SAFEGUARDING
ADULTS AT RISK:
Policy and Procedures

Designated Adult Safeguarding Officer:
Joshua Lenthall, Senior Strategic Relationship Manager – 07741 733781

Review Date: 20th March 2021
## CONTENTS

### 1.0 INTRODUCTION
1.1 Active Oxfordshire  
1.2 Scope  
1.3 Terminology/Definitions

### 2.0 POLICY STATEMENT
2.1 Policy principles  
2.2 Responsibilities – operational and strategic

### 3.0 PROCEDURES
3.1 Adults with impairments at risk of abuse  
3.2 Types of abuse and how it can be recognized  
3.3 Who may be an abuser?  
3.4 Recognising abuse - indicators  
3.5 Promoting good practice  
3.6 Practices to be avoided  
3.7 Reporting and referrals procedure

### 4.0 ASSESSING CAPACITY

### 5.0 CONFIDENTIALITY

### 6.0 INFORMATION SHARING

### 7.0 APPENDICES
7.1 Appendix A – Active Oxfordshire reporting forms.  
7.2 Appendix B – contacts and useful organisations.
1.0 INTRODUCTION

1.1 Active Oxfordshire

Active Oxfordshire is a charity responsible for the strategic co-ordination and development of sport and physical activity across the Oxfordshire County. Working closely with a range of agencies, including Local Authorities (LAs), CPSU / NSPCC, local health agencies, voluntary and community sector organisations, schools, National Governing Bodies (NGBs) of sport and sports clubs, we aim to provide strategic direction for sport and physical activity across Oxfordshire, whilst also ensuring the provision of high quality participation and coaching opportunities that enable people of all ages and abilities to participate and develop in sport and physical activity.

1.2 Scope

Active Oxfordshire is committed to providing safe, enjoyable activities and opportunities for adults at risk. To this end, the adults at risk safeguarding policy has been compiled with reference to principles of good practice. The policy and procedures outlined in this document are designed to cover all aspects of Active Oxfordshire’s work with adults at risk, and relate to all staff, coaches and volunteers, and our partners, employed or deployed by Active Oxfordshire for the programmes over which it has supervision and control and in the wider partnership the organisation contributes to.

1.3 Terminology/Definitions

Abuse & Neglect

‘Abuse and neglect’ are forms of maltreatment of an individual. These terms refer to a violation of an individual’s human and civil rights by any other person(s) and include serious physical and sexual assaults as well as cases where the standard of care does not adequately support the individual’s health or development. Abuse to adults at risk may consist of a single act or repeated acts and may be an act of neglect, or omission, or it may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which they have not consented or cannot consent. Adults at risk may be abused or neglected through the infliction of harm, or through the failure to act to prevent harm. Abuse can occur in any relationship or in an institution or community setting and may result in significant harm to or exploitation of the individual.

Abuse can occur within all social groups regardless of religion, culture, social class or financial position. Adults at risk may be abused by those known to them or, more rarely, by a stranger. They may be abused by adults, children, peers, paid or voluntary workers, health or social care workers. Often people do not realise they are abusing and sometimes the stress of caring can cause a carer to act out of character.
**Capacity**

Capacity refers to an individual’s ability to make a decision or take a particular action for themselves at a particular time, even if they are able to make other decisions. For example, they may be able to make small decisions about everyday matters such as what to wear for a sports activity, or what a healthy sports diet would be, but they lack capacity to make more complex decisions about financial matters.

**Carers and Guardians**

The term ‘carers and guardians’ refers to people with a duty of care towards the adult at risk.

**Poor Practice**

Poor practice includes any behaviour that contravenes the recognized codes of conduct (for example those of National Governing Bodies or charities) which are based around:

- The rights of the participant, carers and guardians, leaders, volunteers and coaches, officials.

- Responsibility for the welfare of the participants, and in sport, the profession of coaching or instruction and the individual’s own development.

- Respect for other participants, officials and their decisions, coaches and the rules.

**Safeguarding**

The process of protecting children and adults at risk from abuse or neglect, preventing impairment of their health and development, and ensuring they are growing up in circumstances consistent with the provision of safe and effective care that enables them to have optimum life chances.

**Adult at risk of abuse or neglect.**

A person aged 18 or over who is or may be in need of community care services because of mental illness, disability, age or illness and is or may be unable to take care of him or herself or take steps to protect themselves from significant harm or exploitation. This could include people with learning disabilities, sensory impairments, mental health needs, older people and people with a physical disability or impairment.

