



Karis Neighbour Scheme

Safeguarding Adults Policy

This policy was last reviewed and approved by
the Board of Trustees April 2026

1. The context of Safeguarding Adults

We have an ethos within Karis Neighbour Scheme that everyone we work with is cared for, supported and valued with a hope that their wellbeing is enhanced. The aim in doing this is to provide an environment that assists in safeguarding against potential abusive situations and minimise risks before they escalate. This policy exists to show how our work fits with the current law and recommendations, as well as the steps we need in case a concern arises.

2. The Definition of Safeguarding Adults

The Care Act 2024 statutory guidance defines adult safeguarding as:

*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, including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action.*

The Care Act 2014 signalled a change in adult safeguarding towards a person-centred approach, where the focus is on achieving the outcomes that the adult wants. Karis Neighbour Scheme recognises the importance of keeping the adult at the centre and will work closely to communicate and keep them engaged at all stages in order to achieve their self-determined outcomes. As a guideline, we follow the principle of "Nothing about me without me", keeping any adult constantly informed and empowered about any decisions to do with their care or protection. We also recognise the importance of carers in relation to safeguarding - their closeness to adults at risk of abuse means that they can more easily be caught up in causing harm to, or in being harmed by, the adults in their care.

The Department of Health Guidance (2014) sets out 6 principles of safeguarding:

1. **Empowerment** - presumption of person led decisions and informed consent
2. **Prevention** - it is better to take action before harm occurs
3. **Proportionality** - proportionate and least intrusive response appropriate to the risk presented
4. **Protection** - support and representation for those in greatest need
5. **Partnerships** - local solutions through services working with their communities
6. **Accountability** - accountability and transparency in delivering safeguarding.

The Care Act 2014 says that safeguarding adults is about protecting anyone over 18 who is experiencing, or at risk of, abuse or neglect and who is unable to protect themselves as a result of their care and support needs. People with care and support needs are not inherently vulnerable, but they may come to be at risk of abuse or neglect at any point due to a physical or learning disability, mental-health needs, old age or illness, or substance misuse.

3. Definitions of abuse

Abuse is a violation of an individual's human and civil rights by another person or persons. It is any action that harms the physical, verbal, sexual, emotional/psychological, financial or material wellbeing of a vulnerable person.

It can happen anywhere and by anyone, most commonly by someone the victim knows and trusts. It may be systematic and repeated or may consist of a single incident. Harm may be caused by direct acts, or by failure to provide adequate care. Abuse can be direct or through internet/social media.

There are several types of abuse, including (but not limited to) the following:

- Discriminatory Abuse – harassment, insults or similar treatment because of someone's race or culture, sexuality, gender identity, age, disability or religion, in person or via social media
- Domestic Abuse – any type of abuse which takes place within a home setting or by a family member. This can include 'honour-based' violence.
- Financial or material abuse - theft, fraud, forgery and embezzlement. This may include misusing or dishonestly taking property, possessions or benefits, including scams using various modes of communication including WhatsApp, e-mail or calls.
- Modern slavery - This covers slavery (including domestic slavery), human trafficking and forced labour.
- Neglect and failure to act – ignoring medical, emotional or physical care needs, failing to provide access to appropriate support or services and withholding basic necessities such as food, clothing, medication, hygiene and mental stimulation. People can be neglected at home or in care homes and hospitals.
- Organisational abuse – neglect and poor care in an institution such as a hospital, care home or care agency. Poor organisation, lack of resources, or when an individual's needs or dignity is sacrificed to conform with the routines of the institution
- Physical Abuse – injury or mistreatment directly or with an object/weapon. Includes hitting, slapping, pushing, unreasonable restraining or locking someone in a room.
- Psychological/emotional abuse - can take the form of threatening, bullying, isolating, shouting, blackmailing and blaming, cyber-bullying and blackmailing are particular risks relating to use of social media or other messaging platforms. Deliberately ignoring a vulnerable adult and depriving them of basic needs and pleasures is also psychological abuse.
- Self-neglect - This covers a wide range of behaviour which shows that someone isn't caring for their own personal hygiene, health or surroundings. It includes behaviour such as hoarding.
- Sexual abuse - forcing a person to take part in any sexual activity without their consent. Sexual assault, rape, sexual harassment, use of sexual language or inappropriate sharing of images online, including cyber-flashing, fall into this category.
- Spiritual abuse and radicalisation – coercion and control in a spiritual context. This may include exploitation, misuse of scripture, manipulation and pressure to conform. This can lead to radicalisation where a person comes to support terrorism and extremist ideologies associated with terrorist groups.

