



TITLE	Safeguarding Adults at Risk
APPLICABLE TO	All employees & volunteers working for Weldmar Hospicecare who come into contact with patients and their families
REVIEW DATE	November 2026
KEYWORDS	Adults safeguarding, abuse, vulnerable adult, harm, mental capacity, adults at risk, protection, whistleblowing
POLICY NO	81v7

Group	Approved Date
CLG	October 25

	Author	Lead Reviewer	Approved by	Authorised by
Name	Jenny Wood	Dr Paul Barker	CGSG	CGC
Title	Patient & Family Support Lead	Associate Specialist		
Date	November 24	October 25	October 25	November 25

Weldmar Hospicecare Policy Equality Impact Assessment (EQIA)

An EQIA should be completed by the author/reviewer for every for new policy and when a policy is being reviewed.

The purpose of the EQIA is to identify if any Weldmar policy could have any negative or unfavourable impact on certain groups of individuals known to have protected characteristics, as stated in the Equality Act 2010.

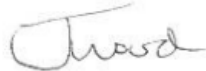
For any help in completing this assessment please contact People Services

Name, number and version of the Policy	Safeguarding Adults at Risk
Aims and objectives of the Policy:	This policy aims to ensure that adults at risk are protected from harm and abuse, and that all staff and volunteers working within Weldmar Hospicecare apply a robust approach to the recognition of, and response to abuse.
Who is the policy intended for:	All patient facing staff and volunteers.
Date of Assessment:	21/10/2025
Name and Job Title of assessor:	Jenny Wood – Patient & Family Support Lead

Stage 1 Initial Assessment

Consider how this policy could have a potential impact on individuals who have one or more of the nine protected characteristics as stated in the Equality Act 2010.
Please tick all that apply.

Protected Group	Summary of impact	Negative Impact	Neutral Impact	Positive Impact
Age		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Gender reassignment		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Marriage and Civil Partnership		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Pregnancy and Maternity		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Disability	This policy aims to ensure the protection of vulnerable adults, including people who have a disability. Consequently, this policy has a positive impact on this group of people.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Race		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Religion of Belief		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sex		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sexual Orientation		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>What evidence or information is there to support your decision? E.g., have you consulted with other people to assess any possible impact on protected groups or referred to other sources?</i>				
What's next? Go on to complete Stage 2 if you identify any negative impact. If only positive or neutral are ticked then please set a date below for a further initial screening when the policy is reviewed.				
Stage 2 Asses the level of risk and Mitigation				
Please list the impacts, and who is affected and assess any risk of the impact using the matrix in the Policy Process.				
What is the impact and to whom	Likelihood X	Severity =	Risk	Any Proposed changes to the policy and how this has reduced the risk
<i>Please add more rows if required</i>				
How will you monitor changes to the policy?				
If any impacts negative remain please provide an explanation				
Date of review for this EQIA		November 2026		
Signature				

Please forward a copy of this form/policy to People Services.

1. Aims of the Policy

This policy aims to ensure that adults at risk are protected from harm and abuse, and that all staff and volunteers working within Weldmar Hospicecare apply a robust approach to the recognition of, and response to abuse.

Safeguarding means protecting a person's right to live in safety, free from abuse and neglect.

Weldmar Hospicecare believes that it is the responsibility of all staff and volunteers to ensure the protection of, and to promote the safety and wellbeing of adults accessing our services.

This policy clarifies the accountability and responsibility of staff and volunteers, to ensure appropriate action is taken when abuse is identified or suspected. We acknowledge that not all staff and volunteers will have direct contact with adults within their roles, but believe it is vitally important that all staff and volunteers are alert to different forms of abuse, and are able to take appropriate action to prevent abuse occurring, and when reporting concern

Weldmar Hospicecare believes that:

- All adults have the right to live their lives free from violence, fear and harm.
- All adults have the right to live independent lives based on self-determination and personal choice.
- All adults have the right to independence, which involves a degree of risk.
- All adults who require our services have the right to care with dignity
- All adults have a right to be valued as individuals and not to be discriminated against on the basis of their race, culture, gender, age, disability, religion or sexual orientation.

2. Glossary/Abbreviations

DSL	Designated Safeguarding Lead(s)
PREVENT	Safeguarding people and communities from the threat of terrorism and violent extremism
CQC	Care Quality Commission
CGSG	Clinical Governance Steering Group
POVA	Protection of Vulnerable Adults
MCA	Mental Capacity Act
MHA	Mental Health Act

3. Policy Applicable to

All employees of Weldmar Hospicecare.

All volunteers and other non-paid staff members (eg, students on practice experience, agency staff).

