

SAFEGUARDING CHILDREN AND VULNERABLE ADULTS POLICY

**Policy Owner:
Chief Customer Officer**

**Accountable Lead:
Director of Housing**



Policy Control	
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Policy Statement

Safeguarding is defined as the right of every child and vulnerable adult accessing our services to be protected from any form of abuse.

SAFEGUARDING IS EVERYBODY'S BUSINESS

Safeguarding is the responsibility of everyone including statutory, independent and voluntary agencies as well as every citizen. Curo will work together with others to prevent and protect adults with care and support needs and children from abuse and to promote wellbeing.

EQUALITY & DIVERSITY

We are committed to supporting the rights of adults and children at risk to be safeguarded from abuse and to ensuring that all colleagues and volunteers work together in accordance with this Policy and act promptly in investigating allegations or suspicions of abuse.

It is recognised that adults and children at risk from specific key groups may experience discrimination and less favourable treatment on the grounds of their age, disability, race, colour, ethnic or national origin, financial or economic status, gender or marital status, HIV status, homelessness or lack of a fixed address, political view or trade union activity, religion or belief, sexuality, or unrelated criminal convictions. We will take positive steps to stop any unfair or unlawful discrimination and carry out positive action where lawful.

DOING NOTHING IS NOT AN OPTION

If we know or suspect that an adult or child is being abused, we will do something about it and ensure our work is properly recorded. We will share information in a timely way. Concerns will be reported to the relevant local authority within 24 hours.

- All colleagues have a responsibility to report and record any concern to SafeguardingReporting@curo-group.co.uk
- Colleagues who manage SafeguardingReporting@curo-group.co.uk will act on the report on the same day that it is received, making a decision whether to refer the matter to the local authority Safeguarding team or take any other appropriate action.

COMPLAINTS

If there are reasons to believe that concerns about a Safeguarding Adults or Children issue have not been appropriately addressed, colleagues may make a formal complaint to the local authority dealing with it. When the concern is that Curo may not have addressed a concern appropriately, colleagues should in the first instance raise the issue with their line manager, or service director. Colleagues can also refer to the Curo Whistleblowing Policy and procedures.

1. Scope

- 1.1 This policy applies to all children and adults in our accommodation and support services, applicants and visitors to our services. It supports the safeguarding processes of local authorities in the areas where we work.

The policy and its accompanying procedure and guidelines outline the responsibilities of Curo's Board, colleagues and volunteers in relation to the safeguarding of children and vulnerable adults using our services. The policy recognises that the safeguarding of children and vulnerable adults who live in our homes and our communities is the responsibility of all colleagues and volunteers.

2 Responsibilities

- 2.1 It is the responsibility of all colleagues to support the organisation's commitment to the safeguarding of children and vulnerable adults, attend training and follow the associated procedures. It is the

responsibility of Curo's Board, Executive, leadership teams and all managers to ensure compliance and the effectiveness of the procedure accompanying this policy.

Lead officers are responsible for maintaining, updating and delivering appropriate procedures to deliver policy objectives, and ensuring that these are available and understood by all teams.

Lead Officers are:

- Adult safeguarding - Director of Tenancy Compliance & Management
- Child safeguarding – Director of Curo Choice

It is the responsibility of managers and all front-line colleagues to ensure that they understand the importance of this policy and related procedures.

Failure to report suspected harm or abuse in line with the procedure that accompanies this Policy may be regarded as a breach of the code of conduct.

3. Definitions

3.1 Safeguarding is defined as the right of every child and vulnerable adult accessing our services to be protected from any form of abuse. All citizens have the right to live in safety, free from abuse and neglect. Our commitment to safeguarding 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 ensuring wellbeing is promoted including having regard to victims' views, wishes, feelings and beliefs in deciding on any action. Professionals and other colleagues should not advocate 'safety' measures that do not take account of the wellbeing of the individual being supported.

- A child is anyone who has not yet reached their 18th birthday.
- An adult is anyone aged 18 or above.