4. Recognising Signs of Abuse

It is common for an adult at risk of abuse to be experiencing more than one type of abuse at the same time. Any act of abuse may also constitute a criminal act and this list is just a guide of some signs that may cause concern.

- Cuts, burns, bruises and scratches.
- Injuries that do not match the explanation given for them and/or frequent injuries.
- Under or over use of medication.
- May appear depressed, withdrawn, frightened, agitated, anxious or aggressive.

- An unexpected or unexplained change in behaviour.
- Lack of money for basic necessities, such as food, heating or clothes, despite an adequate income.
- Disappearance of possessions, bank statements or other documents.
- Lack of social stimulation.
- Deterioration in appearance or personal hygiene.
- Unhygienic and unsafe environment.
- Rashes, sores and ulcers and unexplained weight loss.

Secretive behaviour or change in use of internet and social media sites.

5. Reporting and Accountability Pathways

Responding to, reporting and recording concerns about the safety of an adult at risk of abuse is **everybody's responsibility**. All staff and volunteers have a responsibility to act where they suspect abuse may be taking place or when an allegation of abuse has been made.

Doing nothing is not an option. Too many times abuse has occurred because people assume that another organisation or professional is more involved or more qualified to deal with the situation.

The flow chart below shows the pathway for dealing with concerns. In the case where staff or volunteers are unable to follow the procedure below for some reason, or have followed the procedure below but are not sufficiently happy that their concerns have been dealt with*, it is incumbent upon them to report directly to the police or via the Birmingham Safeguarding Adults Board as shown in the diagram below. They may also go directly to the Designated Safeguarding Lead.

(*Where a member of staff or volunteer (the worker) feels that their concerns have not been dealt with correctly/appropriately they should also notify the Chair of the KNS Board of Trustees, and follow the complaints procedure.)



KNS Safeguarding Contacts

Trustees Safeguarding Lead

- Gillian Harley-Mason (GP at KMC) 0121 455 0542

Chair of Board of Trustees

- Gillian Harley-Mason 0121 455 0542

Designated Safeguarding Lead, Prevent Lead MCA/Dol Lead

- Harry Naylor (CEO) 07931 734523

6. What to do if you suspect that an adult is at risk of significant harm

1. Where emergency medical attention is necessary then this should, of course, be sought by immediately telephoning for an ambulance. Only administer first aid if trained. The worker should inform their Line Manager or KNS of the incident as soon as it is safe to do so using the [Incident Reporting Form](#).
2. The worker suspecting abuse should make notes as soon as possible (preferably within one hour of any relevant conversation or incident), writing down exactly what the client

said and when, as well as what was happening immediately beforehand (e.g. description of activity). It is important that the dates and times of conversations and observations are detailed in the record (including when the record was made). Keep all hand written notes even if subsequently typed up.

If possible, the following details should be written down:

- a) Adult's name
- b) Address
- c) Date of birth
- d) Information about the circumstances or injuries which cause concern
- e) Where (the incident happened)
- f) What (what happened)
- g) Why (factors influencing the incident)
- h) When (date and time of incident)
- i) Wishes (what the client asked you to do with the information and what their preferences are for the outcome of the situation)
- j) Any explanation or comment the adult or their carer may have made.

Remember that when collecting and recording data we comply with the GDPR 2016 for confidentiality. However, when there is a safeguarding concern there is a duty to share information and this should be explained to the client when possible.

3. The Designated Safeguarding Lead (DSL) should be informed of your concern immediately, either directly or via your Line Manager. The relevant staff member will complete an Incident Report Form, which will be kept in a safe and confidential place, once seen by the DSL. If there is no further concern and a decision is made not to pursue the issue then reasons for this will be identified, recorded and communicated to the worker involved. The record will be dated, signed and kept in a secure and confidential place.
4. Upon receipt of the concerns of adult abuse, the staff member responsible for the client and the DSL will discuss the situation and possible action plans. If appropriate, staff involved should talk to the client to gauge the severity of the situation and their wishes. A plan of action will be discussed with them and permissions gained – this may include a change of KNS support, a referral to the Adults & Communities Access Point or contact to the police.
5. Should the client not wish action to be taken by KNS, and should no emergency action need to be taken, we will continue to support the client and offer a befriending service or Listening & Guidance service. If staff suspect a client does not wish action to be taken due to coercion, fear or change in capacity, the staff member should report this to the DSL, who will take additional steps as assessed with the Trustees safeguarding lead. KNS will seek further appropriate advice without compromising the client's wishes, if possible. The member of staff responsible for the client will continue to sensitively ask about the abusive situation and offer the client opportunities to rescind their decision.
6. Should the client give permission for action to be taken on their behalf, the DSL, after consultation with other involved organisations where appropriate, will contact the Adults & Communities Access Point on 0121 303 1234 (or out of hours the Emergency Duty Team on 0121 464 9001). It is important to keep a record of the name of the person spoken to and the date and time.

