



Downright Special Safeguarding Adults Policy & Procedures

Written: June 2019

Next Review Date: November 2024

See also relevant Downright Special policies:

- Child Safeguarding Policy and Procedures
- Health & Safety Policy, Risk Assessments
- Recruitment & Selection of Staff / Volunteers
- Complaints & Disciplinary Policy
- Diversity & Equality Policy
- Data protection & Information Sharing
- Photography & Filming Policy

The person with lead responsibility for safeguarding within the organisation is the Designated Safeguarding Officer:

KATIE BEWELL

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1. Introduction

Downright Special is committed to safeguarding and promoting the welfare of children, young people and adults with a care and support need engaged in the breadth of its activities. Downright Special believes that all adults have the right to be safe from harm and should be able to live free from fear of abuse, neglect and exploitation.

The purpose of this policy is to outline the duty and responsibility of staff, volunteers and trustees working on behalf of **Downright Special** in relation to the safeguarding of Adults at Risk of Harm.

This policy should be read AFTER reading our Child Safeguarding Policy and Procedures.

The person with lead responsibility for safeguarding within the organisation is the Designated Safeguarding Officer:

KATIE BEWELL

2. Context

For the purposes of this document 'adult' means a person aged 18 years or over.

In this document we use the terminology 'Adults at Risk of Harm' or 'Adult with a Care and Support Need' rather than the term 'vulnerable adults' in line with The Care Act 2014 definitions. The Care Act 2014 makes it clear that abuse of adults' links to circumstances rather than the characteristics of the people experiencing the harm. Labelling groups of people as inherently 'vulnerable' is seen to be disempowering.

Safeguarding duties apply to an adult who:

- Has needs for care and support (whether or not the local authority is meeting any of those needs) and;
- Is experiencing, or is at risk of, abuse or neglect; and;
- As a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of, abuse or neglect.

People with care and support needs, such as older people or people with disabilities, are more likely to be abused or neglected. They may be seen as an easy target and may be less likely to identify abuse themselves or to report it. People with communication difficulties can be particularly at risk because they may not be able to alert others. It is important to also be aware that charity volunteers or parents of people who access the charity may also have their own care and support need or be at risk of harm. Sometimes people may not even be aware that they are being abused, and this is especially likely if they have a cognitive impairment. Abusers may try to prevent access to the person they abuse. Signs of abuse can often be difficult to detect.

As such, ensuring the safety and protection of children, young people and adults is the first priority and it is the responsibility of all staff to act on any suspicion or evidence of abuse or neglect and to pass on their concerns to a responsible person or agency (see the Public Interest Disclosure Act 1998).

All staff, volunteers and trustees working on behalf of **Downright Special** have a duty to promote the welfare of adults with a care and support need.

Staff, volunteers and trustees may receive disclosures of abuse and observe vulnerable adults who are at risk. This policy will enable staff/volunteers to make informed and confident responses to specific adult protection issues.

3. Legal Framework

This guidance reflects the principles contained with the Human Rights Act 1998, the Mental Capacity Act 2005, the Public Interest Disclosure Act 1998 and the Care Act 2014.

The Human Rights Act 1998ⁱ gives legal effect in the UK to the fundamental rights and freedoms contained in the European Convention on Human Rights (ECHR). Examples of Convention or human rights include: the right to life; the right to respect for private and family life; the right to freedom of religion and belief.

The Mental Capacity Act 2005ⁱⁱ, covering England and Wales, provides a statutory framework for people who lack capacity to make decisions for themselves, or who have capacity and want to make preparations for a time when they may lack capacity in the future. It sets out who can take decisions, in which situations, and how they should go about this. Its general principle is that everybody has capacity unless it is proved otherwise, that they should be supported to make their own decisions, that anything done for or on behalf of people without capacity must be in their best interests and should be the least restrictive intervention.

The Public Interest Disclosure Act 1998 (PIDA)ⁱⁱⁱ created a framework for whistle blowing across the private, public and voluntary sectors. The Act provides almost every individual in the workplace with protection from victimisation where they raise genuine concerns about malpractice in accordance with the Act's provisions.

The Care Act 2014^{iv} aimed: to reform the law relating to care and support for adults and the law relating to support for carers; to make provision about safeguarding adults from abuse or neglect; to make provision about care standards; to establish and make provision about Health Education England; to establish and make provision about the Health Research Authority; to make provision about integrating care and support with health services; and for connected purposes^v. The Care Act encourages caregivers to take a person-centred approach when safeguarding adults with care and support need. The six principles of the Care Act are: Empowerment; Protection; Prevention; Proportionality; Partnership and Accountability.

