

# **Adult Protection Policy**

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Charter Outcomes	Number(s)
The Customer/landlord relationship	Equalities     Communication

Written By	Linlay Anderson	
Department	Housing Management	

Approval Date by Committee	

#### Notes:

Policy drawn up with reference to -

Scottish Government 'National Guidance for Child Protection in Scotland' (2010)

The Adult Support and Protection (Scotland) Act 2007

The Human Rights Act 1998

The Data Protection (Scotland) Act 2018

The Mental Health (Care and Treatment) (Scotland) Act 2015

The Protection of Vulnerable Groups (Scotland) Act 2007

The Sexual Offences (Scotland) Act 2009

The Equality Act 2010

# Angus Housing Association Adult Protection Policy

# 1.0 Purpose of Policy

- 1.1 The purpose of this policy is to set out what actions are required of staff working in Angus Housing Association when dealing with adult protection and to ensure effective links are made into the appropriate Local Authority Social Work Department to confirm safeguarding measures are maintained.
- 1.2 Protecting children and vulnerable adults means recognising when to be concerned about their safety and understanding when and how to share these concerns.
- 1.3 This document should be read in conjunction with Adult Protection Procedures.

#### 2.0 Introduction

- 2.1 The protection of adults at risk of harm is not an option but a responsibility across agencies. The expectation for all "at risk" adults in our communities is that they are empowered, through support from all the public services including social work services, police, health, housing and care organisations to be free from any preventable harm or exploitation. They are enabled to make their own choices about their lives and to live as independently as their personal circumstances permit.
- 2.2 The Association provides a level of supports and protection for anyone who receives our services. We are committed to the protection of adults at risk of harm, and the safeguarding and promoting of the interests and well-being of such adults is of paramount concern. However, in some circumstances, other statutory and voluntary agencies may be better placed to provide the support and protection required.
- 2.3 The Association strives to ensure to the best of its ability that service users will not encounter harm of any form while in its care, and that, if abuse is detected, the situation will be reported immediately to allow investigation by the appropriate statutory agencies.
- 2.4 The Housing Association undertakes to ensure it will protect adults it works with from exploitative relationships. In such circumstances where it is found that an adult is at risk then we undertake to liaise with the appropriate Local Authority Social Work Department ensure that the adult continues to receive

service as agreed as appropriate.

- 2.5 The Association will ensure that staff will be alert to the possibility that they may become aware of adults requiring support and protection who are not service users e.g. relatives, friends, visitors etc. In all cases staff will report their concerns using the Association reporting procedures, as detailed in the separate procedure.
- 2.6 The Association recognises that the protection of adults at risk of harm is placed above all other operating principles and supersedes the principle of confidentiality in relation to disclosures to the relevant authorities.

# 3.0 Legislation

- 3.1 In Scotland, there are three Acts of the Scottish Parliament which relate specifically to adult protection. These are:
- Adults with Incapacity (Scotland) Act, 2000. This Act imposes duties on, and assigns functions to, local authorities in relation to the making of enquiries in respect of adults who lack capacity, and the creation, application and supervision of proxy decision making powers in respect of such adults. Under the terms of Section 10 of the Adults with Incapacity (Scotland) Act 2000, the local authority must investigate 'any circumstances made known to them in which the personal welfare of an adult seems to be at risk'

This means that the local authority must investigate allegations of abuse involving an adult who lacks the capacity to make or convey decisions for him or herself, whether the adult concerned agrees to the investigation or not. It is the function of the Public Guardian to investigate situations of suspected financial abuse involving adults who lack capacity under Section 6 of the same Act.

- Mental Health (Care & Treatment) Scotland Act, 2003. This Act imposes
  duties on, and assigns functions to, local authorities and health boards in
  respect of social and mental health well-being, the making of enquiries in
  respect of persons who appear to have a mental disorder, and (where
  necessary) the application of compulsory measures in relation to the
  assessment and treatment of persons having a mental disorder.
- Adult Support and Protection (Scotland) Act 2007. This Act imposes duties on, and assigns functions to, local authorities in respect of the making of enquiries, the conduct of investigations, the application for protective powers in respect of adults defined by the legislation to be at risk of actual or suspected harm. This Act also brought about the creation of Adult Protection Committees in every local authority area.
- 3.2 It is the responsibility of adult protection agencies such as Social Work Services and the Police to make enquiries (proactive and reactive) and to carry out appropriate investigations in order to establish:

