

Policy

TITLE			
Safeguarding Adults Policy			
Policy ref:	LG031P	Approval date	September 2026
Owner	Customer Operations Director	Planned review date	September 2029
Approved by	Customer Committee on behalf of the Board		

1 Background	This policy has been developed to safeguard residents from suffering any form of abuse or improper treatment. Abbeyfield has a zero-tolerance approach to abuse and neglect and will ensure all staff and volunteers are clear about their duty to safeguard the people they support from abuse and neglect and know what actions to take if they suspect or witness any form of abuse or improper treatment.
2 Objectives	Abbeyfield residents have the right to live their lives free from any form of abuse or improper treatment and the aim of this policy is to ensure: • Abbeyfield staff and volunteers work vigilantly to safeguard residents and to prevent any form of abuse or improper treatment. • Any concerns involving suspected or actual abuse or improper treatment of any resident will be taken extremely seriously and will be dealt with in accordance with robust safeguarding procedures. • Abbeyfield complies with all relevant legislation and regulations and works in partnership with other relevant bodies and agencies in connection with all safeguarding matters.
3 Scope	This policy covers all workers within the Abbeyfield Living Society (ALS); this includes those providing services on our behalf, such as volunteers, and bank and agency workers. NB: The following terms used throughout this policy should be understood as follows: • Manager – Registered Manager of a Care Quality Commission (CQC) registered care service providing a regulated activity; Sheltered Housing Manager or House Manager in a housing service. • Resident – all those who live in Abbeyfield accommodation, including prospective residents. • Staff – all those employed by Abbeyfield; volunteers; agency workers.

	This policy applies to all Abbeyfield residents, including those living in independent living, sheltered housing and other accommodation that is not regulated by the Care Quality Commission. Whilst safeguarding responsibilities differ from those in registered care services, concerns about abuse, neglect or exploitation must still be identified, reported and acted upon.
4 Policy 4.1	WHAT IS ADULT SAFEGUARDING? 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, while at the same time making sure that the adult's wellbeing is promoted. This includes, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances. Abbeyfield aims to promote each adult's wellbeing within our safeguarding arrangements, recognising that people have complex lives and being safe is only one of the things they want for themselves. 4.1.1 Overview of the Care Act 2014 Sections 42 to 46 of the Care Act 2014 detail adult safeguarding requirements in England. The changes introduced in April 2015 are fully detailed in the Department of Health Care and Support Statutory Guidance (as updated) issued under the Care Act 2014. Chapter 14 covers Adult Safeguarding, which is reflected within Abbeyfield's safeguarding policies and procedures and aligns with the most recent version of Care and Support Statutory Guidance issued by the DHSC. Safeguarding duties apply to an adult who: • has need for care and support (whether or not the local authority is meeting any of those needs); and • is experiencing, or at risk of, abuse or neglect; and • as a result of those needs is unable to protect themselves against the abuse or neglect or the risk of it. The local authority must make (or cause to be made) whatever enquiries it thinks necessary to enable it to decide whether any action should be taken in the adult's case and, if so, what and by whom. This duty is detailed in Section 42 of the legislation hence it is referred to as a S42 Enquiry. Local authority statutory adult safeguarding duties apply equally to those adults with care and support needs regardless of whether those needs are being met,