All Trustees of Weldmar Hospicecare.

4. Policy

4.1 Definitions

What do we mean by the term “Safeguarding”?

Safeguarding means protecting an adult’s right to live in safety, free from harm and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of harm and neglect, while at the same time making sure that the adult’s wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances.

Who is classed as an “adult at risk”

Anyone over the age of 18, who:

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

Definitions of abuse

The Care Act (2014) statutory guidance lists 10 types of abuse.

These are:

- Physical
- Domestic
- Sexual
- Psychological
- Financial
- Modern slavery

- Discriminatory
- Organisational
- Neglect and acts of omission
- Self-neglect

Appendix A provides more detail on the ten categories of abuse as defined by the Care Act (2014), and explores additional categories to consider.

The Care Act (2014) also states that local authorities should not limit their view of what constitutes abuse or neglect to those categories mentioned above, or the different circumstances in which they can take place.

Principles of Adult Safeguarding

The Care Act (2014) outlines 6 principles which underpin all Safeguarding work:

Empowerment

People being supported and encouraged to make their own decisions and informed consent.

Prevention

It is better to take action before harm occurs.

Proportionality

The least intrusive response appropriate to the risk presented.

Protection

Support and representation for those in greatest need.

Partnership

Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.

Accountability

Accountability and transparency in delivering safeguarding.

4.2 Responding to and reporting abuse and neglect

In some cases, an adult may choose to disclose to a member of staff or volunteer that they are experiencing abuse. In these situations, the member of staff or volunteer will document what has been said, using the adult's own words, as soon as possible. The member of staff or volunteer will reassure the adult, and involve them in next steps.

In other situations, a staff member or volunteer may have concerns about an adult, but the adult themselves has not discussed this with them directly.

In all cases:

- If a member of staff has concerns that an adult may be at risk of abuse, they will first ensure the immediate safety of the adult. If the adult is at immediate risk of harm or abuse, the member of staff or volunteer should contact the police.
- If the adult is not in immediate danger, the member of staff or volunteer should discuss their concerns with their line manager, or most senior person on duty. They can also contact Weldmar Hospicecare's Safeguarding Leads, Jenny Wood or Dr Paul Barker for advice and support. In the event that the Safeguarding Leads are not available for immediate support, the member of staff or volunteer can contact one of the Level 3 trained members of staff, or contact the Dorset Adult Safeguarding Team directly.
- A Vantage Safeguarding report needs to be raised, and concerns noted on the patient's electronic record on SystmOne using the safeguarding template.

It is important to understand the circumstances of each individual situation, including the wider context such as whether others may be at risk of abuse.

It is important to understand that abuse or neglect may be unintentional, and may be the result of carer strain and fatigue, for example. It is still vital to take action to safeguard the adult, but in situations such as these, an appropriate response may be a support package for the carer.

In all situations, it is important to consider whether concerns raised need to be referred to the Adult Safeguarding Team, and/or reported to the police.

4.3 Consent

Weldmar Hospicecare believes that effective Safeguarding should be person led and outcome focussed. "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.

In adult safeguarding, it is essential that there is consideration to whether the adult is capable of giving consent in all aspects of their lives. If they are able to consent to the sharing of safeguarding information, their consent should be sought.

Adults may not wish to give their consent to the sharing of safeguarding information for a number of reasons. These may include:

- they may be feeling influenced, coerced or intimidated by another person.
- they may be fearful of reprisals.
- they may be fearful of losing control.
- they may fear that the relationship with the abuser will be damaged.

In these circumstances, the adult should be reassured and given appropriate support, and encouraged to consider why the sharing of safeguarding information is important. If the adult continues to refuse intervention to support them with a safeguarding concern, or requests that information is not shared, in general, their wishes should be respected. However, there are some circumstances where staff can reasonably override such a decision, including:

- Where there is an emergency or life-threatening situation.
- Where it is in the public interest (where not acting may put other adults or children at risk).
- If there is a duty to inform a particular agency (for example, the police, if we suspect a crime has been committed).
- If the risk is unreasonably high.
- If staff are implicated.
- Where there is a concern that the adult lacks the capacity to make an informed decision. This must be thoroughly explored in line with the Mental Capacity Act (2005).

Staff and volunteers should seek guidance and support from their line managers and/or the DSLs when considering whether a situation requires the overriding of consent. This decision should be fully documented on the patient record on SystemOne.

4.4 Mental Capacity Act and Safeguarding

The presumption is that adults have the capacity to make informed choices about their own safety and how they live their lives. Issues of mental capacity and the ability to give informed consent are central to decisions and actions in Safeguarding Adults.