3.2 The aims of safeguarding are to:

- Stop abuse or neglect wherever possible.
- Prevent harm and reduce the risk of abuse or neglect to children and vulnerable adults with care and support needs.
- Safeguard children and vulnerable adults in a way that supports them in making choices and having control about how they want to live.
- Promote an approach that concentrates on improving life for the children and vulnerable adults concerned.
- Raise public awareness so that communities, alongside professionals, play their part in preventing, identifying and responding to abuse and neglect;

- Provide information and support in accessible ways to help children and vulnerable adults understand the different types of abuse, how to stay safe and what to do to raise a concern about the safety or well-being of an adult;
- Address what has caused the abuse; not just dealing with the symptoms but understanding the triggers that have caused a concern to arise.

3.3 **Adult Safeguarding duties**

Safeguarding duties apply to an adult (aged 18 or over) 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 result of their care and support needs is unable to protect themselves from either the risk or experience of abuse or neglect

3.3.1 What is abuse?

The Care Act's statutory guidance lists 10 types of abuse but states that local authorities should not limit their view of what constitutes abuse or neglect to those types, or the different circumstances in which they can take place. These are:

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

3.3.2 Abuse can consist of a single incident or repeated acts, it can be intentional or unintentional, or result from a lack of knowledge. It can affect one person, or multiple individuals. Professionals and others should be vigilant in looking beyond single incidents to identify patterns of harm. In order to see these patterns, it is important that information is recorded and appropriately shared.

3.3.3 Patterns of abuse and neglect vary and include:

- Serial abusing, where the perpetrator seeks out and 'grooms' individuals by obtaining their trust over time before the abuse begins – sexual abuse or exploitation commonly falls into this pattern, as do some forms of radicalisation and financial abuse.

- Long-term abuse in the context of an ongoing family relationship such as domestic violence between spouses or generations, or persistent psychological abuse.
- Opportunistic abuse, such as theft occurring because money has been left lying around.
- Situational abuse, which arises because pressures have built up, or because a carer has difficulties themselves affecting their ability to adequately meet a person's needs. These could be debt, alcohol or mental health related, or the specific demands resulting from caring for a vulnerable person.

3.3.4 Who might abuse?

- Anybody can abuse. Mutually abusive relationships involving two or more adults also exist.
- The abuser is frequently, but not always, known to the child or vulnerable adult they abuse and can include spouses/partners, other family members, neighbours or friends, acquaintances, paid colleagues or professionals, volunteers and strangers, or people who deliberately exploit adults they perceive as vulnerable to abuse.

3.3.5 Where might abuse occur?

Abuse can happen anywhere, for example:

- The person's own home (whether living alone, with relatives, or others).
- Day or residential centres.
- Supported housing.
- Work settings.
- Educational establishments.
- Via the internet or social media.
- Other places in the community.

3.3.6 Why may abuse occur?

Abuse can occur for many reasons. The risk is known to be greater when:

- The person is socially isolated.
- A pattern of family violence exists or has existed in the past.
- Drugs or alcohol are being misused.
- Relationships are placed under stress.
- The abuser or victim is dependent on the other (for finance, accommodation, or emotional support).

Where services are provided, abuse is more likely to occur where staff are:

- Inadequately trained.
- Poorly supervised and managed.
- Lacking support.

- Working in isolation.

Other factors which increase the likelihood of abuse and neglect occurring are:

- Where the person has an illness, which causes unpredictable behaviour.
- Where the person has communication difficulties.
- Where the person exhibits challenging behaviour or major changes in personality, disorientation, aggression or sexual disinhibition.
- Where the person concerned needs or requests more than the carer can give.
- Where the family undergoes an unforeseen change in circumstances, e.g. sudden illness, unemployment, bereavement or divorce.
- Where a carer has been forced to change their lifestyle unexpectedly as a result of caring.
- Where a carer is isolated and can see no end to, or relief from, caring.
- Where a carer experiences regularly disturbed sleep.
- Where the carer has their own health-related difficulties.
- Where the carer is dependent on the victim.
- Where the carer is physically, emotionally or practically unable to care for the individual.
- Where there has been a reversal of role and responsibilities.
- Where there are persistent financial problems.
- Where other relationships are unstable or placed under pressure by caring tasks.

3.3.7 **Self-neglect**

Self-neglect is one of the most reported forms of safeguarding concern. There are various reasons why people self-neglect. Some people may make a conscious decision to live life in a way that may have a negative impact on their health, well-being or living conditions.