4.1.2	regardless of whether the adult lacks mental capacity or not, and regardless of setting. The Care Act requires that each local authority must: • Make enquiries or cause others to do so if it believes an adult is experiencing, or is at risk of, abuse or neglect. An enquiry should establish whether any action needs to be taken to prevent or stop abuse or neglect, and if so by whom; • Set up a Safeguarding Adults Board (SAB); • Arrange, where appropriate, for an independent advocate to represent and support an adult who is the subject of a safeguarding enquiry or Safeguarding Adult Review (SAR) where the adult has substantial difficulty in being involved in the process and where there is no other suitable person to present and support them; • Co-operate with each of its relevant partners in order to protect the adult. In their turn each relevant partner must co-operate with the local authority. The safeguarding duties have a legal effect in relation to organisations other than the local authority, for example the NHS and the Police. Each local authority has multi-agency safeguarding arrangements to reflect the requirements of the Care Act. Aims of adult safeguarding The aims of adult safeguarding are to: • Stop abuse or neglect wherever possible; • Prevent harm and reduce the risk of abuse or neglect towards 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 as a whole, alongside professionals, play their part in preventing, identifying and responding to abuse and neglect; • Provide information and support in accessible ways to help people understand the different types of abuse, how to stay safe and what to do to raise a concern about the safety or well-being of an adult; and • Address what has caused the abuse or neglect. In order to achieve these aims, Abbeyfield will: • ensure that all staff are clear about their roles and responsibilities.
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4.1.3	• work co-operatively as part of local multi-agency partnerships to facilitate timely and effective prevention of and responses to abuse or neglect; support the development of a positive learning environment at all levels; and • Actively work with relevant external and professional regulatory bodies to ensure appropriate action is taken if staff have engaged in or are suspected of engaging in abusive behaviour. This could in some circumstances include challenging the decision of the external body. Where possible, we will openly share with residents, their relatives and their representatives the outcomes of these actions. Before any referral to any professional or regulatory bodies, managers should ensure that they have all the relevant evidence in relation to any incident. This should include speaking to residents, their relatives and their representatives. If appropriate, Abbeyfield should also provide support to residents, their relatives and representatives to pursue engagement with external regulatory and professional bodies. Key principles of safeguarding The following six principles apply to all sectors and settings, including housing and care and support services. These principles will inform the ways in which we work with residents. Empowerment – People being supported and encouraged to make their own decisions and informed consent. “I am asked what I want 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 interests 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 have a part to play in preventing, detecting and reporting neglect and abuse. “I know that staff treat any personal or 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”.
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4.1.4	Accountability – Accountability and transparency in delivering safeguarding. “I understand the role of everyone involved in my life and so do they.” Types of abuse and neglect The following is a list of the different types and patterns of abuse and neglect and the different circumstances in which they may take place. This is not intended to be an exhaustive list but an illustrative guide as to the sort of behaviour which could give rise to a safeguarding concern: • Physical abuse – including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions. • Domestic abuse – including psychological, physical, sexual, financial, emotional abuse and 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. • Technology-Enabled Abuse – including the misuse of technology, digital devices or online platforms to cause harm, exploit, control, intimidate, monitor, deceive or manipulate an individual. This may include cyber bullying, online harassment, impersonation, unauthorised access to personal information or accounts, misuse of social media, coercive monitoring through digital devices, online scams, sharing images or personal information without consent, and the inappropriate use of artificial intelligence (AI), recording devices or assistive technologies. Technology-enabled abuse may occur alongside other forms of abuse, including psychological, financial, domestic or discriminatory abuse. • 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.
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	• 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 ongoing 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 behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding. Incidents of abuse may be multiple or one-offs, and affect one person or more. Repeated instances of poor care may be an indication of more serious problems and of what is described as organisational abuse. In order to see these patterns, it is important that information is recorded and appropriately shared. Patterns of abuse vary and include: • Serial abusing 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 abuse between spouses or generations or persistent psychological abuse; or • Opportunistic abuse, such as theft occurring because money or jewellery has been left lying around. 4.2 RESPONDING TO AND PREVENTING ABUSE AND NEGLECT Anyone who is alerted to suspected, alleged or actual abuse, or the risk of abuse, must report it to their line manager or designated person in charge of the service immediately. See Procedure for responding to suspected or actual abuse (LG031P 10.1) for full details. 4.2.1 Information sharing and confidentiality Sharing the right information, at the right time, with the right people is fundamental to good practice in adult safeguarding.
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	The Care Act 2014 S45 'supply of information' duty covers the responsibilities of others to comply with requests for information from the Safeguarding Adults Board. Sharing information between organisations as part of day-to-day safeguarding practice is already covered in the common law duty of confidentiality, the Data Protection Act, the Human Rights Act and the Crime and Disorder Act. Organisations need to share safeguarding information with the right people at the right time to: • Prevent death or serious harm; • Coordinate effective and efficient responses; • Enable early interventions to prevent the escalation of risk; • Prevent abuse and harm that may increase the need for care and support; • Maintain and improve good practice in adult safeguarding; • Reveal patterns of abuse that were previously undetected and that could identify others at risk of abuse; • Identify low-level concerns that may reveal people at risk of abuse; • Help people to access the right kind of support to reduce risk and promote wellbeing; • Help identify people who may pose a risk to others and, where possible, work to reduce offending behaviour and • Reduce organisational risk and protect reputation. Adults have a general right to independence, choice and self-determination including control over information about themselves. In the context of adult safeguarding, these rights can be overridden in certain circumstances such as emergency or life-threatening situations. The law does not prevent the sharing of sensitive, personal information within organisations. If the information is confidential but there is a safeguarding concern, sharing it may be justified. In addition, the law does not prevent the sharing of sensitive, personal information between organisations where the public interest served outweighs the public interest served by protecting confidentiality – for example, where a serious crime may be prevented. Abbeyfield policy fully complies with the Data Protection Act 2018 and ICO Data Sharing Code of Practice 2021. The Data Protection Act enables the lawful sharing of information. Staff cannot give a personal assurance of confidentiality and should always report safeguarding concerns to their line manager in the first instance except in emergency situations. However, it is good practice to try to gain the person's
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	consent to share information and as long as it does not increase risk, staff should inform the person if they need to share their information without consent. Any approach from the press or media must be referred to Abbeyfield's central PR team and any press statements will not give out or imply any personal details.
4.2.2	Mental Capacity People must be assumed to have capacity to make their own decisions and be given all practicable help before anyone treats them as not being able to make their own decisions. Where an adult is found to lack capacity to make a decision then any action taken, or any decision made for, or on their behalf – including the sharing of information – must be made in their best interests, in line with the Mental Capacity Act 2005 (as amended) (MCA).
4.2.3	Preventing Abuse It is essential to recognise the importance of preventing abuse and neglect wherever possible. Observant staff making early, positive interventions with individuals and families can make a huge difference to their lives, preventing the deterioration of a situation or breakdown of a support network. It is often when people become increasingly isolated and cut off from families and friends that they become extremely vulnerable to abuse and neglect. Robust risk management processes can prevent concerns escalating to a crisis point and requiring intervention under safeguarding. Safeguarding concerns may arise from the actions of family members, visitors, contractors, agency workers, domiciliary care providers or carers employed directly by residents. Abbeyfield staff must report concerns regardless of the employment status of the individual involved. The principles of good practice will be observed at all times and residents will be central to all we do. Residents have a right to: • Have their privacy respected and be treated with dignity • Be valued and recognised as unique individuals • Have control over their lives and matters which affect them • Be as independent as possible • Make informed choices about the care and support they receive. Each resident's care plan (in care services) and Needs Assessment (in housing) will include a comprehensive assessment of their needs, including any known risks. Actions to prevent or reduce known risks will be clearly recorded and acted upon.