All of this is to happen on the same working day or as soon as appropriately possible. The DSL (in conjunction with any witnesses) will follow up his/her telephone referral with an online form.

https://www.birmingham.gov.uk/info/20018/adult_social_care_and_health/111/report_possible_abuse_or_neglect_of_an_adult_with_care_and_support_needs

7. Once the referral has been made, we will continue to keep records and will co-operate with Adults & Communities Access Point (and/or the Police) as far as possible with any further actions required of us.
8. The DSL will keep the Board of Trustees informed at all stages, maintaining confidentiality.

9. If the suspicions or allegations in anyway involve the DSL then the report should be made to the Chair of the KNS Board of Trustees.
10. Suspicions and/or allegations should remain confidential and must not be discussed outside KNS.
11. If the worker suspects Domestic Abuse the above procedures should be followed. Remember that children living with Domestic Abuse are also at risk of significant harm and therefore **Child Safeguarding Procedures** should also be followed. The worker can also seek advice from and signpost to agencies such as Women's Aid.
12. If the client is in imminent danger and/or a crime has been recently committed it is the responsibility of the worker to phone the police on 999. The worker should take care to minimise any disruption to the scene in order to prevent contamination of evidence. The worker should inform their Line Manager or KNS of the incident as soon as possible.

7. How to deal with allegations against staff or volunteers

If you have a concern about another volunteer or staff member behaving inappropriately, or contrary to the principles outlined in this policy, then these concerns should be raised immediately with your Line Manager, the DSL or a member of the Board of Trustees. Follow the procedures above for dealing with your concern. You are not required to raise the issue with the volunteer or staff member in question.

Your concerns will be taken seriously and acted upon immediately and in accordance with our staff disciplinary procedures. Your concerns will be dealt with confidentially and with respect for any desire you may have to remain anonymous.

It is important that all workers (both paid and voluntary) have guidelines for self-protection to avoid instances of false allegations against them. Although it is rare that someone is falsely accused, it can happen. The following steps help to minimise this possibility:

General Guidelines:

- Do not get involved with personal care or lifting.
- Ensure that you are properly trained to use any necessary equipment, e.g. wheelchairs.
- In the event of any injury, accidental or otherwise, ensure that it is recorded and witnessed on an Incident Report form.
- Make sure you are fully briefed on the vulnerability of the client and inform your supervisor or Line Manager if you think there has been a significant change in the clients' circumstances/vulnerability or in the way in which they relate to you.
- All clients are advised to only allow staff/volunteers into their homes if it is pre-arranged, this principle should be reinforced and adhered to by KNS workers.
- Staff and volunteers must be clear on the distinction between 'befriending' and being friends - volunteers must not get involved in activities that are beyond the scope of KNS – if in doubt ask and don't do anything you don't feel comfortable with.
- Do keep written records of any allegations a client makes against you. Inform your Line Manager if a client appears to have a dislike towards you, makes a verbal complaint against you or is unhappy with your work. If an allegation/complaint is witnessed by another worker this worker should also record what happened.
- Staff and volunteers should only handle money in exceptional circumstances where it has been previously agreed with your Line Manager.
- Any gifts or cash donations should be logged and any concern relating to these should be reported to your Line Manager. Staff and volunteers should not accept any donations if they judge the client does not have the capacity to choose to give at that time.

8. Training

All staff and volunteers receive training on safeguarding during their induction, through briefings (which communicate updates and/or changes to policy, procedure, good practice and

contact numbers) and at regular training days. Concerns, issues and reminders about good practice in terms of safeguarding will be approached in all staff supervision sessions.

All new recruits will be required to:

1. Disclose and detail any criminal record they have
2. Complete DBS checks in line with their role and responsibilities
3. Provide two references which will be followed up before a position can be taken up

In instances where KNS has a concern resulting from the above we will refer to our 'Safer Recruitment Policy and Procedure'.

