



SEEAWA Vulnerable Adult Safeguarding Policy

Southeast & East Asian Women's Association (SEEAWA) • CIO No. 1203182

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1. Purpose & Scope

This Policy sets out how **SEEAWA** safeguards adults at risk who engage with our services. It applies to **all trustees, staff, sessional workers, practitioners and volunteers, and covers any activity delivered by SEEAWA or on its behalf (including online, in-person, and off-site trips).**

Safeguarding adults means protecting an adult's right to live in safety, free from abuse and neglect, while promoting wellbeing and respecting wishes and choices (Making Safeguarding Personal).

2. Legal & Policy Framework (as at 4 October 2025)

This Policy aligns with current law and guidance in England, including:

- Care Act 2014 & Care and Support Statutory Guidance (adult safeguarding duties; s.42 enquiries; SABs; SARs).
- Mental Capacity Act 2005 & Code of Practice (capacity, consent, best interests; least-restrictive).
- Domestic Abuse Act 2021 (definition includes coercive control and economic abuse; tech-enabled abuse).
- Modern Slavery Act 2015 (slavery, servitude, forced/compulsory labour, human trafficking).
- Safeguarding Vulnerable Groups Act 2006 (DBS barring regime).
- Equality Act 2010 (protected characteristics; reasonable adjustments).
- UK GDPR & Data Protection Act 2018; Data (Use and Access) Act 2025; Caldicott/ICO guidance on safeguarding sharing.

- Prevent duty (where relevant) and local multi-agency procedures.

We will monitor updates

- Track DHSC statutory guidance, DBS/HO updates and local safeguarding adults board (SAB) procedures.
- Review sooner if material legal or regulatory changes occur.

3. Principles (Care Act) & Approach

We work to the six principles of adult safeguarding under the Care Act 2014: **Empowerment, Prevention, Proportionality, Protection, Partnership and Accountability**

EMPOWERMENT

Meaning: Start from the person's wishes and outcomes. Support them to decide; get **informed consent** wherever possible.

How to do it:

- Ask: "What would you like to happen?" "What feels safest for you right now?"
- Give options in **plain language**; offer interpreters/advocates.
- Explain risks/benefits and any limits to confidentiality.
- Record consent (or reasons if you can't seek consent).

Example: A survivor declines a police report today but agrees to safety planning and a later check-in. You record this and respect the choice.

PREVENTION

Meaning: Reduce the chance of harm before it happens.

How to do it:

- Do brief **risk assessments** at intake and when things change.
- Share **early help** options (benefits advice, housing, IDVA/ISVA, digital safety tips).
- Train staff/volunteers; set & share **ground rules** for groups.



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- o Spot patterns (missed appointments, controlling partner present).
Example: Before a workshop, you message attendees with privacy tips (e.g., turning off location sharing, safe email setup).

PROPORTIONALITY

Meaning: Respond with the **least intrusive** action that still manages risk.

How to do it:

- o Start with the **lightest** effective step (e.g., safety planning) and scale up only if risk persists.
- o Share **minimum necessary** information with the right agency.
- o If sharing without consent (public-interest/serious harm), **document your legal basis** and rationale.
Example: You don't copy the whole case file to a partner agency—only the facts needed for safety.

PROTECTION

Meaning: Prioritise support for people in **greatest need** or at **immediate risk**.

How to do it:

- o In emergencies, call **999**; consider refuge/safe accommodation.
- o Make **s.42** adult-safeguarding referrals to the local authority when criteria are met.
- o Use **specialist support** (IDVA/ISVA, modern slavery helpline, mental health crisis).
- o Offer practical measures: emergency phones, code words, safe transport.
Example: A woman reports escalating threats. You complete a **MARAC** referral and arrange an urgent IDVA call-back. MARAC Referral Sheet
https://docs.google.com/document/d/1yu5KvvYQIa71lpNedLA2YYGh0xTDYJOv/edit?usp=drive_link&oid=116893824943029779332&rtpof=true&sd=true

PARTNERSHIP

Meaning: Work with local services; communities play a role in preventing and reporting abuse.