4.2.4	Where residents independently arrange care services, responsibility for providing care remains with the care provider and the resident. However, Abbeyfield staff remain responsible for recognising and reporting safeguarding concerns that come to their attention. We will make information available to residents and their families, and to staff, volunteers and contractors, about internal and external safeguarding policies and procedures. We will also ensure residents have information about, and access to, local advocacy services. We will also support and assist residents, their relatives and representatives if they choose to refer a case to a relevant professional body or regulator. Abbeyfield recognises the increasing risks associated with digital technology and online activity. Staff should support residents to use technology safely, remain vigilant to signs of technology-enabled abuse, fraud, coercion or exploitation, and report any concerns in line with safeguarding procedures Where concerns arise regarding the conduct, suitability or actions of privately arranged care providers, Abbeyfield will report safeguarding concerns through appropriate safeguarding channels. Residents and visitors will have access to Abbeyfield's Complaints Procedure. Abbeyfield will ensure robust recruitment procedures are in place and that staff and volunteers are properly vetted, to include DBS checks, to ensure they are suitable to work with older people. Information on this is detailed in the DBS policy and procedure. All staff will receive safeguarding training that is commensurate with their role and this will be a mandatory requirement. The performance of each member of staff will be properly monitored and reviewed through the formal processes of appraisal and supervision. Each Manager will foster an open and inclusive management style that encourages people to voice any concerns and will ensure people know that their concerns, however minor, will be taken seriously and acted upon. Visiting celebrities Abbeyfield services may, on occasion, receive visits from local dignitaries, celebrities or others who do not have regular contact with the residents or the staff. Whilst such visits can be hugely beneficial for residents and for Abbeyfield, the need to safeguard residents remains paramount.
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4.2.5	Where such a visit is planned: • The advance information provided to the visitor should include Abbeyfield's commitment to safeguarding residents; • Staff who will be present during the visit should be briefed on good safeguarding practice for the visit; and • The visitor should be accompanied and not allowed unsupervised access to residents (unless this is agreed in advance with the resident, for example an MP meeting a constituent). Training As part of their induction, all staff will receive safeguarding training that is relevant and at a suitable level for their role. Training will be updated at appropriate intervals to ensure staff are up to date, able to recognise different types of abuse and know how to report concerns. Induction training for staff in regulated care settings will follow the standards laid down in the Care Certificate. Managers will receive appropriate safeguarding training to ensure they are competent and confident to respond quickly and appropriately in the event of an incident of abuse. Training should include the local multi-agency safeguarding arrangements and procedures and their role and responsibilities within it. 4.3 CARE SERVICES 4.3.1 The Fundamental Standards One of the fundamental standards below which the provision of regulated activities and the care people receive must never fall is Regulation 13: Safeguarding Service Users from Abuse and Improper Treatment, which governs safeguarding arrangements to protect people from abuse and also covers discrimination or unlawful restraint, including inappropriate deprivation of liberty under the terms of the Mental Capacity Act 2005. Safeguarding oversight is part of governance and quality monitoring. At the time of review, the Deprivation of Liberty Safeguards (DoLS) remain the lawful framework for authorising deprivation of liberty in care homes and hospitals. Liberty Protection Safeguards (LPS), introduced through the Mental Capacity (Amendment) Act 2019, have not yet been implemented nationally. Abbeyfield will monitor Department of Health and Social Care and Ministry of Justice developments and update policies, procedures and training accordingly. 4.3.2 Duty of Candour The duty of candour, which is part of the fundamental standards, requires providers to be open and transparent with people who use their services about their care and treatment, including when it goes wrong.
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4.4	ROLES AND RESPONSIBILITIES All staff are individually responsible for preventing, identifying and responding to abuse. In order to respond appropriately where abuse or neglect may be taking place, anyone in contact with the adult, whether in a volunteer or paid role, must understand their own role and responsibility and have access to practical and legal guidance, advice and support. This will include understanding local multi-agency policies and procedures and attending training commensurate with their role. Employees must understand that this policy is also incorporated into their contract of employment.
4.4.1	Front Line Staff Operational front-line staff are responsible for preventing, identifying and responding to allegations of abuse and substandard practice. Staff at operational level need to share a common view of what types of behaviour may be abuse or neglect and what to do as an initial response to a suspicion or allegation that someone is being, or is at risk of being, abused or neglected.
4.4.2	Service Managers The Manager of each service is responsible for ensuring that this policy is fully implemented and for ensuring all staff receive appropriate support, advice, guidance and training which is updated regularly. The Manager should raise any queries about the application or interpretation of this policy with their line manager. Unless directly involved in the incident, the Service Manager should ensure that residents, their relatives and representatives are kept informed of any actions arising from the safeguarding incident. If the Service Manager is directly involved then the responsibility for keeping the resident, their relatives or representatives informed will rest with the Regional Operations Manager.
4.4.3	Regional Operations Managers Regional Operations Managers are responsible for monitoring the quality-of-service provision and the implementation of safeguarding policies and procedures. Regional Operations Managers should have an oversight of all safeguarding incidents including any referrals to external regulatory or professional bodies. Where a case is being investigated by a Local Authority Safeguarding panel, responsibility for informing residents, their relatives and representatives will formally rest with the Safeguarding Panel. However, if needed, the Manager involved will offer support to residents, their relatives and representatives.
4.4.4	Designated Safeguarding Lead

