

T3 Residential Limited

Safeguarding Adults Policy

1 Introduction

- 1.1. T3 Residential Limited (“**T3 Residential**”) is committed to protecting a person’s right to live in safety, free from abuse, harm and neglect and this policy explains how we will respond to suspicions or allegations for adults at risk.

2 Legal and Regulatory Responsibilities (not exhaustive)

- 2.1 This policy is aligned with the following legislative and regulatory requirements:

- Data Protection Act 2018;
- Mental Capacity Act 2005;
- Safeguarding Vulnerable Groups Act 2006;
- Protection of Freedoms Act 2012;
- The Care Act 2014;
- Equality Act 2010;
- Human Rights Act 1998;
- Mental Health Act 1983; and
- Domestic Abuse Act 2021.

3 Scope

- 3.1 The policy applies to all staff, vendors and partner agencies delivering services on our behalf. All parties are expected to comply with the expectations of this policy. Any reference to staff in this policy also encompasses the managing agents delivering services on our behalf.

- 3.2 An adult at risk is defined in the Care Act 2014 as any person who is aged 18 years or over and at risk of abuse or neglect, because of their needs for care and/ or support.

- 3.3 The policy aims to prevent abuse, harm or neglect to adults at risk by providing a consistent response to suspicions or allegations of abuse or neglect.

- 3.4 As defined in the Care Act 2014, the ten types of abuse are:

- Physical;
- Domestic abuse;
- Sexual abuse;
- Psychological or emotional abuse;
- Financial or material abuse;
- Modern slavery;
- Discriminatory abuse;
- Organisational abuse;
- Neglect and acts of omission; and
- Self-neglect (including hoarding).

- 3.5 The Care Act defines neglect as:

‘Deliberately withholding, or failing to provide, suitable and adequate care and support needed. It may be through a lack of knowledge or awareness, or through a decision not to act.’

4 Policy Approach

- 4.1 Safeguarding is everyone's responsibility. We all have a duty to report concerns through the appropriate channels to prevent or tackle the abuse, harm or neglect of adults at risk. This includes all tenants and household members, board members, staff and third parties working on our behalf. T3 Residential staff may also identify concerns in relation to visitors to our tenants homes.
- 4.2 We will record and monitor all safeguarding cases to identify patterns and trends on the internal designated IT system.
- 4.3 All staff, vendors and partners will comply with the six principles of safeguarding adults at risk.
- **Empowerment:** supporting adults at risk to make decisions;
 - **Prevention:** to act before harm occurs, identifying and addressing potential risks;
 - **Protection:** to take decisive and effective action, implementing strategies to prevent, respond to and address potential threats;
 - **Proportionality:** to apply the least intrusive response appropriate to the risk, avoiding excessive and inadequate measures;
 - **Partnership:** local solutions with joint efforts among partner agencies recognising collective responsibility; and
 - **Accountability:** accountability and transparency, recognising individual's and organisation's duty of care towards adults at risk.

5 Safeguarding in Practice

- 5.1 We will ensure that safeguarding is embedded throughout the customer journey, pre-tenancy where verification checks are undertaken, during the tenancy when there is any contact with the tenant or reports made, and ending the tenancy during pre-termination contact or eviction.
- 5.2 We will apply the "Five R's":
- **Recognise:** identifying signs of potential abuse or neglect through awareness of indicators of safeguarding concerns;
 - **Respond:** when recognising a safeguarding concern, respond appropriately, sensitively engaging with the individual;
 - **Report:** report the issue to the relevant authorities or safeguarding leads. Timely reporting is crucial to protect the adult at risk.
 - **Record:** accurately record the concerns, what was observed or discussed and actions taken, as soon as possible. Detailed, contemporaneous records can provide important information for further investigations; and
 - **Refer:** in some cases it may be necessary to refer the adult at risk to specialised services for support, for example the Police if immediate risk of further harm or mental health services.
- 5.3 We will avoid making assumptions about cases and instead adopt a professionally inquisitive mindset, actively gathering information to make well-informed decisions regarding potential safeguarding referrals. Adults are entitled to make their own choices and live as they wish, even if those choices seem unwise. Nevertheless, we recognise our responsibility to safeguard adults at risk. Our decision-making will always prioritise the needs and interests of adults at risk.
- 5.4 Our staff and others working on our behalf are responsible for recognising potential symptoms of abuse, recording their concerns and reporting them promptly, accurately and in as much details as possible to the appropriate authority, usually the social services department at the relevant local authority. In a case where there is suspected risk of immediate harm they should also be reported to the Police. Our staff and others working on our behalf are not responsible for investigating safeguarding cases or taking action.

6 Partnership Working

6.1 We recognise the important of partnership working with statutory agencies involved in supporting and protecting adults at risk and will respond to all requests and opportunities to engage with appropriate agencies.

6.2 We will signpost adults at risk to support services or, where necessary, make a direct referral. This may be without their consent as we will look to strike a balance between respecting a person's privacy and safeguarding them.

7 **Data Protection**

7.1 The General Data Protection Regulation ("GDPR") and the Data Protection Act 2018 are not intended to impede the justified sharing of information. Rather, they establish a framework to ensure that personal data is shared in an appropriate and responsible manner.

7.2 Wherever possible, information should be shared with the consent of the individual concerned. However, information may be disclosed without consent when there is a lawful basis for doing so, particularly where there are concerns for safety. All decisions regarding data sharing must be made based on the specific facts and circumstances of each case.

7.3 We are required to maintain comprehensive records of all data sharing decisions, including details of what information was shared, with whom, when, why, and by what means.

7.4 Data shared should be:

- Necessary;
- Proportionate;
- Relevant;
- Adequate;
- Accurate;
- Timely; and
- Secure.

7.5 This policy is expected to impact a limited number of tenants and household members. Where it is safe to do so, individuals will be notified when a safeguarding alert concerning them is raised with the local authority. However, if seeking consent or providing notification is believed to place any person at risk or hinder the detection of harm, a safeguarding alert may be raised without the individual's consent.

8 **Staff and Safeguarding**

8.1 All staff will receive safeguarding training.

8.2 There will be a designated safeguarding lead to oversee and coordinate safeguarding cases, provide advice and support to staff in situations of suspected or identified safeguarding concerns and ensure compliance with this policy.

8.3 All vendors and third parties acting on behalf of T3 Residential are expected to provide appropriate safeguarding training and awareness raising for all relevant staff.

9 **Monitoring and reporting**

9.1 All safeguarding cases will be logged and will be reviewed quarterly by the safeguarding lead to ensure compliance with the policy and that appropriate action is being taken.

10 **Whistleblowing**

10.1 T3 Residential has a Whistleblowing Policy which details the process for making a protected disclosure for suspected misconduct or illegality. This could include where someone suspects that an adult at risk is being abused by a member of staff or where they have reported safeguarding concerns and they are not being escalated in an appropriate way

10.2 The policy details for referrals or help and support where there is no appropriate internal investigating member of staff and the case may be referred to a 'prescribed person' as detailed on the government website.

11 **Policy Review**

11.1 The board is responsible for ensuring this policy is kept up to date, implemented within the organisation and monitored and evaluated.

11.2 The policy will be reviewed every two years or more frequently as a result of an incident occurring, feedback obtained, internal/external audits and change in legislation or regulation. This process ensures the policy's continuing suitability, adequacy and effectiveness.

12 **Background Documents**

12.1 This policy should be read in accordance with the following policy documents:

- Whistleblowing Policy;
- Equality, Diversity and Inclusion Policy;
- Data Protection Policy; and
- Safeguarding Children and Young People Policy.

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