The level of vulnerability may increase or decrease depending on circumstances at the time.

The term ‘vulnerable adult’ was set out in the government’s ‘no secrets’ guidance in 2000. The Care Act revised the term to ‘adults at risk’ of abuse or neglect. Active Oxfordshire will use the most up to date term in this document, namely adults at risk. However we also accept that there are adults that are vulnerable but do not meet the requirements of the Care Act.

Vulnerable adults may include those who may be vulnerable as a consequence of their role as a carer in relation to any of the above.

Victims of domestic abuse, anti-social abuse behaviour, hate crime, forced marriage and sexual or commercial exploitation (this is not an exhaustive list), may also be considered vulnerable.
2.0 POLICY STATEMENT

All children and adults are entitled to protection from harm and have the right to take part in sport and physical activity in a safe, positive and enjoyable environment. Active Oxfordshire and its partners have a duty of care to safeguard all children and adults involved in their sport and physical activity programmes from harm. All children, adults at risk and others who may be particularly vulnerable must be taken into account.

Active Oxfordshire recognises that it is not appropriate to operate combined policies regarding the safeguarding of children and of adults at risk, due to the differences in legal and statutory requirements. Therefore, the information in this document only applies to the safeguarding of adults at risk.

For information regarding Active Oxfordshire’s policies and procedures regarding its work with children, please refer to the Active Oxfordshire child protection and safeguarding policy and procedures, or contact the Active Oxfordshire designated safeguarding officer.

This policy aims to ensure that safeguards are put in place to keep adults at risk safe and to prevent harm from occurring when participating in sport and physical activity. Safeguarding adults at risk is an important responsibility for Active Oxfordshire and its partners and if done effectively will create wider participation in sport and physical activity and will ensure safe access to active lifestyles for everyone.

The policy and procedures will take effect from March 2019 and will be formally reviewed in March 2021, or in light of significant organisational change or legislation, or in the event of a serious incident. This work will be led by the Active Oxfordshire designated adult safeguarding officer.

Active Oxfordshire is committed to working in partnership with organisations delivering sport and physical activity within the county, to promote and deliver best practice when working with children, young people and adults at risk.

2.1 Principles

• The welfare and safety of adults at risk is of primary concern.
• Everyone has the right to be treated as an individual.
• All adults at risk have a right to be safe and to be treated with dignity and respect, with a right to privacy.
• All adults at risk, whatever their age, culture, disability, gender, language, racial origin, religious belief and/or sexual identity have the right to protection from abuse.
• Active Oxfordshire will seek to actively promote good practice when working with adults at risk in order to minimize the risk of abuse.
• All incidents of suspected poor practice and allegations of abuse will be taken seriously and responded to swiftly and appropriately.
• Confidentiality should be upheld in line with the Data Protection Act (1998), and the Freedom of Information Act (2004), although not at the risk of safeguarding adults at risk.
• This policy will be promoted to all staff and volunteers, partners and customers, and will be available on the Active Oxfordshire website and in additional formats as required.
• All Active Oxfordshire staff, volunteers and partnering organisations have a role to play in ensuring that the responsibilities and commitments to safeguarding set out in this policy are upheld and at the forefront of everything they do.

Active Oxfordshire is committed to improving outcomes for adults at risk by adhering to current legislation that supports the safeguarding of adults, which includes:

• Protection of Freedoms Act 2012.
• The Mental Capacity Act 2005.
• The Equality Act 2010.
• Oxfordshire Safeguarding Adults Board (OSAB) multi-agency policy.
• Information Sharing Guidance for Practitioners and Managers (HM Government 2008).

Who this document applies to:

This document applies to everyone involved in the planning, delivery and support of any and all Active Oxfordshire events, sessions and partnership work which involve adults at risk, including volunteers.

2.2 Responsibilities

Active Oxfordshire defines two areas of responsibility in relation to the policy, which are as follows:

• Operational – Active Oxfordshire is directly responsible for the safety of adults at risk in our care.

• Strategic – this involves work with partners particularly on the Sport England funded projects/programmes where Active Oxfordshire cannot take overall responsibility but has a commitment to safeguarding and plays a pivotal role in advising and supporting its partners.