	The Designated Safeguarding Lead is the Head of Customer Quality (currently Helen Gilbert). The role of the Designated Safeguarding Lead is to: • Act as a champion of Abbeyfield's safeguarding vision • Raise the profile of safeguarding across the organisation • Serve as a visible point-of-contact for anyone who may have safeguarding concerns • Report safeguarding issues and strategic risks to the Executive and to the Board, via the Customer Committee. • Promote strategic ownership of safeguarding by ensuring it remains at the forefront of Executive and Board decisions • Support effective safeguarding governance arrangements • Serve as the named Lead for external partners and agencies, where required. The Designated Safeguarding Lead can be contacted via email: safeguarding@abbeyfield.com, mobile: 07867049009, or via the safeguarding page on the Abbeyfield intranet (Connect).
4.4.5	Customer Quality Team The Customer Quality Team support the Designated Safeguarding Lead and by collating data on safeguarding concerns and risks across the organisation, leading on developing safeguarding procedures for central reporting, providing expert support to services, where the Regional Operations Manager is unable to do so, and overseeing internal investigations as required. Abbeyfield will review relevant Safeguarding Adult Reviews (SARs) and disseminate learning across services where recommendations may improve practice.
4.4.6	Executive Leadership Team The Executive Leadership Team is responsible for ensuring that Abbeyfield safeguarding policies and procedures are effective in minimising abuse and safeguarding residents from harm. The Executive Leadership Team will ensure that safeguarding policies and procedures are regularly reviewed and updated and that changes are effectively communicated throughout the organisation. The Executive Leadership Team will ensure there are suitable systems in place to monitor the effectiveness of safeguarding arrangements and that where things go wrong, lessons are learned to ensure any mistakes are not repeated.
4.4.7	The Customer Committee The Customer Committee is a sub-committee of the Abbeyfield Board which is chaired by an Abbeyfield Society Trustee, and has a membership comprised of Trustees. It is attended by members of the Executive Leadership Team,