All interventions need to take into account the ability of adults to make informed choices about the way they want to live and the risks they want to take. This includes their ability:

- To understand the implications of their situation.
- To take action for themselves to prevent harm.
- To participate to the fullest extent possible in decision making about interventions.

The Mental Capacity Act (2005) provides a statutory framework to empower and protect people who may lack capacity to make decisions for themselves and establishes a framework for making decisions on their behalf. This applies whether the decisions are life-changing events or everyday matters.

All decisions taken in the Safeguarding Adults process must comply with the Mental Capacity Act (2005).

4.5 Prevent - Safeguarding people and communities from the threat of terrorism and violent extremism.

The main aim of Prevent is to stop people from becoming terrorists or supporting violent extremism.

At the heart of Prevent is safeguarding children and adults. Providing early intervention to protect and divert people away from being drawn into terrorist activity is crucial.

Prevent addresses all forms of extremism, but continues to ensure resources and effort are allocated on the basis of threats to our national security.

Any individuals who are identified as being vulnerable to radicalisation are referred to a multi-agency Channel Panel. This ensures the appropriate interventions are put in place to protect the individual. Channel is a multi-agency safeguarding programme run in every local authority in England and Wales. It works to support vulnerable people from being drawn into terrorism. It provides a range of support such as mentoring, counselling, assistance with employment etc.

Making a referral to Prevent

Every member of staff may identify possible PREVENT concerns through the course of their work; this could come from written reports, complaints, incidents or direct observation and could include concerns identified relating to Weldmar colleagues, and members of staff within partner organisations, or a patient or family member receiving support. Any concerns should be escalated as soon as possible to the police via dorsetprevent@dorset.pnn.police.uk

If you believe that someone is at risk of radicalisation you can help them obtain support and prevent them becoming involved in terrorism by raising your concerns and making a referral. You may have concerns about a potentially vulnerable institution that is being exploited for the purpose of promoting an extremist ideology. In either case, a dedicated team is ready to help.

For referrals in Dorset: email dorsetprevent@dorset.pnn.police.uk

You can also call the national police Prevent advice line [0800 011 3764](tel:08000113764)

4.6 Whistleblowing & Speaking Up

In some cases, it may not be appropriate to share concerns of harm with your line manager (e.g. where he or she is the alleged perpetrator, or your concerns are not taken seriously). In such circumstances, follow Weldmar Hospicecare's Whistleblowing

Policy & Procedure. The Public Interest Disclosure Act 1998 offers some protection for whistleblowers.

Safeguarding is complex and it is important to promote a culture where staff are able to raise concerns without fear, and that there is an understanding of the need for staff support to achieve effective outcomes for vulnerable individuals.

Concerns can also be discussed with Weldmar's Freedom to Speak Up Guardians, Nikki Grattan (Clinical Admin Manager) or Davina Smith (Weldmar Hospicecare Trustee).

4.7 Training Levels

All employees and volunteers will receive Safeguarding Adults at Risk training to Level 1 (via the Weldmar Learning Hub) annually.

All patient/family member facing employees and volunteers will receive Safeguarding Adults at Risk Level 2, face to face internal training, every three years.

Clinical department leads ~~and other assigned individuals from across clinical departments~~ will receive Safeguarding Adults at Risk Level 3, face to face external training, every three years. The names of the level three trained staff can be found on the intranet <https://weldmarhospicecare.sharepoint.com/SitePages/Safeguardddig.aspx>

Weldmar Hospicecare's Designated Safeguarding Leads will receive Safeguarding Adults at Risk Level 4, face to face external training, every three years.

5. Roles and Responsibilities

Weldmar's Designated Safeguarding Leads – Jenny Wood (Patient & Family Support Lead) and Dr Paul Barker (Associate Specialist in Palliative Medicine) will:

- Keep updated with legislative and local/national policy changes or developments in relation to adult safeguarding.
- Deliver Safeguarding Adults & Children (level 2) face to face training to all patient facing staff and volunteers, liaising with the Education & Development team to ensure staff and volunteers receive this training every three years.
- Liaise with Line Managers to ensure all employees for whom they are accountable understand adult safeguarding issues and their responsibilities within.
- Contact the local authority Adult Safeguarding team in order to discuss any uncertainty regarding the raising of a safeguarding alert or making a direct referral in relation to adult safeguarding issues.
- Refer to the Adult Safeguarding team without delay, all concerns regarding the safety and welfare of an adult at risk.