Often people can be unwilling to acknowledge there may be a problem or to be open to receiving support to improve their circumstances. They may have insight into their situation, or they may not; some people may have an underlying condition that impacts on their ability to care for themselves.

3.4 **Safeguarding children and young people**

The Children and Social Work Act 2017 sets out the requirements for local arrangements for safeguarding and promoting the welfare of children.

The Children Act 1989 provides the legislative framework for agencies to take decisions on behalf of children, and to take action to protect them from abuse and neglect.

3.4.1 Section 11 of the Children Act 2004 places duties on a range of organisations and individuals to ensure their functions and any services

that they contract out to others are discharged having regard to the need to safeguard and promote the welfare of children.

3.4.2 Children and young people may be at greater risk of harm, or need additional help, in families where adults have mental health problems, misuse substances or alcohol, are in a violent relationship, have complex needs or have learning disabilities.

3.4.3 Abuse within families reflects a diverse range of relationships and power dynamics which may affect the causes and impact of abuse. These can challenge professionals to work across multi-disciplinary boundaries in order to protect all those at risk. Colleagues may be assisted by using Domestic Abuse risk management tools as well as safeguarding risk management tools.

Colleagues providing services to adults, children and families should have appropriate training whereby they are able to identify risks and abuse to children and vulnerable adults.

3.5 Effective transition for Children in Care

3.5.1 Young people who receive 'leaving care' or 'after care' support from children and family services are included in the scope of adult safeguarding, but close liaison with children and family service providers is critical in establishing who is the best person to lead or support young people through adult safeguarding processes.

3.5.2 The Children and Families Act 2014 and the Care Act 2014 create a comprehensive legislative framework for transition when a child turns 18 (the Mental Capacity Act 2005 applies once a person turns 16).

3.5.2 The duties in both Acts are on the Local Authority, but this does not exclude colleagues from working together to ensure that the safeguarding adult's policy and procedures work in conjunction with those for children and young people.

3.6 Children and Young People who abuse

3.6.1 If a child or children is/are causing harm to an adult covered by the adult safeguarding procedures, action should be taken under these procedures and a referral and close liaison with children's services should take place.

3.7 Young carers

3.7.1 Section 1 of the Care Act 2014, alongside Sections 96 and 97 of the Children and Families Act 2014, offer a joined-up legal framework to identify young carers and parent carers and their support needs. Both have a strong emphasis on outcomes and wellbeing.

3.8 Carers and Safeguarding

Carers could become involved in a variety of situations requiring a safeguarding response. This includes:

- Witnessing or speaking up about abuse or neglect.
- Experiencing intentional or unintentional harm from the adult they support, or from professionals and organisations that they are in contact with.
- Unintentionally or intentionally causing harm or neglect to the adult they support, either as an individual or with others.

3.8.1 In such cases, colleagues should make a referral for both the carer and the adult they care for. The referral should include consideration of the wellbeing of both individuals.

3.8.2 Other key things to consider in relation to carers include:

- Involving carers in safeguarding enquiries relating to the person they care for as appropriate.
- Whether or not a joint assessment is appropriate, and who (including which professionals) should be involved in the assessment.
- The risk factors that may increase the likelihood of abuse or neglect occurring and whether these are present in the situation;

3.9 Consent

3.9.1 The Care and Support Statutory Guidance advises that the first priority in safeguarding should always be the safety and well-being of the child or vulnerable adult.

3.9.2 It is essential in adult safeguarding to consider whether the adult can give consent in all aspects of their lives. If they are able, their consent should be sought for any referral to be made. If a colleague is uncertain whether consent is required they should consult with their manager or the local authority safeguarding team for further advice.

3.9.3 Adults may not give their consent to the sharing of safeguarding information for several reasons. For example, they may be unduly influenced, coerced or intimidated by another person, they may be fearful of reprisals, they may fear losing control, they may lack trust in statutory services, or fear their relationship with the abuser will be damaged. Reassurance and appropriate support can help to change their view on whether it is best to share information, and colleagues should consider the following approaches:

- Explore the reasons for the adult's objections – what are they concerned about?
- Explore the concern and why you think it is important the information is shared.

- Tell the adult with whom you may be sharing the information with and why.
- Explain the benefits, to them or others, of sharing information – could they access better help and support?
- Discuss the consequences of not sharing the information – could someone come to harm?
- Reassure them that the information will not be shared with anyone who does not need to know.
- Reassure them that they are not alone, and that support is available.