4.5	including the Corporate Services Director and the Customer Operations Director (Abbeyfield's Safeguarding Lead). A primary purpose of the Customer Committee is to steer, review and improve local and national practice relating to safeguarding matters for our residents, staff and other stakeholders within the corporate safeguarding policy framework. DISCLOSURE AND BARRING SERVICE (DBS) The Disclosure and Barring Service (DBS) helps employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups, including children. The DBS is responsible for: • processing requests for criminal records checks • deciding whether it is appropriate for a person to be placed on or removed from a barred list • placing or removing people from the DBS children's barred list and adults' barred list for England, Wales and Northern Ireland. Abbeyfield will require all prospective employees and volunteers to apply for a Disclosure and Barring Service (DBS) check and the level of check will be determined by the eligibility of their job role. Information on this is contained within Abbeyfield's DBS Policy. Through referrals to the DBS, workers who have harmed a resident, or placed a resident at risk of harm, would be banned from working in a care position. Abbeyfield will refer any staff member who has (or would have) been dismissed as a result of a safeguarding incident to the DBS. If an agency has supplied the worker, then the legal duty sits with that agency. In circumstances where these actions are not undertaken then the local authority can make such a referral.
4.6	WHISTLEBLOWING (PUBLIC INTEREST DISCLOSURE) Staff are strongly encouraged to take action and report concerns if they suspect a resident is being abused, regardless of who the perpetrator is. Abbeyfield respects those who stand up for anyone who they suspect or know is being abused and staff are assured that they will not be victimised or treated unfairly as a result of reporting malpractice. If a member of staff feels unable to report concerns to the Manager for whatever reason, they should disclose their concerns to the Manager's line manager. The law (Public Interest Disclosure Act 1998) protects anyone making certain

4.7	disclosures in the public interest. Staff should refer to Abbeyfield's Whistleblowing Policy for further information. THE PREVENT STRATEGY Prevent is about safeguarding people and communities from the threat of terrorism. Prevent is 1 of the 4 elements of Contest, the Government's counter-terrorism strategy. The main aim of Prevent is to stop people becoming terrorists or supporting terrorism. At the heart of Prevent is safeguarding children and adults and providing early intervention to protect and divert people away from being drawn into terrorist activity. Certain specified authorities have a legal duty, known as the Prevent Duty, to have "due regard to the need to prevent people from being drawn into terrorism". Whilst this legal duty does not extend to Abbeyfield, we are committed to our role in safeguarding staff, residents, visiting students and children and other stakeholders from becoming radicalised and being drawn into terrorism. If anyone has concerns about their own safety or the safety and wellbeing of others in relation to Prevent, they can contact Abbeyfield's Safeguarding Lead (see section 4.4.4) who will explore their concerns and where necessary report them to professional organisations for appropriate action and support. Anyone who sees or hears something that could be terrorist related can raise concerns directly by: • calling the police hotline on 0800 789 321 • calling the local police force by dialling 101 • summoning urgent police assistance by dialling 999 • reporting suspicious activity online: https://act.campaign.gov.uk/
5 Finance, Value for Money & Social Value	N/A
6 Linked policies	Anti-Slavery and Human Trafficking (LG004P) Complaints, Concerns and Compliments (LG006P) Confidentiality (R005P) DBS (S006P) Deprivation of Liberty Safeguards (DoLS) (C009P) Equality, Diversity and Inclusion (LG016P) Mental Capacity Act (C029P) Restraint and Restrictive Practices (C004P) Safeguarding Children (LG043P) People Development (S011P)