- Request the Registered Manager informs the CQC of any incidents of harm or abuse which have occurred while an individual has been accessing Weldmar Hospicecare services.
- To keep a log of all safeguarding concerns raised, to be able to identify any trends, and share learning outcomes.
- To provide data when requested, detailing the number of Safeguarding concerns raised within the organisation, and the number of those that went on to become referrals to the local authority.

Learning & Development Advisor:

- ensure all new staff and volunteers complete the Safeguarding Adults (level 1) training on the Weldmar Learning Hub.
- ensure all new staff and volunteers who will likely come into contact with people accessing our services, attend face to face Safeguarding Adults & Children (level 2) training.
- ensure all existing staff and volunteers who will likely come into contact with people accessing our services, attend face to face Safeguarding Adults & Children (level 2) training every three years.

All Line Managers will:

- ensure the staff and volunteers under their line management attend mandatory training sessions provided, and are released from their duties in order to do so.
- use supervision and appraisal meetings to ensure all employees have attended and understood the training offered in relation to Adult Safeguarding.
- inform the DSLs of further development / training needs of staff and volunteers under their line management with regard to Adult Safeguarding.
- ensure that staff and volunteers under their line management understand issues of consent, capacity and confidentiality and recognise the principle of sharing information on a 'need to know basis' only.
- ensure that all concerns brought to their attention are responded to in line with this policy.

People Services will:

- ensure that all relevant post holders new to the organisation are checked through Disclosure and Barring Service (DBS), in line with Weldmar Hospicecare employment policies.
- ensure where staff members or volunteers have been implicated as alleged perpetrators of harm that correct disciplinary procedures and reporting under Protection of Vulnerable Adult (POVA) (Care Standards Act 2000) have been followed.

All staff and Volunteers will:

- Ensure that they attend training provided.
- Ensure they read this Policy on Safeguarding Adults at Risk.
- Ensure they know what to do if they have any concerns relating to an adult at risk.
- Discuss with their line manager or a senior manager if they do not understand what is expected of them.
- Ensure that if they have cause to feel any suspicion or concern about an adult in their care, that they raise this concern with their line manager or the most senior member of staff on duty/or the Designated Safeguarding Lead.
- In liaison with the DSL, a senior manager or most senior clinical lead, undertake a dynamic risk assessment to identify the possibility of immediate harm being caused to an adult and to contact the local authority Adult Safeguarding Team and/or the police without delay if an immediate risk to safety is identified.
- Not undertake an investigation. All incidents of suspected or actual abuse of an adult **must** be reported to the local authority Adult Safeguarding Team to investigate as they hold the Lead Responsibility for doing so. This will be with the agreement of the most senior manager on duty and with the full consent of the adult concerned. Where an adult is assessed as not having capacity under the MHA or MCA to give consent to refer, or where it is felt (by the most senior/clinical members of staff available) that the level of actual or potential risk outweighs the adult's right to confidentiality, staff will make a referral to the local authority Adult Safeguarding Team in accordance with Duty of Care Principles and Professional Codes of Practice.
- Keep factual notes of the concern, identifying all that has happened, including dates, times and what was said by whom.

6. Dissemination, Implementation & Monitoring Compliance

All staff have access to Weldmar Hospicecare's policies and procedures, available on the intranet.

This policy is reviewed annually and used as a reference tool by Weldmar Hospicecare staff and volunteers.

7. Related Policies

Whistleblowing Policy

Mental Capacity (including DoLS and advance statements)

Criminal Records DBS Checks and Recruitment Policy

Duty of Candour and Being Open Policy

Safeguarding Children Policy

Vantage Incident & Accident Reporting Policy

8. Related Information

The Care Act 2014
Action on Elder Abuse study (2004) [Hidden Voices: Older Peoples Experience of Abuse](#)
Mental Capacity Act 2005
Equality Act 2010
Sexual Offences Act 2003
Domestic Violence, Crime and Victims Act 2004
Serious Crimes Act 2015
Counter-Terrorism and Security Act 2015 (PREVENT)
Safeguarding Vulnerable Groups Act 2006
Mental Health Act 1983
NHS Act 2006
Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
NHS Dorset Integrated Care Board
Safeguarding Adults Procedures: *Multi Agency Procedures for the Protection of Adults with Care and Support Needs in Bournemouth, Christchurch, Poole and Dorset*

Local Contacts

In an emergency:

If a vulnerable adult is potentially seriously injured: Ring 999

If someone is threatening to harm the vulnerable adult: Ring 999

Dorset County Council Adult Safeguarding Team: 01305 221016
Out of Hours 01305 858250
Email adultaccess@dorsetcouncil.gov.uk