The DSL and Senior staff members responsible for delivering services to adults at risk of abuse will have training equivalent to NHS Level 3.

The DSL will undertake MCA/DoLs and WRAP training and disseminate this training to staff according to NHS requirements.

All staff working with adults who may be at risk of abuse will refresh their training at least every 3 years.

9. Related Policies available from KNS

This policy should be read in conjunction with the following policies available from admin@karisneighbourscheme.org or the KNS office:

Complaints Procedure
Disciplinary and Grievance Procedure
Safeguarding Children Policy
Volunteer Policy
Privacy and Data Protection
Data Retention Policy
Health and Safety
Safer Recruitment Policy

10. Useful Contacts

Karis Neighbour Scheme:	0121 455 7524
Adults & Communities Access Point:	0121 303 1234
Out of Hours Team:	0121 464 9001
Emergency Duty Team:	0121 675 4806
Hourglass Elder Abuse Response Helpline:	0808 808 8141
Position of Trust enquiry:	0121 303 1157
Birmingham Safeguarding Adults Board:	https://www.bsab.org/

Safeguarding Adults Policy, Appendix

Additional information about types, signs and impact of abuse

Recognising signs of abuse

It is common for a vulnerable adult to be experiencing more than one type of abuse at the same time. Any act of abuse may also constitute a criminal act. It is important to understand that the following signs of abuse are indicators that abuse *may* be occurring. Behaviour and injuries of the sort listed below may be present for other reasons.

A. Physical Abuse

Physical abuse is the injury or mistreatment of a vulnerable adult. It may be deliberate or accidental and includes over-medication or withholding of drugs. It may be inflicted directly, for example with a fist or a foot or with a weapon such as a hairbrush or cigarette.

Signs of Physical Abuse:

- Cuts, burns, bruises and scratches
- Injuries that do not match the explanation given for them
- Injuries and wounds in concealed places
- Injuries in protected areas e.g. underarms
- Untreated injuries
- Under or over use of medication
- Frequent injuries
- Wearing of excessive/inappropriate clothing (heavier use of makeup)
- Signs of malnutrition or dangerous weight gain
- Failure to seek medical treatment or frequent changes of GP
- Cancellation of medical and other appointments – especially if frequent and/or with “unlikely” reasons

B. Psychological/ Emotional Abuse

This is the most commonly reported form of abuse. Psychological abuse is sometimes called emotional abuse and can take the form of threatening, bullying, isolating, shouting, blackmailing and blaming. Deliberately ignoring a vulnerable adult and depriving them of basic needs and pleasures is also psychological abuse. Psychological abuse can be difficult to recognise, as there are no physical scars for anyone to see.

Radicalisation and Spiritual Abuse are forms of Psychological Abuse

- **Prevent** is ‘part of the Government’s counter-terrorism strategy CONTEST and aims to stop people becoming terrorists or supporting terrorism.... Prevent focuses on all forms of terrorism and operates in a pre-criminal space, providing support and re-direction to vulnerable individuals at risk of being groomed in to terrorist activity before any crimes are committed. Radicalisation is comparable to other forms of exploitation; it is therefore a safeguarding issue that staff working in the health sector must be aware of.’
- All staff working with children or vulnerable adults will receive appropriate training on Prevent via our ‘WRAP’ Lead, the CEO. Radicalisation is a form of spiritual abuse.

- Guidance on current PREVENT duties -
<https://www.gov.uk/government/publications/prevent-duty-guidance/prevent-duty-guidance-for-england-and-wales-accessible>
- Further information on referring to PREVENT is here -
https://www.birmingham.gov.uk/the_prevent_duty
- **Spiritual Abuse** is 'coercion and control of one individual by another in a spiritual context. The target experiences spiritual abuse as a deeply emotional personal attack. This abuse may include:- manipulation and exploitation, enforced accountability, censorship of decision making, requirements for secrecy and silence, pressure to conform, misuse of scripture or the pulpit to control behaviour, requirement of obedience to the abuser, the suggestion that the abuser has a 'divine' position, isolation from others, especially those external to the abusive context.' (Manchester Metropolitan University 2013 definition)
<http://secure.ccpas.co.uk/documents/caringapril2013.pdf>

Spiritual abuse often occurs in the context of abusive leadership but the perpetrator can be any member of a religious community, not just those holding leadership positions. Karis Neighbour Scheme employs staff with pastoral responsibilities to deliver its Listening and Guidance service. We recognise therefore our responsibility to provide the highest quality spiritual care and we take seriously our responsibility to guard against spiritual abuse, and to offer therapeutic services to those who have been harmed by spiritual abuse in the past. Our Listening and Guidance Service offers person-centred spiritual care that is chosen and valued by the patient. (For further information see KNS Spirituality Statement and Spiritual Abuse Statement).