4. Types of Abuse / Harm

The Care Act 2014 recognises **10 main categories of abuse** that may be experienced by adults^{vi}:

Physical - This includes hitting, slapping, pushing, kicking, restraint, and misuse of medication. It can also include inappropriate sanctions.

Sexual - This includes rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault, or sexual acts to which the adult has not consented, or was pressured into consenting.

Financial or Material - This includes theft, fraud, internet scamming, and coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions. It can also include the misuse or misappropriation of property, possessions, or benefits.

Neglect and Acts of Omission - This includes ignoring medical or physical care needs and failing to provide access to appropriate health social care or educational services. It also includes the withdrawing of the necessities of life, including medication, adequate nutrition, and heating.

Emotional or Psychological - This includes threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation, or withdrawal from services or supportive networks.

Self-neglect - This covers a wide range of behaviour, but it can be broadly defined as neglecting to care for one's personal hygiene, health, or surroundings. An example of self-neglect is behaviour such as hoarding.

Modern Slavery - This encompasses slavery, human trafficking, forced labour, and domestic servitude.

Domestic Abuse - This includes psychological, physical, sexual, financial, and emotional abuse perpetrated by anyone within a person's family. It also includes so-called "honour" based violence.

Discriminatory - Discrimination is abuse that centres on a difference or perceived difference, particularly with respect to race, gender, disability, or any of the protected characteristics of the Equality Act.

Organisational - This includes neglect and poor care practice within an institution or specific care setting, such as a hospital or care home, or in relation to care provided in one's own home. Organisational abuse can range from one off incidents to ongoing ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

There are also **four additional sources of harm** that are not included in the Care Act but may also be relevant to safeguarding adults:

Cyber Bullying - Cyber bullying occurs when someone repeatedly makes fun of another person online, or repeatedly picks on another person through emails or text messages. It can also involve using online forums with the intention of harming, damaging, humiliating, or isolating another person. It includes various different types of bullying, including racist bullying, homophobic bullying, or bullying related to

special education needs and disabilities. The main difference is that, instead of the perpetrator carrying out the bullying face-to-face, they use technology as a means to do it.

Forced Marriage -This is a term used to describe a marriage in which one or both of the parties are married without their consent or against their will. A forced marriage differs from an arranged marriage, in which both parties consent to the assistance of a third party in identifying a spouse. The Anti-Social Behaviour, Crime and Policing Act 2014 make it a criminal offence to force someone to marry.

Mate Crime - A “mate crime” is when “vulnerable people are befriended by members of the community who go on to exploit and take advantage of them” (Safety Network Project, ARC). It may not be an illegal act, but it still has a negative effect on the individual. A mate crime is carried out by someone the adult knows, and it often happens in private. In recent years there have been a number of Serious Care Reviews relating to people with a learning disability who were seriously harmed, or even murdered, by people who purported to be their friend.

Radicalisation - The aim of radicalisation is to inspire new recruits, embed extreme views and persuade vulnerable individuals to the legitimacy of a cause. This may be direct through a relationship, or through social media.

For more information on the indicators of abuse see **Appendix 1: “Safeguarding Adults: Types and Indicators of Abuse”**, publication from the Social Care Institute of Excellence

5. Procedure in the event of a disclosure

It is important that adults with a care and support need are protected from abuse. All complaints, allegations or suspicions must be taken seriously.

In the event of a suspicion, allegation or incident of abuse, this procedure must be followed.

Promises of confidentiality should not be given as this may conflict with the need to ensure the safety and welfare of the individual.

A full record shall be made as soon as possible of the nature of the allegation and any other relevant information.

This should include information in relation to:

- the date, the time, the place where the alleged abuse happened
- your name and the names of others present
- the name of the complainant and, where different, the name of the adult who has allegedly been abused
- the nature of the alleged abuse
- a description of any injuries observed
- the account which has been given of the allegation.