Operational Responsibilities

Active Oxfordshire will:

• Take a constructive approach to safeguarding adults at risk and accept the moral and legal responsibility to provide a duty of care to protect and safeguard the wellbeing of adults at risk engaged in any activity over which it has supervision and control.

• Emphasise that everyone in sport/physical activity has a shared responsibility to ensure the safety of adults at risk.
• Respect and promote the rights, wishes and feelings of adults at risk.

• Promote an organisational culture of openness that ensures that all adults at risk, employees, service users and carers are listened to and respected as individuals and feel they can raise their concerns and know that they will be listened to, without worrying that something bad will happen as a result.

• Undertake recruitment procedures that take account of the need to protect adults at risk and include arrangements for appropriate checks on new staff and volunteers, in accordance with Active Oxfordshire’s recruitment practice.

• Train and supervise its employees and volunteers to adopt best practice to safeguard and protect adults at risk from abuse, and reduce the likelihood of allegations of abuse against themselves

• Ensure that required staff training in the safeguarding of vulnerable adults is kept up to date. All new staff will receive adults at risk training within 3 months of induction into the organisation. Additionally a rolling programme of training for all staff will be put in place with adults at risk training and refresher training taking place every 24 months.

• Require all staff and volunteers to adopt and abide by this policy.

• Require all staff and volunteers to be DBS checked if applicable in accordance with their work remit (i.e. as per DBS guidance.)

• Seek to ensure that physical activity is inclusive and provides a positive experience for all.

• Ensure that carers and guardians, adults at risk, staff and volunteers are provided with information about this policy, what it does, and what they can expect from Active Oxfordshire.

• Ensure that carers and guardians, adults at risk, staff and volunteers are provided with clear procedures to voice their concerns or lodge complaints if they feel unsure or unhappy about anything.

• Maintain confidentiality and ensure information is shared as appropriate with other agencies in all cases involving safeguarding, in line with current legislation.

• Respond to any allegations and concerns appropriately.

• Continually seek ways to improve the safety and wellbeing of all adults at risk who are engaged in sport and physical activity.

• Commit to and lead on the continuous development, monitoring and review of this policy and the procedures outlined within it.
Strategic Responsibilities

To our partners:

- Active Oxfordshire is committed to increasing awareness around the importance of safeguarding adults at risk in sport and physical activity and will promote this policy to its partners to support the development of best practice throughout the County. Partners of Active Oxfordshire can be defined as:

- Organisations that make partnership funding contributions.
- Organisations that are awarded funding from Active Oxfordshire.
- Organisations with whom Active Oxfordshire has a service level agreement or other partnership agreement.
- Organisations that Active Oxfordshire commissions to provide a service.
- Local authorities, sports clubs, governing bodies of sport, leisure/activity providers, schools, school games partnerships, community sports networks, media agencies, event management companies, training providers, youth service and sports facilities.

As part of its commitment to safeguarding adults at risk Active Oxfordshire will:

- Advise partner organisations to develop adequate policies and procedures in respect of the safeguarding of adults at risk.
- Expect partners to respond to any allegations appropriately and implement their own procedures.
- Ensure that the inclusion of adequate safeguarding arrangements is a key element of all commissioning, funding and partnership agreements.
- Active Oxfordshire will seek to lead by example, freely share our learning in the area of safeguarding with our partners, and encourage a culture in which all participants can engage safely in sport and physical activity.
3.0 PROCEDURES

All staff and volunteers should have an understanding of abuse and neglect and know how and when to take action. Active Oxfordshire will put in place training to ensure that all personnel are able to effectively deal with any suspicions of poor practice, abuse or neglect.

3.1 Adults with impairments at risk of abuse

It is important to recognize that not all disabled adults are adults at risk. However Active Oxfordshire does recognise that adults with impairments can be at higher risk. Reasons for the increased risk can include:

- Increased likelihood of social isolation.
- Fewer outside contacts.
- Dependency on others for practical assistance in daily living, including intimate care.
- Impaired capacity to resist, avoid or understand abuse.
- Speech and language communication needs may make it difficult to tell others what is happening.
- Limited access to someone to disclose information to.
- Specific vulnerability to bullying.

3.2 Types of abuse and how it can be recognised

The following categories of abuse are not mutually exclusive and adults at risk may be subjected to more than one type of abuse at the same time, whatever the setting. It is important to recognise that some adults at risk may reveal abuse themselves by talking about or drawing attention to physical signs or displaying certain actions or gestures. This may be their only means of communication and it is therefore important for carers to be alert to these signs and to consider what they might mean.