Dorset Prevent dorsetprevent@dorset.pnn.police.uk 0800 011 3764

9. References

Care Act 2014

The Data Protection Act 2018

Care Standards Act 2000

www.gov.uk/government/organisations/disclosure-and-barring-service

Public Interest Disclosure Act 1998

www.elderabuse.org.uk

Prevent duty guidance: England & Wales (2023)

Dorsetcouncil.gov.uk

10. Appendix

Appendix A: Categories of Abuse

Appendix B: Flowchart for Adult Safeguarding Concerns

Appendix A

Categories of Abuse

The Care Act (2014) identifies ten main categories of adult abuse. They are:

Physical abuse: Including hitting, slapping, punching, burning, misuse of medication, inappropriate restraint.

Sexual abuse: Including rape, indecent assault, inappropriate touching, exposure to pornographic material.

Psychological or emotional abuse: Including belittling, name calling, threats of harm, intimidation, isolation, coercive control.

Financial or material abuse: Including stealing, selling assets, fraud, misuse or misappropriation of property, possessions or benefits, internet scamming.

Discriminatory abuse: Including racist, sexist, that based on a person's disability and other forms of harassment, slurs, or similar treatment.

Organisational abuse: Including regimented routines and cultures, unsafe practices, lack of person-centred care or treatment.

Domestic Abuse: Any incident of threatening behaviour, violence or abuse between adults who are or have been intimate partners or family members, regardless of gender or sexuality. (This can include Psychological, Physical, Sexual, Financial, Emotional abuse and so-called 'honour-based' violence).

Modern slavery: Including slavery, human trafficking, forced labour, sexual exploitation, domestic servitude.

Neglect and acts of omission: Including withholding the necessities of life such as medication, food, or warmth, ignoring medical or physical care needs.

Self-neglect: Any failure or refusal to take care of a person's own basic needs. (This can include neglecting to care for their own personal hygiene, health or surroundings and can include a wide range of behaviours including hoarding).

This list is not exhaustive, and you may find that specific cases of abuse relate more specifically to the following additional categories:

Human Trafficking: The unlawful act of transporting or coercing people to benefit from their work or service, typically in the form of forced labour or sexual exploitation.

Internet or Cyber Bullying: Any type of abuse that happens on the internet, it can happen across any device that is connected to the web, and it can happen anywhere.

Cuckooing: Where people (usually drug dealers/gangs) take over a person's home and use the property for some form of exploitation.

Self-Harm: The act of an individual intentionally damaging or injuring their own body, which could involve self-injury, self-neglect, risk taking behaviour or be trauma/abuse related.

County Lines: A form of criminal exploitation where urban gangs persuade, coerce or force children, young people and vulnerable adults to store drugs and money and/or transport them to suburban areas, market towns and coastal towns.

Forced marriage: A forced marriage is where one or both people do not (or in cases of people with learning disabilities) possibly cannot consent to the marriage and pressure or abuse is used.

Exploitation by radicalisation: Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs.

Sexual exploitation: A form of sexual abuse that involves someone taking advantage of an adult, sexually, for their own benefit through threats, bribes, and violence.

APPENDIX B

Flowchart for Adult Safeguarding Concerns

If you have a suspicion or concern that an adult with care and support needs is at risk of, or experiencing harm or abuse, and as a result of their care and support needs is unable to protect themselves from either the risk of, or the experience of harm or neglect, follow these steps:

1: Protect the individual

If the individual at immediate risk of harm or abuse, contact the emergency services without delay, on 999.



2: Discuss your concerns

with your Line Manager or senior person on duty and/or contact Weldmar Hospicecare's Designated Safeguarding Leads for support
Jenny Wood – Patient & Family Support Lead
Dr Paul Barker – Associate Specialist
Both on 01305 215300

You can also contact any of the level three trained staff for guidance. They can be found on the Safeguarding page on Weldmar's intranet, here

<https://weldmarhospicecare.sharepoint.com/SitePages/Safeguarddig.aspx>



3: Obtain the individual's consent to share safeguarding information

Wherever possible, it is best practice to gain the consent of the individual concerned, to share your safeguarding concerns with the local authority safeguarding team.

Please see section 4.3 of this policy for clarity on what to do when an individual does not give their consent to share information.



4: To make an Adult Safeguarding enquiry or to report a concern, contact the Adult Safeguarding Team on 01305 221016 (out of hours: 01305 858250)

Or

Submit a referral online www.dorsetcouncil.gov.uk/w/safeguarding-portal



5: In all cases, complete a Vantage safeguarding report and ensure the concerns and actions are recorded on the patient record on SystemOne.