- whether or not an adult is at risk from harm or suspected harm; and, if so,
- which, if any, of the protective measures available in terms of the legislation are most appropriate to an adult at risk's individual circumstances.
- 3.3 It is, however, **everyone's** responsibility to report concerns regarding any adult who is, or who appears to be, at risk of harm to Social Work Services. If you are concerned that a vulnerable adult is at risk of exposure to criminal activity such as fraud then Police must be notified as well as Social Work. However, to avoid confusion and to have clear lines of accountability, the Association staff should report concerns directly to their line manager/named person in the first instance, in line with the related procedure.
- 3.3 For the purposes of the Adult Support & Protection (Scotland) Act 2007 ("ASP Act"), an "adult" is a person aged 16 or over. However, if the adult concerned is 16 or 17 years of age, it is possible that s/he is already subject to a Supervision Order or other Order under the Children (Scotland) Act, 1995, or other social work or childcare legislation. If the Association staff know that such an Order is in place in respect of that person, they should include that information in their report to their line manager/named person. It is the responsibility of Social Work Services to carry out any investigations about anyone who may be subject to such an Order.
- 3.4 Under the Adult Support and Protection (Scotland) Act 2007 'adults at risk' are defined as adults aged 16 or over who:
  - Are unable to safeguard their own well-being, property, rights or other interests.
  - Are at risk of harm, and
  - Because they are affected by disability, mental disorder, illness or physical or mental infirmity, are more vulnerable to being harmed than adults who are not so affected.
- 3.5 The ASP Act states harm includes all harmful conduct and in particular includes:
  - Conduct which causes physical harm
  - Conduct which causes psychological harm (for example by causing fear, alarm or distress)
  - Unlawful conduct which appropriates or adversely affects property, rights or interests (for example: theft, fraud, embezzlement or extortion)
  - Conduct which causes self-harm.

#### 4.0 Factors which may indicate harmful behaviour towards an adult at risk

4.1 These can include one or a combination of the following actions. The following indicators must, however, be used only as a guide.

- 4.2 Harm can be a single or repeated act or lack of appropriate action, occurring within any relationship where there is an expectation of trust, which causes harm or distress to an adult. It can take the form of physical, sexual, emotional, psychological or domestic abuse, acts of neglect or omission, financial and material abuse and the withholding of information. The abuse can be multiple, involving some or all of the above.
- 4.3 Harm can occur in any setting: when an adult lives alone or with a relative; within nursing, residential, supported living or day care settings; in hospitals, custodial situations, support services in people's own homes and other places previously assumed safe, or in public places.
- 4.4 Staff will be aware that adults using the Association service(s) might have come to the service because they have been subject to harm, in their own home, in the community or having been abused by a relative, friend or acquaintance.
- 4.5 Alternatively, adults might be at risk of harm after they come to the Association, for example from someone who is not a tenants/customer coming into the Association from outside, another tenant/customer, a member of staff.
- 4.6 On some occasions the perpetrator of the abuse might be at risk of abuse themselves, such as a tenants/customer who regularly becomes inebriated putting other or members of staff into a state of fear. All parties involved can be considered as being potentially at risk however the person behaving abusively can also be treated as an adult at risk.
- 4.7 There is an expectation where the perpetrator of abuse is a member of staff that an internal investigation will not take precedence over reporting concerns to allow an investigation by Social Work Services and/or Police.
- 4.8 Were staff positions require close contact with tenants the Association will ensure staff are members are subject to Disclosure Scotland Checks and were applicable the more enhanced Protection of Vulnerable Groups (PVG) are undertaken.
- 5. 0 Types of Harm (See Appendix 3 for further details)
- 5.1 **Physical Abuse-** involving actual or attempted injury to an adult defined as at risk. For example:
  - Physical assault by punching, pushing, slapping, tying down, giving food or medication forcibly, or denial of medication
  - Use of medication other than as prescribed
  - Inappropriate restraint.
- 5.2 **Emotional/Psychological Abuse-** resulting in mental distress to the adult at risk. For example:
  - Excessive shouting, bullying, humiliation
  - Manipulation of, or the prevention of access to, services that would be of benefit to the adult
  - Isolation or sensory deprivation
  - Denigration of culture or religion