3.9.4 If the adult refuses intervention to support them with a safeguarding concern, or requests that information about them is not shared with other safeguarding partners, in general their wishes should be respected.

However, there are several circumstances where colleagues can reasonably override such a decision, including:

- Whether the adult is believed not to have the mental capacity to make that decision.
- There is an emergency or life-threatening situation that may warrant the sharing of relevant information with the emergency services without consent.
- If there is an aspect of public interest (e.g. not acting will put other adults or children at risk);
- Sharing the information could prevent a serious crime.
- If there is a duty of care to intervene (e.g. the police if a crime has been/may be committed);
- The risk is unreasonably high.
- There is a court order or other legal authority for acting without consent.

3.9.5 It is important to keep a careful record of the decision-making process and what, if any, information was shared in such situations. Colleagues should seek advice from managers before overriding the adult's decision, except in emergencies.

Managers should make decisions based on whether there is an overriding reason which makes it necessary to act without consent, and whether doing so is proportionate because there is no less intrusive way of ensuring safety. Legal advice should be sought where appropriate. If the decision is made to act without the adult's consent, then unless it is unsafe to do so, the adult should be informed that this is being done and the reasons why.

3.9.6 If none of the above apply and a decision is taken not to share safeguarding information with other safeguarding partners, or not to intervene to safeguard the adult:

- Support the adult to weigh up the risks and benefits of different options.
- Ensure that they are aware of the level of risk and possible outcomes.
- Offer to arrange for them to have an advocate.

- Offer support for them to build confidence and self-esteem, if necessary.
- Agree on and record the level of risk the adult is taking.
- Record the reasons for not intervening or sharing information;
- Regularly review the situation.
- Seek to build trust to enable the adult to better protect themselves.

4. Information Sharing and Confidentiality

4.1 Sharing the right information, at the right time, with the right people is fundamental to good practice in adult safeguarding but has been routinely highlighted as a difficult area of practice.

4.2 We need to do this in order to:

- Prevent death or serious harm.
- Coordinate effective and efficient responses.
- Enable early interventions to prevent the escalation of risk.
- Prevent abuse and harm that may increase the need for care and support.
- Maintain and improve good practice in adult safeguarding.
- Reveal patterns of abuse that were previously undetected and could identify others at risk of abuse.
- Identify low-level concerns that may reveal people at risk of abuse.
- Help people access the right kind of support to reduce risk and promote wellbeing.
- Help identify people who may pose a risk to others and, where possible, work to reduce offending behaviour.
- Reduce organisational risk and protect reputation.

4.3 Adults have a general right to independence, choice and self-determination including control over information about themselves. In the context of adult safeguarding, these rights can be overridden in certain circumstances such as an emergency or life-threatening situation.

4.4 We must ensure that when colleagues share information, they do so in a way that is compliant with the General Data Protection Regulation (GDPR).

- The GDPR and human rights law are not barriers to justified information sharing, but provide a framework to ensure that personal information about living individuals is shared appropriately.
- When sharing or requesting personal information from someone, colleagues must be certain of the basis upon which they are doing so and should always take advice from Governance if unsure.
- Colleagues must be open and honest with the individual (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement and, even when sharing without consent, tell them when information is being shared unless it is unsafe or inappropriate to do so.
- Colleagues should share with consent only where appropriate. Where colleagues have consent, they must be mindful that an individual would

have the expectation that only relevant information would be shared and must have the option to withdraw their consent.

- Colleagues should consider safety and well-being and base their information sharing decisions on considerations of the safety and well-being of the customer and others who may be affected by their actions.
- Information sharing should always be necessary, proportionate, relevant, adequate, accurate, timely and secure. Colleagues must ensure that the information shared is necessary for the purpose for which they are sharing it, is shared only with those individuals who need to have it, is accurate and up-to-date, is shared in a timely fashion, is shared securely, and that arrangements are in place for it to be returned or destroyed.
- Colleagues must always keep a record of their decisions, lead agency and the reasons for them – whether it is to share information or not. If a decision is made to share, then record what you have shared, with whom and for what purpose.