**Physical**

- Hitting, slapping and scratching.
  Pushing or rough handling.
- Assault and battery.
- Restraining without justifiable reasons.
- Inappropriate and unauthorised use of medication.
- Using medication as a chemical form of restraint.
- Inappropriate sanctions including deprivation of food, clothing, warmth and health care needs.
In a sport situation examples of abuse could include:

- Any unwanted physical contact.
- A coach disregarding the individual requirements of each vulnerable person’s needs when setting a training programme e.g. allowing those who are limited by a physical impairment to undertake long, continuous ergo training.

**Sexual**

- Sexual activity which an adult cannot or has not consented to or has been pressured into.
- Sexual activity which takes place when the adult client is unaware of the consequences or risks involved.
- Rape or attempted rape.
- Sexual assault and harassment.
- Non-contact abuse e.g. voyeurism, pornography.

In a sport situation indicators could include:

- Either direct or indirect involvement in sexual activity or a relationship whereby consent has not occurred, there is a lack of capacity to give consent or that someone has been coerced into a relationship due to another person’s position of trust.
- A coach engaging in unnecessary and inappropriate physical contact.
- A coach making suggestive comments to their participants.
- An individual spending an unnecessary amount of time in the changing area where vulnerable individuals are present.

**Psychological/Mental/Emotional**

- Emotional abuse.
- Verbal abuse.
- Humiliation and ridicule.
- Threats of punishment, abandonment, intimidation or exclusion from services.
- Isolation or withdrawal from services or supportive networks.
- Deliberate denial of religious or cultural needs.
- Failure to provide access to appropriate social skills and educational development training.

Emotional abuse can include: threats, humiliation, intimidation, blame, control, coercion, bullying and cyber- bullying. Where a person’s emotional health and development is harmed and results in distress, denial of self- expression, privacy or dignity, isolation or over dependence, this could be an indication that emotional abuse is taking place. Emotional and psychological harm rarely occur in isolation and can often co-exist together.

In a sport situation indicators could include:

- A carer or coach subjecting an adult at risk to constant criticism, shouting, name-calling, sarcasm, bullying, discriminatory behaviour or prejudicial attitudes.
• A carer or coach putting an adult at risk under unrealistic pressure in order to perform to high expectations.

Financial

• Misuse or theft of money.
• Fraud and/or extortion of material assets.
• Misuse or misappropriation of property, possessions or benefits.
• Exploitation, pressure in connection with wills, property or inheritance.

In a sport situation indicators could include:

• Blackmailing adults at risk by requiring financial or material payment in return for certain benefits such as sports awards or complements.
• Charging vulnerable individuals more than the standard fee for participation in sports activities.

Neglect and acts of omission

• Ignoring medical or physical care needs.
• Failure to access care or equipment for functional independence.
• Failure to give prescribed medication.
• Failure to provide access to appropriate health, social care or educational services.
• Neglect of accommodation, heating, lighting etc.
• Failure to give privacy and dignity.

In a sport situation indicators could include:

• A coach not keeping a vulnerable individual safe by exposing them to undue cold, heat or the unnecessary risk of injury.
• A parent, guardian or carer consistently leaving a vulnerable individual without adequate provisions e.g. food, water, clothing, sun block where they are unable to provide themselves with these provisions.
• Coaches not taking a players’ injuries seriously and asking them to continue playing.
• Situations where medication is given to ease the pain from injury so play can continue when rest would actually be more appropriate.

Discriminatory

• Discrimination demonstrated on any grounds including sex, race, colour, language, culture, religion, politics or sexual orientation.
• Discrimination that is based on a person’s disability or age.
• Harassment and slurs which are degrading.
• Hate crime.
In a sport situation indicators could include:

- A referee refusing to umpire female events.
- Females not being given ‘prime court or facility time.’
- Using sexist or discriminatory language towards others for example male players using language such as ‘you hit like a girl’, or other saying ‘that was gay.’

Institutional

Neglect and poor standards of care for example in hospitals, day centres and care homes.

Domestic

Adults at risk may be the victims of domestic abuse themselves or be affected by it occurring in their household. Domestic abuse is likely to have a serious effect on an adult’s physical and mental wellbeing.