- 5.3 **Financial or Material Abuse-** involving the exploitation of resources and property belonging to the adult at risk. For example:
  - Theft or fraud
  - Misuse of money, property or resources without the informed consent of the adult at risk.
- 5.4 **Sexual Abuse-** involving activity of a sexual nature where the adult at risk cannot or does not give consent. For example:
  - Incest
  - Rape
  - Acts of gross indecency
  - Inappropriate touching or verbal or physical sexual harassment.
- 5.5 **Neglect and acts of omission** by others charged with the care of the adult, including ignoring medical or physical care needs. For example:
  - Failure to provide access to appropriate health, social care or educational services
  - Withholding of the necessities of life such as nutrition, appropriate heating, etc.
- 5.6 **Exploitation** the deliberate targeting of vulnerable adults for personal benefit.
- 5.7 **Discriminatory Abuse** for example, treating one service user less favourably than another.
- 5.6 **Information Abuse** deliberately giving erroneous information or withholding information.
- 5.7 **Human Rights Abuse-** for example deprivation of a right to family life or to a fair hearing.
- 5.8 **Multiple Forms of Abuse** This may occur in an ongoing relationship or service setting or to more than one person at a time. It is important therefore to look not only at a single incident, but to also consider the underlying dynamics and patterns of harm
- 5.9 **Random Violence-** An attack by a stranger on an adult defined as at risk is an assault; this is a criminal matter and should be reported to the Police. However, where there is the possibility that the violence may be part of a pattern of victimisation in a community or neighbourhood, local authority Adult Protection procedures may also apply in respect of effective multi-agency intervention.

- 5.10 Domestic Violence- Police Scotland define domestic violence as "any form of physical, non-physical or sexual abuse which takes place within the context of a close relationship committed either in the home or elsewhere". In most cases this relationship will be between partners (married, cohabitating or otherwise) or ex-partners.
- 5.13 The similarity between the above acts of harm in relation to adult protection is recognised. However, the key factor in relation to activating adult protection procedures in such situations is that the victim (or suspected victim) must be an adult at risk of harm as defined in The Act.

#### 6.0 Training

- 6.1 As an allegation of abuse can come to the notice of any member of staff at any time, all staff members will receive training in Adult Protection Procedures, either as part of an initial induction, or as part of an ongoing training programme.
- 6.2 Employees/volunteers will be made aware of the existence of the Adult Protection Policy and Procedure, and their responsibilities in relation to the Adult Protection process:
  - Through the provision of training
  - By issuing a copy of the policy to all new staff members
  - By publicising its existence at strategic points of office/service locations.
- 6.3 Staff can always access this policy and the related procedure on the public drive or request a copy from their line manager.

## 7.0 Equal Opportunity

In developing and implementing policies covering all aspects of our work, Angus Housing Association will ensure that our strong principles and commitment to equality of opportunity are evident. In line with the Housing (Scotland) Act 2001 the Association operates in a manner which encourages equal opportunities and observes the equal opportunity requirements described in Section 106 of the Act. The Association also takes account of all applicable legislation, including the Equality Act 2010 and relevant Codes of Practice issued by the Equality and Human Rights Commission -

Our Policy recognises the protected characteristics as defined by the Equalities Act

- Age
- Disability
- Gender reassignment
- Marriage and civil partnership
- Pregnancy and maternity

- Race
- Religion or belief
- Gender
- Sexual orientation

In line with this commitment to equal opportunities, this policy and any summary or information leaflet can be made available free of charge in a variety of formats including large print, translated into another language or on audio tape.

## 8.0 Confidentiality

- 8.1 There is a clear requirement across agencies to co-operate in relation to the protection of adults seen to be at risk of harm. The Association will ensure appropriate mechanisms are in place for staff to report any concerns to Social Work Services and/or the Police, as may be appropriate in the circumstances. The Association will also ensure that appropriate mechanisms are in place in relation to any ongoing involvement and assistance by us, in consultation with the relevant statutory agencies, towards effective risk management and continuing support to the service user.
- 8.2 To ensure appropriate protective measures can be put in place, it is recognised that confidential information will need to be shared with other workers, managers and other agencies on a "need to know" basis.
- 8.3 The Association staff have a duty to report concerns about an adult thought to be at risk of harm (as defined in the ASP Act). Failure to do so may result in disciplinary action.
- 8.4 Where an adult is seen to be at risk of harm, this will always override a professional or organisational requirement to keep information confidential, subject to the provisions of the Data Protection Act 1998. It is the responsibility of those employed or involved with the Association to take appropriate action to ensure the adult deemed to be at risk is protected from harm.