5 Application

5.1 We deliver the principles of this policy through the application of processes which clearly distinguish between the requirements to safeguard vulnerable adults and the safeguarding of children. Each has a specific, named, lead officer within Curo. Both recognise that we have responsibilities as an employer of colleagues who work with children and with vulnerable adults. Both also recognise that any colleague may identify potential abuse in their daily work.

5.1.1 Our recruitment and selection procedure require references, proof of Identity, and where appropriate enhanced disclosure. We will undertake regular re-checks for every colleague who works with children and vulnerable adults (this will be done in accordance with commissioning requirements). We will not employ barred persons in any position that involves working with children or vulnerable adults.

5.1.2 All colleagues will work within the procedures that accompany this policy and all front-line colleagues will receive training on this policy and procedures at induction and annually thereafter.

5.1.3 The procedures that deliver this policy complement local authority safeguarding procedures and ensure the following outcomes;

- Colleagues are alert to the possibility of abuse of a vulnerable adult or children
- Colleagues can recognise abuse.
- Colleagues know how and where to report concerns
- Colleagues understand the need to share information about concerns with agencies that need to know.
- Are confident that data is shared in compliance with GDPR.
- Colleagues understand professional boundaries and managers identify risks associated with lone working by colleagues they manage
- Relevant colleagues know of and use local authority guidelines (or Curo guidelines in their absence)

- Colleagues are aware of the risks associated with self-harm and potential suicide.
 - Colleagues know how to escalate any concerns about poor practice, lack of action or misconduct in relation to safeguarding
- 5.1.4 Serious incident reporting procedures ensure that the Board is made aware of serious allegations involving members of Curo's staff.
- 5.1.5 We will provide customers of services for children and vulnerable adults with information about how and with whom they can share any concerns, complaints and anxieties.
- 5.1.6 We will inform customers of our services for children and vulnerable adults of our policy and procedures on children and vulnerable adults through the sign-up procedure, induction meetings with supported housing officers and in our service documentation.
- 5.1.9 We will work with relevant agencies, on individual cases and reviewing best practice and new legislation so that we develop appropriate strategies for responding to the needs of our tenants and clients.
- 5.1.10 Where the Safeguarding referral is for a customer who holds a protected characteristic as defined by the Equality Act 2010 consideration should be given to jointly referring the case to the Police where this is perceived to be hate motivated.
- 5.1.11 Training includes the recognition of potential child sexual exploitation, online grooming and missing persons protocols. It is provided in a way that is appropriate for each colleague's level of engagement with children in their day to day work.

6 Supporting documents

- The Children and Social Work Act 2017
- Care Act 2014
- The Protection of Children Act 1999
- The Children Act 1989, 2004
- 'Working Together to Safeguard Children' Department of Health 2015
- 'Every Child Matters' Department of Health 2007
- The Human Rights Act 1998
- The United Nations Convention on the Rights of the Child 2000
- Local Safeguarding Child Board and Joint SW Child Protection Procedures
- Department of Health 'No Secrets' 2000
- B&NES Safeguarding Interagency Procedures
- B&NES Community Safety and Safeguarding Partnership Strategic Plan
- North Somerset Safeguarding Policies and Procedures
- Policies and Procedure for Safeguarding in Swindon and Wiltshire
- South Gloucestershire Safeguarding Policies and procedures
- No Secrets in Bristol Adult Safeguarding

- Safeguarding Children in Bristol policy and procedures
- SP QAF

Curo policies and procedures

- Public Interest Disclosure Policy and Procedure
- Bullying and Harassment Policy
- Code of Conduct
- Professional Boundaries Guidance
- Disciplinary Procedure
- Data Protection and the Disclosure of Information
- Recruitment Policy and Procedure
- Criminal Record Bureau Employees Checks
- Anti-Social Behaviour Policy
- Domestic Abuse Policy
- Inclusion and Belonging Policy

Procedures

- Safeguarding Children Procedure and Guidelines
- Safeguarding Adults Procedure and guidelines

7 Equality and Diversity Implications

- 7.1 An Equalities Impact Assessment was carried out in May 2020 in connection with the development of this policy. No individual, or groups of individuals, were identified as being knowingly disadvantaged by this policy.