	Whistleblowing (LG038P)
7 Relevant Legislation / Regulation	The Care Act 2014 Care and Support Statutory Guidance issued under the Care Act 2014 Safeguarding Vulnerable Groups Act 2006 Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 13 Health and Care Act 2022 Human Rights Act 1998 Mental Capacity Act 2005 Public Interest Disclosure Act 1998 Data Protection Act 2018 Domestic Abuse Act 2021
8 Guidance	• Care and Support Statutory Guidance (issued under the Care Act 2014), particularly Chapter 14: Adult Safeguarding. • NICE Guideline NG189: Safeguarding Adults in Care Homes (2021). Provides guidance on recognising, responding to and preventing abuse and neglect in care settings. • Care Quality Commission (CQC) Guidance on Regulation 13: Safeguarding Service Users from Abuse and Improper Treatment. • Local Safeguarding Adults Board (SAB) Multi-Agency Policies and Procedures applicable to the location of the service. • SCIE Adult Safeguarding Resources, including guidance on information sharing, Making Safeguarding Personal and safeguarding practice. • Information Commissioner's Office (ICO) Data Sharing Code of Practice and associated guidance on lawful information sharing in safeguarding situations. • National Competency Framework for Safeguarding Adults – guidance on staff safeguarding competencies and training requirements. • NHS England Safeguarding Guidance and Resources, including information-sharing and professional safeguarding standards. • Government Prevent Duty Guidance and associated safeguarding resources relating to radicalisation and extremism. (Relevant to Section 4.7 Prevent Strategy.)
9 Review	Annually, subject to any regulatory or legislative updates.

Policy

10 Procedure(s)	
10.1	Procedure for responding to suspected or actual abuse
11 Process Map(s)	
11.1	N/A

Version	Purpose/change	Resident Panel Involvement	Author	Date
1.0	Revised 2018. Approved by Board		D Furlong	Jan 2018
2.0	- Policy has been revised to reflect the creation of the Quality Committee and Regions - Section added on Prevent Strategy - Policy section reviewed to reflect creation of Modern Slavery and Safeguarding Children Policies Information on DBS aligned with DBS policy		D Furlong	Dec 2019
3.0	Policy reviewed and updated as follows: - Procedures placed on SOP. - Guidance section removed - Addition of information on MCA and staff training Role and responsibilities of Safeguarding Lead, Director of Legal & Compliance and Quality Team added		J. Conway / L. Garrett	Jan 2021
4.0	Updated details of Safeguarding Lead, updated job titles following restructure		L. Garrett	April 2022
5.0	Reviewed. Minor title changes in policy for Safeguarding Lead and ALS (from TAS), and addition of the Head of Operational Care Compliance. Update to Procedure for responding to suspected or actual abuse to clarify that, following a safeguarding concern or incident, the care plan / My Life Plan of the resident(s) involved must be reviewed to identify any changes required, and to include Involvement of Police form. Clarification of responsibilities depending on whether the local authority or Abbeyfield is leading the investigation, an update to the record-keeping		J. Conway / L. Garrett / J. Freear	July 2023

Policy

	section to ensure confidentiality is maintained where a staff member is accused, as well as further details as to when cases should be closed has also been added to the procedure.			
6.0	Reference to 'My Life Plan' for Housing replaced with 'Needs Assessment'. 'Head of Operational Care Compliance' title removed. Removed Director of Legal & Compliance references following restructure		H. Gilbert	January 2025
7.0	2026 Review - The Safeguarding Adults Policy remains legally compliant. No urgent statutory changes are required. Minor updates added to reflect updated Care Act statutory guidance, explicitly reference the Domestic Abuse Act 2021, and acknowledge forthcoming Liberty Protection Safeguards reforms.	Yes	H. Gilbert	April 2026
7.1	Safeguarding lead – contact details changed. Guidance references added. DoLS/LPS section refreshed to reflect current national implementation status. Resident feedback included.	Yes	H. Gilbert	July 2026