#### 9.0 Principles of Reporting and Information Sharing

- 9.1 The protection of adults at risk of harm is placed above all other operating principles and supersedes the principle of confidentiality. Any concerns a member of Angus Housing Association staff may have regarding the safety and well-being of an adult at risk of harm should be brought to the attention of their line manager/named person immediately.
- 9.2 Although it is recognised that a service user's privacy must be protected at all times, in situations where abuse is suspected, there must be free communication between participating agencies throughout the investigation. Under no circumstances will information on an adult be withheld from Social Work Services because the holder of the information thinks that it might compromise a third party. If a staff member is given information relating to adult abuse 'in confidence' they must make clear that any information relating to adult or child abuse must be passed on to Social Work Services and/or Police for investigation.

- 9.3 In all cases of suspected adult abuse, it must be recognised that children involved in the situation might also be at risk and that Child Protection Procedures might have to be invoked.
- 9.4 If the adult is profoundly deaf and requires the services of a sign language interpreter or communication support worker, one should be appointed to work with the adult. This should be arranged in consultation between the Association and Social Work Services as required. Other forms of assistance to communication should be utilised if the adult cannot communicate using speech.
- 9.5 If the adult does not have English as a first language and requires the services of an interpreter, an interpreter from the Interpreting Service should be appointed to work with the adult. This should be arranged in consultation between the Association and Social Work Services as required.
- 9.6 Using a member of the adult's family as an interpreter or communication support worker should be avoided.

#### 10.0 Named Person

- 10.1 The Association acknowledges that having a specific member of staff as a named person/post in respect of child protection is good practice. However, in the first instance staff should raise any concerns with their appropriate Line Manager who are responsible for reporting child concerns to the relevant Local Authority. Staff and Line Managers are responsible for advising the Named Person of any concerns raised.
  - Our named person/post will be a Director within the organisation who has sufficient knowledge/expertise to deal with any concerns raised.
- 10.2 The Association recognises that providing a named person ensures that all allegations of abuse are reported to a central point to allow a consistent response and to maintain an overview of reports from staff.
- 10.3 The named person/post will monitor issues and detect trends as these occur.

#### 10.4 Our named person/post is:

Position/Contact Details	Name
Position	Director of Housing Services
Contact Details	07794266873
Second Named Person	
Position	CEO
Contact Details	0345 177 2244

# 11. Complaints Procedure

11.1 Any tenant may submit a complaint, using the Association's Complaints Policy if they feel that the Association has failed to correctly apply this Policy.

# 12.0 Policy Review

12.1 The Association will review the Adult Protection Policy in November 2027, or as required following a substantive legislative or regulatory change.



# <u>Adult Support and Protection/Child Protection – Record of Concern</u>

This template is to be used in conjunction with the above Angus Housing Association Policies and Procedures to record any concerns/observations/disclosures. This form is a template to capture all relevant information and will be used to ensure that all Angus Housing Association staff are recording and reporting concerns appropriately as per local protocols identified in the Policies and Procedures.

If you have other recording systems to capture this information they must still be completed.

Once completed this form must be sent to your Line Manager and copied to the Director of Housing Services. This must be done within 24 hours of the incident.

Staff Name:	Date:				
Job Title:	Place of Work:				
Have you informed your line manager? Delete as red	Have you informed your line manager? Delete as required Yes No				
Details of incident: (include time, location, people preconcern – if known. Please include information re any	sent, information received, name of subject of				
Any further information relating to your concerns (e.g. you concerned? – if it isn't already evident above):	. historical events/knowledge, what was it that made				
Action taken (e.g. who was it reported to, how and wh	hen and any subsequent actions. <i>Remember to</i>				

Staff Signature:	Date:	
Date passed to Director of Housing S	Services:	

#### **The Legal Framework**



#### The Adult Support and Protection (Scotland) Act 2007

This Act introduces measures to identify and protect adults at risk from harm. It defines 'adults at risk' and 'harm'. Where it is known or suspected that an adult is being harmed, the Act places a duty on councils to make the necessary enquiries to establish whether or not further action is required to stop or prevent harm occurring. A general principle on intervention in an adult's affairs requires action which is the least restrictive to the adult whilst providing benefit to him or her. Protection orders include assessment orders, removal orders and banning orders, which require approval by a sheriff.