6. Responding to an Allegation

Any suspicion, allegation or incident of abuse must be reported to the Designated Safeguarding Officer (DSO) or in the case that the concern or allegation relates to the DSO, their line manager should be contacted (Charity Manager of Downright Special – Gillian Bowlas)

The DSO shall telephone and report the matter to the local adult social services duty social worker via the Hull Multi Agency Safeguarding Hub. A written record of the date and time of the report shall be made and the report must include the name and position of the person to whom the matter is reported. The telephone report must be confirmed in writing to the local authority adult social services department (Hull Multi Agency Safeguarding Hub) within 24 hours, using their 'alerter' form. The DSO should discuss the concern with the Multi Agency Safeguarding Hub before completing and sending the 'alerter' form. A member of the team will be able to give guidance and support and agree the next steps.

Designated Safeguarding Officer: Katie Bewell

Charity Manager: Gillian Bowlas

Downright Special: 01482 420160

Hull Safeguarding Adults Partnership Board - Multi Agency Safeguarding Hub

Tel: 01482 616092 - ask for the adults safeguarding team duty officer

Tel: 01482 300304 - after 5:00pm or during weekends

Email: adultsafeguarding@hullcc.gov.uk

Report a concern: <https://www.hull.gov.uk/safeguarding/worried-adult-raise-concern>

7. Managing a Disclosure – responding appropriately

DO

- Make sure the person is safe
- Assess whether emergency services are required and if needed call them
- Listen to what the person has to say with an open mind.
- Offer support and reassurance
- Never stop a person who is freely recalling significant events.
- Ascertain and establish basic facts
- Make note of the discussion, taking care to record the timing, setting and people present, as well as what was said.
- Obtain agreement on the notes
- Take all necessary precautions to preserve forensic evidence.
- Explain areas of confidentiality; immediately speak to your manager or the DSO for support and guidance
- Explain the procedure to the individual making the allegation i.e. that the DSO will need to be informed and what will happen next
- Inform the DSO immediately

DO NOT

- Confront the alleged abuser
- Ask probing or leading questions
- Assume information
- Be judgemental or voice your own opinion
- Be dismissive of the concern
- Make promises
- Ignore the allegation
- Investigate or interview beyond that which is necessary to establish basic facts
- Disturb or destroy possible forensic evidence
- Elaborate in your notes
- Panic

It is important to remember that the person who first encounters a case of alleged abuse is not responsible for deciding whether abuse has occurred. This is the task of the Hull Safeguarding Adults Partnership Board Multi Agency Safeguarding Hub following a referral.

8. Confidentiality

Safeguarding adults at risk of harm raises issues of confidentiality which should be clearly understood by all.

Staff, volunteers and trustees have a professional responsibility to share relevant information about the protection of adults at risk of harm with other professionals, particularly investigative agencies and adult social services.

Clear boundaries of confidentiality will be communicated to all.

All personal information regarding a vulnerable adult will be kept confidential. All written records will be kept in a secure area for a specific time as identified in data protection guidelines.

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 should, however, be assured that the matter will be disclosed only to people who need to know about it.

Where possible, consent should 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 vulnerable adult is the priority.

Where a disclosure has been made, staff/volunteers should let the adult know the position regarding their role and what action they will have to take as a result.

Staff/volunteers should assure the adult that they will keep them informed of any action to be taken and why. The adults' involvement in the process of sharing information should be fully considered and their wishes and feelings taken into account.

9. Allegations against staff members / volunteers

If any member of staff or volunteer has concerns about the behaviour or conduct of another individual working within the group or organisation including:

- Behaving in a way that has harmed, or may have harmed an adult at risk of harm;
- Possibly committed a criminal offence against, or related to, an adult at risk
- Behaved towards an adult at risk in a way that indicates s/he is unsuitable to work with vulnerable adults

The nature of the allegation or concern should be reported to the DSO for dealing with allegations against staff/volunteers/carers, etc., (Katie Bewell) immediately. The member of staff who has a concern or to whom an allegation or concern is reported should not question the adult at risk or investigate the matter further.

The DSO will report the matter to the Hull Safeguarding Adults Partnership Board Multi Agency Safeguarding Hub.

In the case that the concern or allegation relates to the DSO, their line management should be contacted (Charity Manager Gillian Bowlas). If the immediate line manager / or other members of the management structure is implicated in the concerns or allegations or the DSO is not available then the matter should be reported directly to Hull Safeguarding Adults Partnership Board Multi Agency Safeguarding Hub.

If suspension of the alleged abuser is required the designated officer should discuss this with the Hull Safeguarding Adults Partnership Board Multi Agency Safeguarding Hub to consider the timing.

In cases where there is an immediate risk to any child or young person, the information must be passed to Local Authority Children's Social Care or the Police, as soon as possible.