Use of Social Media in an abusive way

Abuse can also occur through social media and this is often harder to detect. It is important to remember that the type of abuse that can occur through social media does not always include emotional and psychological abuse and can include sexual and financial abuse. Social media includes (but is not limited to): networking sites such as Facebook, Twitter and LinkedIn, email, text messages, Skype and instant messaging services. Some examples of abuse that can occur through social media include:

- Unwanted sexual text messages (sexual abuse).
- Unwanted communication or stalking/harassment (emotional abuse).
- Inappropriate messaging; with kisses attached (emotional and sexual abuse).
- Requests for money (financial abuse).
- Intimidation (emotional abuse).
- Sexual coercion (sexual abuse).
- Cyber-bullying (emotional abuse).
3.3 Who may be an abuser?

- A family member, parent, child, spouse or other relative.
- Friend or neighbour.
- Paid or volunteer carer.
- Visitor to a facility or event.
- Professional member of staff, health worker, social carer or other worker.
- Another adult at risk.
3.4 Recognising abuse – indicators

Factors described below are frequently found in cases of abuse and/or neglect. Their presence is not proof abuse has occurred, but must be regarded as indicators of possible significant harm. Such indications justify the need for careful assessment and discussion with the designated safeguarding officer, and may require consultation with and/or referral to local adult services. It is not the responsibility of those working in sport to decide that abuse to an adult at risk is occurring but it is their responsibility to act on any concerns.

Indications that adults at risk may be experiencing abuse include the following:

- The adult at risk appears frightened of the parent/s/peers/adults.
- The adult at risk may display unexplained or suspicious injuries such as bruising, cuts or burns, particularly if situated on a part of the body not normally prone to such injuries. The adult at risk may have an injury for which the explanation seems inconsistent.
- The adult at risk may demonstrate inexplicable changes in behaviour.
- The adult at risk may demonstrate inappropriate sexual awareness.
- The adult at risk may engage in sexually explicit behaviour.
- The adult at risk may display an unusual distrust of adults, particularly those with whom a close relationship would normally be expected.
- The adult at risk may experience difficulty in making friends.
- The adult at risk may be prevented from socialising with other adults/young people.
- The adult at risk may display variations in eating patterns including overeating or loss of appetite.
- The adult at risk may experience inexplicable weight loss. The adult at risk may appear increasingly dirty or unkempt.
3.5 Promoting good practice

When working with adults at risk these good practice guidelines are recommended to minimise the risk of abuse:

- Sport should be fun, enjoyable and promote fair play.
- Always work in an open environment, e.g. avoid private, unobserved situations and agreeing to keep any secrets.
- Treat all participants equally, with respect and dignity.
- Put the welfare of all participants first before winning or achieving performance goals.
- Offer enthusiastic and constructive feedback rather than negative criticism.
- Ensure if any form of manual or physical support is required for participants it is provided openly, the person is informed of what is being done and their consent is obtained.
- Involve carers if necessary, especially where intimate care is needed.
- Proactively engage with carers if necessary, ensuring they are fully aware of the safeguarding process.
- Ensure the people who deliver any activity are supported, confident, aware and capable. Find out as much information on participants prior to your activity, this allows for you to plan appropriately in advance taking into account any additional requirements, minimising opportunities for poor practice and abuse.
- Build balanced relationships based on mutual trust that empower participants to share in the decision-making process.
- Maintain a professional relationship with participants, e.g. it is not appropriate to have an intimate relationship with a participant.
- Recognise the developmental needs and capacity of participants and avoid excessive training or competition and either pushing them against their will or putting undue pressure on them.
- Be aware of any pre-existing medical conditions, medicines being taken by participants or existing injuries and treatment required.
- Keep a written record of any injury that occurs, along with the details of any treatment given.
- Where possible, ensure access to medical advice and/or assistance is available. Use methods of communication appropriate to the individual.

3.6 Practices to be avoided

The following should be avoided except in emergencies. If cases arise where these situations are unavoidable it should be with the full knowledge and consent of someone in charge in the club or participants carers.