#### The Human Rights Act 1998

The Human Rights Act requires all organisations to act compatibly with the act. The relevant elements related to abuse are:

- The right to freedom from inhuman or degrading treatment, which could be relevant to conditions in a residential care facility
- · The right to a fair hearing
- The right to the protection of property

#### The Data Protection (Scotland) Act 2018

Service providers hold information about service users, which would normally be regarded as confidential. Angus Housing Association has a Privacy Policy in place along with safeguards about sharing information. However, concern about the abuse of vulnerable adults 8 provides sufficient grounds to share information on a 'need to know' basis and/or if it is in the public interest. Unnecessary delays in sharing information should be avoided.

The purpose of adult protection is to secure or return the vulnerable adult's autonomy. If the adult has ability to make informed choices and they are not being unduly pressurised or intimated, they may ask you to intervene. Their wishes should be respected but this does not remove your responsibility to report any concerns, and where appropriate, for an investigation to be carried out in any situations where other vulnerable adults may be at risk. To be sure that the vulnerable adult is deciding for himself/herself it may be necessary to create a safe place to consult the person about their wishes

#### Adults with Incapacity (Scotland) Act 2000

This should assist tenants who lack capacity to give informed consent. In such circumstances this Act should be applied, in terms of good practice.

This act uses the following definitions:

'Adult' means a person who has attained the age of 16 years 'Incapable' means incapable of:

- Acting
- making decisions
- · communicating decisions
- · understanding decisions

· retaining the memory of decisions

A person shall not fall within this definition by reason of lack or deficiency in a faculty of communication if that lack or deficiency can be made good by human or mechanical aid.

The Act has five basic principles:

- There should be no intervention in the affairs of an adult unless such an intervention will benefit the adult
- The principle of minimal intervention
- The vulnerable adults wishes should be taken account of at all times
- There should be consultation with relevant others, including the adult's carers, any guardian and any other relevant person
- The vulnerable adult should be encouraged to exercise whatever skill she or he has.

Where a vulnerable adult is clearly able to make choices, he/she must be advised of the options available and his/her wishes respected, unless, exceptionally, a statutory responsibility to intervene arises. If intervention is necessary to prevent further risk, actions should be pursued in a way that causes the least disruption for that individual's way of life.

#### The Mental Health (Care and Treatment) (Scotland) Act 2015

The Mental Health (Care and Treatment) (Scotland) Act 2015 covers a wide range of issues including:

- Compulsory powers setting out when people can be legally required to go into hospital, or to accept services or treatment that they may not want.
- The Mental Health Tribunal which will hear cases under the Act.
- Powers of the Mental Welfare Commission.
- It places a range of duties, and gives a range of powers, to organisations involved in mental health law, including mental health service providers, the Mental Welfare Commission, and the new Mental Health Tribunal for Scotland.
- It defines clear procedures for decision making on the compulsory treatment and/or detention of people with a mental disorder. Its sets criteria which have to be met before compulsion can be authorised.
- It amends existing criminal justice legislation to give courts more effective ways of assessing and dealing with a person with mental disorder who comes before them. And it defines procedures for the review of orders made by a court in relation to a person with a mental disorder.
- It provides a range of new rights for people with a mental disorder, such as a right of access to independent advocacy services.
- it provides safeguards on the use of certain medical treatments.

#### The Protection of Vulnerable Groups (Scotland) Act 2007

This Act introduces a new vetting and barring scheme that will replace and improve upon the current disclosure arrangements for people who work with children or 'protected adults. The adults who use our services would in most cases be 'protected adults' under this law.

The Act's definition of 'harm' includes physical and psychological harm, as well as harm to an individual's property, rights, or interests through unlawful conduct. It covers intent to harm,

incitement to harm, encouraging an individual to self-harm, and includes a general provision on conduct that "otherwise causes, or is likely to cause" harm to another person.