Allegations against staff in their personal lives or which occur in the community

If an allegation or concern arises about a member of staff, outside of their work with adults at risk, and this may present a risk of harm to individuals for whom the member of staff is responsible, the general principles outlined in this policy will still apply.

If the member of staff lives in a different authority area to that which covers their workplace, liaison should take place between the relevant agencies in both areas.

10. What happens after concerns are shared with the Hull Safeguarding Adults Team^{vii}

When you contact the Hull Safeguarding Adults Team (Multi Agency Safeguarding Hub) they will discuss the concern with you to determine what actions they must take. In some instances this may result in them undertaking further enquiries or they may suggest a different course of action.

If you are contacting them with concerns for someone else they will want to make arrangements to talk to the person themselves about the concerns. They will do this by telephone or through a visit.

They will always have regard to the views, wishes, feelings and beliefs of the person at risk before deciding on any safeguarding action. People have complex lives and being safe means different things to different people. They will work with the person to find out what being safe means to them and how this can be best achieved.

They will then work with the person to help them make any changes they have identified to better protect themselves from abuse or neglect.

Sometimes the person at risk of abuse is not able to make these decisions. Where this is the case they will make sure that any actions taken are in the person's best interest, in line with the Mental Capacity Act 2005.

Usually a person has a friend or relative who can offer some support during a safeguarding enquiry but if the person has no one to support them they can arrange an advocate for them. This is someone to speak up for them and act on their behalf.

11. Code of Conduct for staff, volunteers and trustees

Staff / Volunteers **should** always:

- Take all allegations, suspicions or concerns about abuse that a person makes seriously (including those made against staff) and report them through the procedures.
- Provide an opportunity and environment for adults with a care and support need to talk to others about concerns they may have.
- Provide an opportunity and environment for parents or volunteers to discuss any stresses they may be experiencing and to seek help where necessary.
- Provide an environment that encourages children and adults to feel comfortable and confident in challenging attitudes and behaviours that may discriminate others.
- Risk assess situations and activities to ensure all potential dangers have been identified.
- Treat everyone with dignity and respect.

- Staff/volunteers need to ensure their relationship with an adult with a care and support need is appropriate at ALL times.
- Staff need to take care not to get over-involved in the personal life of a vulnerable adult in a way that leaves the vulnerable adult in need of / seeking their support. If a member of staff is worried about this they must speak to the DSO and seek advice
- Relationships with adults with a care and support need must remain professional

Staff / volunteers / children **should not**;

- Permit or accept abusive or discriminatory behaviour.
- Engage in inappropriate behaviour or contact.
- Use inappropriate or insulting language.
- Show favouritism to anyone.
- Undermine or criticise others.
- Give personal money.
- Use social networks for personal communication with children, young people or vulnerable adults for whom they are responsible.

12. Recruitment/Selection

It is important when recruiting paid staff and volunteers to adhere to the organisations recruitment policy. This will ensure potential staff and volunteers are screened for their suitability to work with children and adults with a care and support need.

- All paid staff and volunteers with access to children and vulnerable adults or sensitive information relating to them will be required to undertake an enhanced DBS check.
- All staff and volunteers will be required to read the Child Safeguarding Policy and Procedures and the Safeguarding Adults Policy and Procedures.
- All staff and volunteers to complete an application form, including details of previous employment, details of any conviction for criminal offences (including spent convictions under the Rehabilitation of Offenders Act 1974), agreement for an enhanced DBS check, permission to contact two referees, including their current or most recent employer (which should be taken up).
- The potential staff member or volunteer will be interviewed for their suitability for the post by members of the board of trustees or senior management of the charity.
- Staff and volunteers will have a period of induction where they will complete any induction training

The Disclosure and Barring Service (DBS) can help employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups, including children. It replaces the Criminal Records Bureau (CRB) and Independent Safeguarding Authority (ISA).

<https://www.gov.uk/government/organisations/disclosure-and-barring-service/about>

A person who is barred from working with children or vulnerable adults will be breaking the law if they work or volunteer, or try to work or volunteer with those groups. If Downright Special knowingly employs someone who is barred to work with those groups they will also be breaking the law. If there is an incident

where a member of staff or volunteer has to be dismissed because they have harmed a child or vulnerable adult, or would have been if they had not left, Downright Special will notify the DBS.