- Avoid spending time alone with participants away from others.
- Avoid taking or dropping off lone participants to activities.
- Avoid personal social media interaction with participants.
3.7 Reporting and referrals procedure

As soon as any form of alleged abuse becomes apparent immediate action should be as follows:

- Make sure no one is in immediate danger.
- Call the police and/or ambulance if the situation is an emergency.
- Remain calm - do not overreact or be judgmental.
- If abuse is recent, do not do anything that could disturb any possible forensic evidence.
- Inform the designated safeguarding adult officer.
- Record details of what has happened on the Active Oxfordshire ‘alleged abuse of an adult at risk’ reporting form. This form can be found within Appendix A of this document.

Following the alert, the designated officer, in consultation with others if necessary, will collate all information and assess whether any individual is in immediate danger or any urgent action is necessary and log the alert with the adult social care helpdesk.

If the designated safeguarding officer is not available, follow the reporting flowchart procedures outlined in this document.

If the incident is recent and/or serious and the alleged victim has injuries or is severely distressed, the priority for all must be:

- To ensure the alleged victim is as safe and comfortable as possible.
- To ensure the alleged victim gets any emergency medical treatment they need promptly.
- To contact the police if any crime is suspected.
- To ensure that any evidence of abuse is left undisturbed. For example, there may be forensic evidence that would be pertinent to a police investigation, therefore care needs to be taken if tidying up an area after an assault or if suggesting victims take a bath or shower following a sexual assault. The police will advise on this.

Allegations that appear to involve criminal behaviour:

Generally speaking, all forms of abuse and neglect (including anti-social behaviour, hate crime, harassment, forced marriage, domestic violence and slavery) may also constitute a criminal offence.

Both the police and adult social care services should be informed in these circumstances. If the police are contacted initially, the incident and/or crime reference number should be passed on to adult social care services. If adult social care services are contacted initially, a discussion should take place as to who is best placed to contact the police.

Staff need to recognise that the alleged victim may not wish a particular incident or disclosure to be further investigated or reported to the police. Where the alleged victim states that they do not want the situation disclosed further or reported to the police, the situation should be discussed with line management and, where appropriate, multi-agency colleagues at the earliest opportunity. It may be appropriate to have these discussions as part of a strategy discussion or meeting following the alert.
4.0 ASSESSING CAPACITY

A person’s capacity must be assessed at the point at which a decision is needed, taking into account relevant and immediate circumstances as well as possible long-term issues.

Adults are assumed to be competent to give consent in making decisions, unless otherwise demonstrated by their capacity being affected by things such as; medication, substances and some untreated mental health issues, disability or medical condition. For adults, this means that they have the capacity to choose how they live and make decisions about their safety, even if we do not agree with certain decisions. If you are unsure or concerned that the person may not have the mental capacity to make an informed choice about their safety or evaluate their own personal risk of abuse, you can report this to the Active Oxfordshire designated adult safeguarding officer, Josh Lenthall 07741 733 781 or speak with the Oxfordshire Safeguarding Adults Board www.osab.co.uk

5.0 CONFIDENTIALITY

Protection of adults at risk raises issues of confidentiality that must be clearly understood by all. The following guidelines should be adopted when concerns around adult protection arise to ensure that the referral procedure complies with the Data Protection Act (1998) and the Freedom of Information Act (2004).

- 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 care services.
- All personal information regarding an adult at risk will be kept confidential. All written records will be kept in a locked drawer for a specific time as identified in the data protection guidelines. Records will only record details required in the initial contact form.
- If an adult confides in a member of staff and requests that the information is kept secret, it is important that the member of staff tells the adult sensitively that he or she has a responsibility to refer cases of alleged abuse to the appropriate agencies.
- Within that context, the adult must, however, be assured that the matter will be disclosed only to people who need to know about it.
- Where possible, consent must be obtained from the adult before sharing personal information with third parties. In some circumstances obtaining consent may be neither possible nor desirable as the safety and welfare of the adults at risk is the priority.
- Where a disclosure has been made, staff must let the adult know the position regarding their role and what action they will have to take as a result.
- Staff must assure the adult that they will keep them informed of any action to be taken and why. The adult’s involvement in the process of sharing information must be fully considered and their wishes and feelings taken into account.
6.0 INFORMATION SHARING

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

1. Is the adult placing himself or herself at further risk of harm?
2. Is someone else likely to get hurt?
3. 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.
4. Is there suspicion that a crime has occurred?

If the answer to any of the questions above is ‘yes’ - then you can share the information without consent and need to share the information with your designated safeguarding adults officer, NGB safeguarding team, police or adult social care.

When sharing information there are 7 golden rules that should always be followed.