#### The Sexual Offences (Scotland) Act 2009

The Act defines a person as incapable where, due to mental disorder, they are unable to understand what a sexual act is, to decide whether to take part in the sexual act or communicate such a decision. Incapacity should therefore not be assumed without ensuring the person has had the opportunity to access appropriate information and education and assistance in understanding this information and its relevance to them. Capacity is however not the only test. When a person has capacity to consent to sexual relations but is at risk and likely to come to serious harm, the Local Authority may have responsibilities under the Adult Support and Protection (Scotland) Act 2007.

#### The Equality Act 2010

The Act legally protects people from discrimination in the workplace and in wider society by making it unlawful to discriminate against anyone because of the following 'protected characteristics':

- age
- gender reassignment
- · being married or in a civil partnership
- being pregnant or on maternity leave
- · disability
- race including colour, nationality, ethnic or national origin
- religion or belief
- sex
- sexual orientation



#### **Recognition and Response to Abuse**

All harm and abuse is serious, needs to be recognised, and an appropriate response made.

The Association recognises that there are many forms of abuse, including emotional, financial, misuse of medication, neglect, physical, racial, sexual, verbal etc.

The following, though not exhaustive, lists several types of abuse -

#### Neglect and Acts of Omission

- Abandonment
- Deprivation of basic needs to water, food, housing, heat, clothing, or medical care
- Failure to provide access to appropriate health, social care or educational services

#### Physical Abuse

- Hitting
- Pushing
- Causing unnecessary pain
- Intentional misuse of medication
- Causing Injury
- Unauthorised restraint

#### Sexual Abuse

- Inappropriate exposure to pornographic material
- Inappropriate sexual advances
- Inappropriate sexual contact
- Sexual Exploitation
- Rape

#### Emotional or Verbal Abuse

- Humiliation
- Name calling
- Threats of harm or abandonment
- Isolation
- Non-Communication
- Intimidation

#### Financial Abuse or Misuse of Material Responses

- Pressure to sign or hand over property or money
- Misuse of property, possessions, or welfare benefits
- Theft, fraud, or embezzlement
- Undue influence to change legal documents
- Pressure to sign or hand over property or money
- Misuse of property, possessions or welfare benefits

#### Institutional Abuse

- Not being treated as an individual
- Routines or regimes that fail to recognise service user's individuality
- Being restrained physically or through medication
- · Derogatory nicknames
- Taking away independence
- Disrespect for private space

#### Information Abuse

- Denial of information/advice
- Failure to provide adequate or accurate information
- Being misinformed Cyber Abuse

#### Cyber Abuse

- Behaving in a bullying or threatening manner using the following
- Email
- Social networking
- Mobile phone
- Interactive gaming

Any or all these types of abuse may be perpetrated as the result of deliberate intent, negligence or ignorance.

In all cases of abuse, it is important to alert your line manager or give them an opportunity to engage in discussion and decision making.

Abuse which is a criminal offence must be addressed appropriately with other agencies, including Police Scotland if necessary.

#### Signs and Symptoms

#### Aspects of Definitions of Abuse

This section is included as a basis for understanding the nature of abuse and to assist staff in appreciating the issues that will be considered by the Local Authority. They are not a definitive guide to the recognition of abuse but more a guide to how awareness should be triggered, i.e. indications, to prompt thinking about action.

The descriptions of abuse which follow clearly signify that abuse covers not only acts of commission of violence, but also acts of omission on the part of the carers. Abuse can be both active and passive. When accidents are reported, consideration should be given as to whether the person was deliberately or consciously put in the way of danger.

#### Recognition of Abuse

Many of the symptoms in the following lists might have an alternative cause, other than abuse, but they should lead any professional person to at least consider whether the person has been abused. Suspicions of adult abuse or neglect can come to light in a number of ways. The clearest indicator is a statement or comment by the adults themselves, by their regular carer or by others disclosing or suggesting abuse or neglect.

Such statements invariably warrant further action, whether they relate to a specific incident, and a pattern of events or a more general situation.