13. Contacts

Downright Special Designated Safeguarding Officer (DSO): Katie Bewell

Charity Manager: Gillian Bowlas

Downright Special Office: 01482 420160

Hull Safeguarding Adults Partnership Board - Multi Agency Safeguarding Hub

Tel: 01482 616092 - ask for the adults safeguarding team duty officer

Tel: 01482 300304 - after 5:00pm or during weekends

Fax: 01482 318217 - address to the Multi Agency Safeguarding Hub

Email: adultsafeguarding@hullcc.gov.uk

Report a concern: <https://www.hull.gov.uk/safeguarding/worried-adult-raise-concern>

Humberside Police

Tel: 101 OR 999 if the person is at immediate risk

<https://www.humberside.police.uk/>

East Riding Safeguarding Adults Board

Tel: (01482) 396940

Email: safeguardingadultsteam@eastriding.gcsx.gov.uk

Tel: (01377) 241273 (for the emergency duty team out of hours enquires)

ERSAB Multi-Agency Adults at Risk Concern Form: <http://www.ersab.org.uk/reporting-abuse/>

Easy Read Format is available Here: <https://downloads.eastriding.org.uk/ersab/abuse-and-reporting-abuse/Easy%20Read%20Concerns%20Form.pdf>

Hull Children's Social Care (Local Authority)

Early Help and Safeguarding Hub (01482) 448879

Immediate Help (out of office hours) (01482) 300304

Local Authority Designated Officer (01482) 790933

Hull Safeguarding Children Board (01482) 379090

<http://www.hullsafeguardingchildren.co.uk/>

14. Acknowledgements

This policy has been written using guidance from:

- The Ann Craft Trust <https://www.anncrafttrust.org/>
- The Social Care Institute for Excellence <https://www.scie.org.uk/safeguarding/adults/>.
- Bradford Down Syndrome Training & Support Service

Appendix 1: Safeguarding Adults: “Types and Indicators of Abuse”,

(Publication from the Social Care Institute of Excellence)



At a glance 69

January 2015



At a glance 69: Safeguarding adults: Types and indicators of abuse

Introduction

People with care and support needs, such as older people or people with disabilities, are more likely to be abused or neglected. They may be seen as an easy target and may be less likely to identify abuse themselves or to report it. People with communication difficulties can be particularly at risk because they may not be able to alert others. Sometimes people may not even be aware that they are being abused, and this is especially likely if they have a cognitive impairment. Abusers may try to prevent access to the person they abuse.

Signs of abuse can often be difficult to detect. This At a glance briefing aims to help people who come into contact with people with care and support needs to identify abuse and recognise possible indicators. Many types of abuse are also criminal offences and should be treated as such.

Types of abuse:

- Physical abuse
- Domestic violence or abuse
- Sexual abuse
- Psychological or emotional abuse
- Financial or material abuse
- Modern slavery
- Discriminatory abuse
- Organisational or institutional abuse
- Neglect or acts of omission
- Self-neglect

Evidence of any one indicator from the following lists should not be taken on its own as proof that abuse is occurring. However, it should alert practitioners to make further assessments and to consider other associated factors. The lists of possible indicators and examples of behaviour are not exhaustive and people may be subject to a number of abuse types at the same time.

Physical abuse

Types of physical abuse:

- assault, hitting, slapping, punching, kicking, hair-pulling, biting, pushing
- rough handling
- scalding and burning
- physical punishments
- inappropriate or unlawful use of restraint
- making someone purposefully uncomfortable (e.g. opening a window and removing blankets)
- involuntary isolation or confinement
- misuse of medication (e.g. over-sedation)
- forcible feeding or withholding food
- unauthorised restraint, restricting movement (e.g. tying someone to a chair).

Possible indicators of physical abuse:

- no explanation for injuries or inconsistency with the account of what happened
- injuries are inconsistent with the person's lifestyle
- bruising, cuts, welts, burns and/or marks on the body or loss of hair in clumps
- frequent injuries
- unexplained falls
- subdued or changed behaviour in the presence of a particular person
- signs of malnutrition
- failure to seek medical treatment or frequent changes of GP.

Domestic violence or abuse

Types of domestic violence or abuse:

Domestic violence or abuse can be characterised by any of the indicators of abuse outlined in this briefing relating to:

- psychological
- physical
- sexual
- financial
- emotional.

Domestic violence and abuse includes any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been, intimate partners or family members regardless of gender or sexuality.

It also includes so called 'honour'-based violence, female genital mutilation and forced marriage. Coercive or controlling behaviour is a core part of domestic violence.