1. Seek advice if in any doubt. Without disclosing the identity of the person where possible, consult with your designated adults safeguarding officer, NGB safeguarding team or the deputy adults safeguarding officer at Active Oxfordshire.
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 it 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. Ensure all information shared is accurate, up-to-date, necessary and share it with only those who need to have it.
7. Remind yourself of the purpose of the Data Protection Act (DPA). The DPA exists to ensure personal information is shared appropriately, except in circumstances where by doing so it may place the person or others in significant harm.
7.0 APPENDICES

7.1 APPENDIX A – ‘Active Oxfordshire reporting of alleged abuse of an adult at risk’ form.

1. Staff, coach or volunteer has observed concerns about an adult at risk
2. Staff receive phone call about an Adult at Risk Safeguarding issue
3. Staff, coach or volunteer have face-to-face report of concerns about an adult at risk.

Remember: It is not your responsibility to decide whether abuse is taking place or not, but to report where you have concerns or if an allegation has been made, in order to protect an adult at risk.

Complete incident report form and report concerns (via telephone or face to face) to:

Oxfordshire Safeguarding Adults Board: 01865 815843

In Emergency (you feel there is immediate risk to an individual) please contact: The Police

112 or 999 (emergency)
101 (non-emergency)

Ensure you write ONLY what is said. Do not ask leading questions, or make assumptions.

In instances where enquiries arise from members of the public (including carers and guardians) and ANY branch of the media, all staff direct this call to the designated adults safeguarding officer or CEO, if available, or respond with a ‘no comment’ response.

SUGGESTED QUESTIONS TO ASK WHEN RECEIVING A REPORTED ALLEGATION.

Remember:

Stay calm and don’t rush. Do not allow your personal opinion to show, or influence your actions.
Be sensitive.
Reassure the person.
Confirm you realise how difficult it must have been to confide in you, and that they have done the right thing.

Confidentiality: Let them know that you won’t be able to keep everything they tell you confidential. In order to stop it happening, you will have to ask certain professionals to help you. Listen to what they have to say and take it seriously.
Keep questions to a minimum and keep questions open-ended, in order to let them speak. Remain in view of others (if face-to-face).

Record exactly what is said (either at the time or immediately after) – do not ask leading questions or make assumptions. Stick to the facts... but do encourage them to share as much information as possible.
Questions:

1. What is your name?
   “Hello ______________. My name is ______________.”
   “I realise how difficult it must have been to confide in me; you have done the right thing. I won’t be able to keep everything you tell me confidential. In order to stop it happening, I will have to ask certain professionals to help me. Do you understand that?”

2. Is this something you have witnessed, have concerns about, or have been a part of?
   Add detail here:
   o Where, when? Date, time and location of incident?
   o What happened / what did you see? Description.

3. Details of the adult at risk in question.

4. Any visible injuries? Description of the adult at risk’s behaviour / emotional state.

5. Do you know who did this? Are they aware?

6. Who else is aware? Are social services, or the police aware?

7. Can I take your details?
ADULT AT RISK - INCIDENT REPORT FORM

**INCIDENT REPORT**

<table>
<thead>
<tr>
<th>Date of incident</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Time of incident</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Location of incident</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

**SECTION A – ADULT’S DETAILS**

<table>
<thead>
<tr>
<th>Name of adult</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date of birth</th>
<th>Ethnicity</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Disability Y/N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes, please detail:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Full address</th>
<th>Telephone</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of carer if applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address (if different from above)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

**SECTION B – NATURE OF INCIDENT**

<table>
<thead>
<tr>
<th>Is this report based on: (please tick as appropriate)</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ An incident you have witnessed?</td>
</tr>
<tr>
<td>□ A concern you have based on potential indicators of abuse?</td>
</tr>
<tr>
<td>□ An allegation or concern that has been reported to you by someone?</td>
</tr>
</tbody>
</table>

If the allegation has been reported to you by someone else, other than the adult at risk, please give their details:

<table>
<thead>
<tr>
<th>Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Post code:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>
**INCIDENT REPORT FORM (Continued)**

**SECTION C – DETAILS OF THE INCIDENT/CONCERN/ALLEGATION**

**DETAILS** - Please give full details of the incident(s) / concern(s) / allegation(s) observed including exactly where (venue/exact location) and when (date/time) the incident is alleged to have taken place and what is alleged or believed to have happened:

<table>
<thead>
<tr>
<th>Details of the Incident/Concern/Allegation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

**OBSERVATIONS** - Please include a description / location of any visible injuries and a description of the adult’s behaviour, and their physical and emotional state:

<table>
<thead>
<tr>
<th>Observations</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

**ADULT AT RISK’S ACCOUNT OF INCIDENT** - Complete this section if the adult at risk reported the incident to you, recording exactly what the adult has said has happened (including how any bruises or other injuries have been caused) and anything you have said to the adult at risk.