8 Assurance statement

- 8.1 Quality assurance checks on our management of safeguarding concerns and reports are undertaken monthly, and our safeguarding activities are audited every 3 years.
- 8.2 Safeguarding is a standing agenda item for our operational team meetings.
- 8.3 The Curo Safeguarding Board is chaired by the Chief Customer Officer. The board meets quarterly and reviews performance, other relevant data and undertakes thematic reviews. The board is responsible for setting the colleague training matrix and developing learning materials for colleagues.
- 8.4 Relevant colleagues are responsible for attending local authority Safeguarding Board meetings and relevant subgroups to support local authority objectives, share good practice and promote safeguarding.

Further Information for Colleagues;

This policy and associated procedures are based on the six principles of safeguarding that underpin all adult safeguarding work. We recognise our duty to safeguard our legal position, our reputation, and the safety of customers, colleagues, partners and people in communities.

Guiding Principles that support this document are;

Empowerment	Adults are encouraged to make their own decisions and are provided with support and information	Customers are consulted about the outcomes they want from the safeguarding process and these inform what happens
Prevention	Strategies are developed to prevent abuse and neglect that promote resilience and self-determination	Customers are provided with easily understood information about what abuse is, how to recognise it and how to get help
Proportionate	A proportionate and least intrusive response is made balanced with the level of risk	The customer should be confident that we will work in their interest and only get involved as much as needed.
Protection	Adults are offered ways to protect themselves, and there is a coordinated response to adult safeguarding	Customers are provided with help and are supported to take part in the process to the extent to which they want and are able.
Partnerships	Local solutions through services working together within their communities	The customer is confident that information will be appropriately shared in a way that considers its personal and sensitive nature. The customer is confident that agencies will work together to find the most effective responses for their situation.
Accountable	Accountability and transparency in delivering a safeguarding response	The customer is clear about the roles and responsibilities of all those involved in the solution to the problem

In all adult safeguarding work, all colleagues working with the person at risk must take a **Think Family** approach and establish whether there are children in the family, and whether checks should be made on children and young people who are part of the same household, irrespective of whether they are dependent

on care either from the adult at risk or the person alleged to have caused harm. **Think Family** recognises and promotes the importance of a whole-family approach:

- No wrong door – contact with any service offers an open door into a system of joined-up support. This is based on more coordination between adult and children's services.
- Looking at the whole family – services working with both adults and children take into account family circumstances and responsibilities. For example, an alcohol treatment service combines treatment with parenting classes while supervised childcare is provided for the children.
- Providing support tailored to need – working with families to agree a package of support best suited to their particular situation.
- Building on family strengths – practitioners work in partnerships with families recognising and promoting resilience and helping them to build their capabilities. For example, family group conferencing creates a safe environment where families can identify the reasons for problems, to understand the triggers and the impact of associated behaviours so that solutions can be agreed.

Making Safeguarding Personal (MSP)

Making Safeguarding Personal is a person-centred approach which encourages adults to make their own decisions and be provided with support and information that empowers them to do so. The approach recognises that adults have a general right to independence, choice and self-determination including control over information about themselves. Colleagues should strive to deliver effective safeguarding consistently within these principles.

The aim of Making Safeguarding Personal is to ensure that safeguarding is person-led and outcome-focused. It engages the adult in a conversation about how best to respond to their safeguarding situation in a way that enhances involvement, choice and control; as well as improving their quality of life, wellbeing and safety. It is an approach that sees people as experts in their own lives. We will:

- Work with adults (and their advocates or representatives if they lack capacity) at the beginning to identify the outcomes they want to achieve.
- Review with the adult at the end of the safeguarding activity to what extent their desired outcomes have been achieved.
- Develop a range of clear, well-defined and appropriate responses that focus on supporting the adult to meet their desired outcomes and reduce the risk of recurrence of abuse.
- Record and review the outcomes in a way that can be used to inform practice and account to the relevant Safeguarding Adults Board.

Examples of outcomes people might want are to:

- Feel safer.
- Maintain a key relationship.
- Get new friends.
- Have help to recover.
- Have access to justice or an apology, or to know that disciplinary or other action has been taken.
- Know that this won't happen to anyone else.
- Maintain control over the situation.
- Be involved in making decisions.
- Have exercised choice.
- Be able to protect themselves in the future.
- Know where to get help.