There are many other factors which may indicate abuse or neglect. Indicators which could give rise to suspicion include

#### Physical Neglect

- Weight significant loss, failure to maintain weight
- Loss of skin 'bloom' plus chronic dirt; smell; patchy baldness; poor hair texture
- Where incontinence pads are used, severe rash caused by failure to care
- Padooegr uaskitne
- Skin sores with infected areas
- Inadequate or inappropriately poor clothing
- Smell: chronic stale smell often associated with urinary incontinence
- Scavenging or stealing food
- Sudden increases in confusion e.g. dehydration produces toxic confusion

#### **Emotional Neglect**

- Silent, watchful, frozen awareness
- Head rocking or banging
- Slowness of response to stimulation
- Poor interaction
- Weight loss

#### Physical Abuse

- Any bruise, which does not have an adequate explanation, especially:
- Small circular bruise to the facial area, the distribution of which indicates firm gripping of the cheeks with an adult hand
- Bruising to the lips and gums
- Torn fraenulum (on the underside of the tongue) particularly important with people who cannot feed independently.
- Bruising to cheeks, ears and forehead caused by finger marks
- Bruising to any limb that goes all the way round
- Special attention should be taken of any bruising which is obviously of differing ages.
- Other skin marks, in particular burns or bites:
- With any burn or scald, special attention should be made to the history as to whether the explanation is plausible.

More severe injuries, especially fractures, should always be taken as an indication of abuse, unless there is clear evidence that the injury has resulted from an accident

- Neglected injuries: lacerations, abrasions
- Injuries to face and head Bruises resulting from the clenched fist or from the use of a weapon - purplish or reddish brown marks and deep bruising
- Burns and scalds, including assault with a cigarette
- Lack of hygiene and clothing
- Diseases now rarely seen due to lack of nutrition, e.g. scurvy, rickets (note that within ethnic minority families this could be the innocent result of a diet inappropriate to our climate and circumstances)
- Unusual or unexplained behaviour of carers including a delay in seeking advice, dubious or inconsistent explanations of injuries and bruising
- A prolonged interval between illness/injury and presentation for medical care

#### Sexual Abuse

- Difficulty in sitting still
- Over-displaying sexualised behaviour or verbalization
- Sleep disturbance
- Other signs (non-specific physical complaints)
- Under-eating, weight loss
- Overeating, obesity
- Excessive preoccupation with sexual matters
- Frequent genital touching
- Re-enactment of the abuse with friends
- Drinking, sometimes leading to intoxication
- Overdose
- Deliberate self-harm
- Depression
- Physical signs are rare unless aggressive rape has occurred but be alert to signs of bruising on the upper arms and thighs
- Involvement with pornography, paedophilia
- Sexually explicit art/drawings
- Sexually transmitted disease or pregnancy in someone unable to give consent
- 'New' sexual words acquired without an alternative explanation, e.g. a sex-education course
- Sudden fear or marked dislike of a particular man/woman

#### **Emotional Abuse**

- Behavioural disorders
- Temper tantrums
- Prolonged crying
- Petty theft
- Telling untruths
- Lack of co-operation
- Running away
- Disruptive, aggressive behaviour
- Poor feeding habits too much, too little
- Lethargy and depression
  - o Tiredness
  - Loss of appetite
  - Lack of vitality

#### Controlling Behaviour

This includes a range of behaviour which makes a person reliant and/or dependant on another person by isolating them from sources of support, exploiting their resources and capacity for personal gain, depriving them of the means need for independence, resistance and escape and regulating their everyday behaviour.

#### Coercive Behaviour

An act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim. This includes forced marriage and so-called 'honour violence

#### Consider abuse as a possibility if there are signs of stress such as

- Return to earlier behaviours such as bed-wetting and soiling
- Mood swings
- Withdrawal
- An onset of or an increase in difficult behaviour
- Crying

#### Financial Abuse

- A change in the ability of a service user to pay for goods/ services
- Unexplained debt
- Reduction in assets
- Sudden unexplained lack of funds/ withdrawal of money from accounts
- Unusual interest in another's finances
- Unexplained disappearance of possessions

#### Institutional Abuse

- Shared bedrooms
- Shared clothing and linen
- No respect for dignity and privacy
- · Medication given and withdrawn as punishment

#### Misuse of Medication

- Not administered as prescribed
- Over-medication resulting in apathy, drowsiness, slurring of speech, lack of sleep, continual pain etc
- Under-medication resulting in lack of sleep, continual pain etc
- Using medication to control or reward

#### Also Consider

- Over frequent or inappropriate contact/referral to outside agencies
- Demonstration of fear by service user to another person/also demonstration of fear of going home
- Difficulty in speaking to service users eg another adult unreasonably insists on being present
- Pressure exerted by families or professionals to have someone committed to care Staff with a history of moving jobs without notice or has inadequate references