<table>
<thead>
<tr>
<th>Adult at Risk’s Account of Incident</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

**OTHER DETAILS** -

<table>
<thead>
<tr>
<th>Other Details</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>
ALLEGED ABUSER - Do we have the name and any contact details of the alleged abuser?

<table>
<thead>
<tr>
<th>INCIDENT REPORT FORM (Continued)</th>
</tr>
</thead>
<tbody>
<tr>
<td>SECTION D – REPORTING OF INCIDENT</td>
</tr>
<tr>
<td>Are carers aware of the concerns or allegations?</td>
</tr>
<tr>
<td>If yes, how did they become aware?</td>
</tr>
<tr>
<td>Is the alleged abuser aware of the concerns/allegations?</td>
</tr>
<tr>
<td>If yes, how did they become aware?</td>
</tr>
<tr>
<td>Have social services been informed?</td>
</tr>
<tr>
<td>If so, who did you speak to:</td>
</tr>
<tr>
<td>At what time did you speak to them:</td>
</tr>
<tr>
<td>Case reference number:</td>
</tr>
<tr>
<td>Have the police been informed?</td>
</tr>
<tr>
<td>If so, who did you speak to:</td>
</tr>
<tr>
<td>At what time did you speak to them:</td>
</tr>
<tr>
<td>Case reference number:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SECTION E – YOUR DETAILS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your name:</td>
</tr>
<tr>
<td>Your address:</td>
</tr>
<tr>
<td>Contact telephone number – daytime:</td>
</tr>
<tr>
<td>Contact telephone number – evening:</td>
</tr>
</tbody>
</table>
### SECTION F – ADULT AT RISK’S CONSENT

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the adult aware of the reporting of this concern?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do they consent to this concern being reported onwards – i.e. to LA or lead officer</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please complete here any further information in respect of the adult’s wishes:

This form must now be passed immediately to the Active Oxfordshire designated adult safeguarding officer or deputy adult safeguarding officers:

Designated adult safeguarding Officer,
Joshua Lenthall,
Active Oxfordshire,
2nd Floor, Marlborough House
69 High Street,
Kidlington
Oxfordshire, OX5 2DN.
joshlenthall@activeoxfordshire.org
7.2 APPENDIX B – Useful Contacts

Primary Contacts:
Active Oxfordshire adult safeguarding officer: Josh Lenthall
07741 733 781
Active Oxfordshire general enquiries: 07741 733 775 (9am – 4pm)

Oxfordshire County Council emergency out of hours service 0800 833408

Police emergency 999
Police non-emergency 101

Other Useful Contacts.

Oxfordshire adult safeguarding board. This is the multi-agency lead organisation for the safeguarding of adults at risk in Oxfordshire.

Website: https://www.osab.co.uk/

Action on elder abuse
National organisation who aim to prevent the abuse of older people by raising awareness, encouraging education, promoting research and collecting and disseminating information. 02088 359280 – London Office 0808 8088141 (UK helpline)

Ann Craft Trust (ACT)
ACT is a national organisation working with staff in the statutory, independent and voluntary sectors in the interests of people with learning disabilities, who may be at risk from abuse. 01159 515400

Respond
Respond provides a range of services to victims and perpetrators of sexual abuse who have learning disabilities, and training and support to those working with them. 0808 8080700 (Helpline) 02073 830700 – London Office

Oxfordshire Fire and Rescue Service Community Safety Team

NHS 111

Victim Support 0300 1234 148

Oxfordshire Rape & Sexual Abuse Centre
01865 798 666

Oxfordshire Domestic Abuse Support Service 0800 731 0055
Healthwatch Oxfordshire 01865 520 520

Age UK (formerly Age Concern and Help the Aged) 0345 450 1276

Alzheimer's Society 01235 531 989

Citizens Advice Bureau 03444 111444