Coercive behaviour can include:

- acts of assault, threats, humiliation and intimidation
- harming, punishing, or frightening the person
- isolating the person from sources of support
- exploitation of resources or money
- preventing the person from escaping abuse
- regulating everyday behaviour.

Possible indicators of domestic violence or abuse

- low self-esteem
- feeling that the abuse is their fault when it is not
- physical evidence of violence such as bruising, cuts, broken bones
- verbal abuse and humiliation in front of others
- fear of outside intervention
- damage to home or property
- isolation – not seeing friends and family
- limited access to money.

Sexual abuse

Types of sexual abuse:

- rape, attempted rape or sexual assault
- inappropriate touch anywhere
- non-consensual masturbation of either or both persons
- non-consensual sexual penetration or attempted penetration of the vagina, anus or mouth
- any sexual activity that the person lacks the capacity to consent to
- inappropriate looking, sexual teasing or innuendo or sexual harassment
- sexual photography or forced use of pornography or witnessing of sexual acts
- indecent exposure.

Possible indicators of sexual abuse:

- bruising, particularly to the thighs, buttocks and upper arms and marks on the neck
- torn, stained or bloody underclothing
- bleeding, pain or itching in the genital area
- unusual difficulty in walking or sitting
- foreign bodies in genital or rectal openings
- infections, unexplained genital discharge, or sexually transmitted diseases
- pregnancy in a woman who is unable to consent to sexual intercourse
- the uncharacteristic use of explicit sexual language or significant changes in sexual behaviour or attitude
- incontinence not related to any medical diagnosis
- self-harming
- poor concentration, withdrawal, sleep disturbance
- excessive fear/apprehension of, or withdrawal from, relationships
- fear of receiving help with personal care
- reluctance to be alone with a particular person.

Psychological or emotional abuse

Types of psychological or emotional abuse:

- enforced social isolation – preventing someone accessing services, educational and social opportunities and seeing friends
- removing mobility or communication aids or intentionally leaving someone unattended when they need assistance
- preventing someone from meeting their religious and cultural needs
- preventing the expression of choice and opinion
- failure to respect privacy
- preventing stimulation, meaningful occupation or activities
- intimidation, coercion, harassment, use of threats, humiliation, bullying, swearing or verbal abuse
- addressing a person in a patronising or infantilising way
- threats of harm or abandonment
- cyber bullying.

Possible indicators of psychological or emotional abuse:

- an air of silence when a particular person is present
- withdrawal or change in the psychological state of the person
- insomnia
- low self-esteem
- uncooperative and aggressive behaviour
- a change of appetite, weight loss/gain
- signs of distress: tearfulness, anger
- apparent false claims, by someone involved with the person, to attract unnecessary treatment.

Financial or material abuse

Types of financial or material abuse:

- theft of money or possessions
- fraud, scamming
- preventing a person from accessing their own money, benefits or assets
- employees taking a loan from a person using the service
- undue pressure, duress, threat or undue influence put on the person in connection with loans, wills, property, inheritance or financial transactions
- arranging less care than is needed to save money to maximise inheritance
- denying assistance to manage/monitor financial affairs
- denying assistance to access benefits
- misuse of personal allowance in a care home
- misuse of benefits or direct payments in a family home
- someone moving into a person's home and living rent free without agreement or under duress
- false representation, using another person's bank account, cards or documents
- exploitation of a person's money or assets, e.g. unauthorised use of a car
- misuse of a power of attorney, deputy, appointeeship or other legal authority
- rogue trading – e.g. unnecessary or overpriced property repairs and failure to carry out agreed repairs or poor workmanship.

Possible indicators of financial or material abuse:

- missing personal possessions
- unexplained lack of money or inability to maintain lifestyle
- unexplained withdrawal of funds from accounts

Appendix 2: References

ⁱ <https://www.legislation.gov.uk/ukpga/1998/42/contents>

ⁱⁱ <https://www.legislation.gov.uk/ukpga/2005/9/contents>

ⁱⁱⁱ <https://www.legislation.gov.uk/ukpga/1998/23/contents>

^{iv} <http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>

^v <https://services.parliament.uk/bills/2013-14/care.html>

^{vi} <https://www.anncrafttrust.org/resources/types-of-harm/>

^{vii}

<http://www.hullcc.gov.uk/pls/portal/url/PAGE/HOME/HEALTH%20AND%20SOCIAL%20CARE/ADULT%20SOCIAL%20CARE/REPORT%20ADULT%20ABUSE/>