Confront the alleged abuser
- Be judgemental; voice your own opinion, or dismiss the concern
- Investigate or interview beyond that which is necessary to establish the basic facts
- Ask leading questions, assume information, make promises
- Elaborate in your notes
- Assume that someone else will pass on information which they think may be critical to the safety and wellbeing of the adult

5.2 Any suspicion, allegation or incident of abuse must be reported to the Designated safeguarding lead on that working day where possible.

5.3 This report should include information in relation to:

- The date, the time, the place where the alleged abuse happened
- Your name and the names of others present
- The name of the complainant and, where different, the name of the adult who has allegedly been abused
- The nature of the alleged abuse
- A description of any injuries observed
- The account which has been given of the allegation

5.4 It is important to remember that the person who first encounters a case of alleged abuse is not responsible for deciding whether abuse has occurred. This is a task for the professional adult protection agencies, following a referral from the designated adult protection officer.

6. Procedure for responding to a reported allegation or disclosure of abuse

6.1 The designated Safeguarding Lead shall advise the staff / volunteer member on who they should contact and what information should be provided.

- **If worried about an adult, referrals should be made to:**

  Lambeth Council Contact Centre:

  Tel: 020 7926 5555

  To raise a safeguarding adults concern online: www.lambethsab.org.uk

  Safeguarding information/advice: safeguardingadults@lambeth.gov.uk

- If the situation is urgent and you think someone may be at risk of immediate harm, you should take yourself out of danger and call 999.

- To find out more, please see the 'London Multi-agency Policy and Procedures to Safeguard Adults from Abuse' which can be found here.

- For further information and resources, please visit Islington Council safeguarding adults web pages at: Active Lambeth Safeguarding Statement - Active Lambeth

The Police should be contacted on 101 or 999 in an emergency or if the staff member, volunteer or trustee believes or suspects that a crime has been committed

6.2 A written record of the telephone report shall be made by the Staff member with support from the manager if necessary. The report must include the date and time of the report and the name and position of the person to whom the matter is reported in the Adult Safeguarding Team.

The telephone report must be emailed to the Contact Assessment Team/Safeguarding Team within 2 working days of the telephone conversation taken place.

6.3 It should be noted that local authorities are required to help people express their wishes and feelings, support them in weighing up their options, and assist them in making their own decisions when dealing with a safeguarding enquiry or a safeguarding adult review.

7. Confidentiality & Consent

7.1 Adult protection raises issues of confidentiality which should be clearly understood by all.

7.2 Staff, volunteers and trustees have a professional responsibility to share relevant information about the protection of adults at risk with other professionals, particularly investigative agencies and adult social services.

7.3 If an adult confides in a member of staff and request that the information is kept secret, the staff member should advise that they will take advice from their manager as to what to do.

7.4 Within that context, the adult should be assured that the matter will be disclosed only to people who need to know about it.

7.5 Where possible, consent should be obtained from the adult before sharing personal information with third parties. Full disclosure must take place to local authorities/police if it is in the public interest (i.e. could the person or the person doing it to them be a danger to others) and/or if the person does not have capacity; or clearly if consent has been given. If none of the above apply then the worker should see advice from the safeguarding adults team.

7.6 Where a disclosure has been made, staff/volunteers/trustees should let the adult know that disclosure to the local authority/police has taken place.

7.7 Staff should assure the adult that they will be kept informed of any action to be taken and why. The adult's involvement in the process of sharing information should be fully recorded and their feelings supported

7.8 All safeguarding information will be managed inline with the UK GDPR and Data Protection Act 2018

8. Prevent harm and abuse through rigorous recruitment and interview process and risk assessing

8.1 Anyone who works regularly with an adult at risk, will become a familiar face to them and is likely to be seen as safe and trustworthy, regardless of their role or hours of work. Therefore good practice should be applied when recruiting all those who have regular contact with adults at risk.

8.2 Safe recruitment and vetting processes are followed for all volunteers, employees, consultants and partners. Where an employee, volunteer or partner is engaged in 'regulated activity' (direct work with vulnerable individuals), a criminal background check (DBS Check) will be undertaken as part of the recruitment process.

8.3 All employees and volunteers must abide by this safeguarding policy and the Code of Conduct. The code sets out the standards of practice we expect of employees and volunteers - in terms professional competence, integrity, acting as a representative and in safeguarding - which support our vision, mission and values.

8.4 All walks, trips, and cultural activities will be risk-assessed in advance. The assessment will include safeguarding considerations such as supervision, safe transport, participant support needs, and managing emergencies

9. Designated Safeguarding Lead

9.1 The Designated Safeguarding Lead (DSL) is the main source of support, advice and expertise for safeguarding at Fences & Frontiers.

The role includes:

- Advising and supporting trustees and staff to develop and establish the organisation's approach to safeguarding.
- Playing a lead role in maintaining and reviewing Fences & Frontiers safeguarding plan.
- Coordinating the distribution of policies, procedures and safeguarding resources throughout the organisation.
- Advising on training needs and development, providing training where appropriate.
- Provide safeguarding advice and support to staff and volunteers.
- Managing safeguarding concerns, allegations or incidents reported to Fences & Frontiers
- Managing referrals to key safeguarding agencies (eg social services or police) of any incidents or allegations of abuse and harm.

10. Contact

10.1 Name: Bethan Illman

Title: Trustee and Designated Safeguarding Lead

bethan.illman@fencesandfrontiers.org

07925924368

11. Further sources of information

11.1 If you are worried about an adult, please report this to Lambeth Council:

- Tel: 020 7926 5555
- To raise a safeguarding adults concern online: www.lambethsab.org.uk
- Safeguarding information/advice: safeguardingadults@lambeth.gov.uk

11.2 If the situation is urgent, call 999.

To find out more, please see the 'London Multi-agency Policy and Procedures to Safeguard Adults from Abuse' which can be found here.

For further information and resources, visit: Adult social care and health | Lambeth Council

Signature

Name: Bethan Illman

Position: Designated Safeguarding Lead



Signed: 13.11.2026

Date: 13.11..2026