Signs of Psychological Abuse:

- The victim may feel or appear depressed, withdrawn, frightened, agitated, anxious or aggressive
- The person feels or seems isolated
- There is an unexpected or unexplained change in behaviour
- Loss of confidence/too eager to please
- Having no independent opinions or views
- Reluctance to be alone with a particular person
- Fearful of being away from a particular person
- Not wanting to go home
- Fear of being away from home too long

D. Financial Abuse

Financial abuse is the second most commonly reported form of abuse. It can often be identified as theft, fraud, forgery and embezzlement. Financial abuse does not have to be large sums of money. A small amount of money taken regularly from the vulnerable adult can add up to a large amount in the end. Abusers often justify the abuse by thinking that they deserve the money because they have earned it, that it is their rightful inheritance or by thinking that the vulnerable adult does not need it.

Signs of Financial Abuse:

- Lack of money for basic necessities, such as food, heating or clothes, despite an adequate income
- Unexplained withdrawals, or changes in the pattern of withdrawals, from a person's bank account
- Reluctance on the part of family, friends or the person controlling funds to provide adequate food, clothes or furniture
- Disappearance of possessions, bank statements or other documents
- Disparity between the person's living conditions and their financial resources e.g. insufficient food in the house
- Unnecessary property repairs or purchases
- Failure to provide receipts for shopping or other financial transactions carried out on behalf of the person
- Sudden changes in wills or deeds to a house or property
- Cancellation of standing orders or direct debits to meet utility or other regular bills
- Setting up standing orders or direct debits for other debts
- Unexplained loans being made or taken out
- Lasting Power of Attorney completed – should check the client understands what they have done

E. Sexual Abuse

Sexual abuse is forcing a person to take part in any sexual activity without their consent. Sexual assault, rape, sexual harassment and use of sexual language fall into this category. The subject of sexual abuse can stir strong emotions in people. Sexual activity is often something people find difficult or traumatic to talk about and this is coupled with society's general reluctance to consider that older people or disabled people may be sexually active.

Signs of Sexual Abuse:

- Pain, itching or injury in the anal, genital or abdominal area
- Torn, stained or bloody underclothing
- Bite marks and bruises on breasts, neck or face
- Venereal disease or recurrent bouts of cystitis
- Unexplained problems with catheters
- Difficulty in sitting and walking due to discomfort in genital area
- Pregnancy in a woman who is unable to consent to sexual intercourse
- Uncharacteristic use of explicit sexual language or significant changes in sexual behaviour or attitude

F. Neglect

Neglect is failing to provide basic necessities such as food, clothing, hygiene and mental stimulation. People can be neglected at home or in care homes and hospitals.

Signs of Neglect:

- Deterioration in appearance or personal hygiene
- Unhygienic and unsafe environment
- Rashes, sores and ulcers and unexplained weight loss
- Inadequate food, drink or medical care
- Lack of social stimulation
- Isolation – denying access to callers or visitors
- Accumulation of untaken medication

- If the property is in a state of disrepair or generally disorderly it may be an indicator

G. Abuse by discrimination

Vulnerable adults, like anyone else, can also experience abuse by discrimination which focuses on their ethnic or cultural background, religion, political persuasion, gender, sexual orientation, disability or age.

- A culture that does not promote inclusion
- Individuals made to eat food, wear clothing or engage in activities which are at odds with their cultural beliefs
- Religious observance is not facilitated or permitted
- Evidence that a person is being treated less favourably because they possess a protected characteristic

H. Institutional Abuse

Abuse can happen in institutions such as residential or nursing homes, day centres, etc. when individuals' needs or dignity is sacrificed to conform with the routines of the institution. Staff and volunteers need to be aware that all above types of abuse can also happen in institutional settings.

Additional signs of organisational abuse –

- Lack of flexibility and choice
- Unnecessary or inappropriate rules and regulations
- Regimentation of care with little regard for individual needs
- Public discussion of private matters
- Lack of privacy
- Inappropriate staff behaviour