How to do it:

- Know your **SAB** procedures; consult the **DASM** for PiPoT cases.
 - **SAB — Safeguarding Adults Board**
The multi-agency board in each local authority area (Care Act 2014). It sets local **adult-safeguarding procedures**, runs **Safeguarding Adult Reviews (SARs)**, and issues practice guidance/training.
What to do: Download your borough's SAB procedures and contacts; follow them for referrals/escalation.
 - **DASM — Designated Adult Safeguarding Officer (DSO)**
A senior local-authority role that oversees **allegations/concerns about People in a Position of Trust (PiPoT)** and advises organisations on next steps (risk management, information-sharing, when to refer to DBS, etc.).
What to do: If a concern involves a staff member/volunteer/contractor, **consult the DASM** before investigating internally.
- Build links with **Adult Social Care/MASH, Police VPU, NHS, housing, DBS.**
- Warm handovers: agree who does what; use **shared safety plans.**
- Share translated resources with community groups/faith leaders.
Example: After a concern in a community class, you brief the organiser on signs of abuse and how to escalate next time.

ACCOUNTABILITY

Meaning: Be transparent; show how decisions were made and by whom.

How to do it:

- Keep timely, factual **records** (who/what/when/where; decisions; consent; capacity).
- Use **supervision** and case audits; follow your **retention schedule.**
- Report serious incidents; make **DBS referrals** when required.

- Share “**lessons learned**” with the team; update training and procedures.
Example: A near-miss leads to a short learning note and a tweak to your sign-in process for workshops.

4. Definitions (Adult at Risk & Types of Abuse)

An “**adult at risk**” is a person aged 18+ who: (a) has needs for care and support; (b) is experiencing, or at risk of, abuse or neglect; and (c) because of those needs is unable to protect themselves from abuse or neglect (Care Act s.42).

Abuse may be a single incident or repeated acts; intentional or unintentional; and can occur in any relationship or setting, including online. Common forms include:

- Physical, Sexual, Psychological/Emotional, Neglect, Financial/Material, Discriminatory, Organisational/Institutional.
- Domestic abuse (incl. coercive/controlling behaviour and economic abuse).
- Self-neglect (including hoarding).
- Exploitation and modern slavery.
- Hate incidents/crime and discriminatory abuse.
- Tech-enabled abuse (stalking, doxxing, image-based abuse).

5. Roles & Responsibilities

Board of Trustees — provide oversight; approve this Policy; ensure resources for implementation and training.

Trustee Safeguarding Champion — provides governance challenge and assurance that adult safeguarding is embedded.

Designated Safeguarding Officer (Adults) — DSO: Sarah Reid — Advocacy and Policy Manager — first point of contact for adult safeguarding; triage, advice, referrals; maintains incident log; oversees training and annual review.

Managers & Leads — ensure compliance in their areas; complete risk assessments; support staff/volunteers; ensure contractors adhere to this Policy.

All staff & volunteers — follow the Policy and code of conduct; complete training; report concerns immediately.

6. Safer Recruitment & Management

- Role descriptions/volunteer profiles include safeguarding responsibilities and conduct standards.
- Pre-engagement checks: references; identity/address; right-to-work; DBS where applicable (and update service).
- Induction within 6 months; supervision for staff (at least every 8 weeks) and regular support for volunteers.
- Ongoing, role-appropriate training; appraisal and escalation routes for concerns about conduct or performance.

7. Safe Practice (Activities, Trips, Images)

- Plan activities with appropriate ratios/supervision and qualified practitioners; complete risk assessments (including travel/premises/equipment).
- Set and enforce ground rules for behaviour; record and act on breaches.
- Images/recordings only with informed consent and for stated purposes; store securely; follow retention rules.
- Un-checked persons must not have unsupervised contact with adults at risk.

8. Mental Capacity, Consent & Information-Sharing

Capacity & consent (MCA 2005)

- Presume capacity; help people decide; an unwise decision does not equal lack of capacity.
- If a person lacks capacity for a specific decision, act in their best interests using the least restrictive option.

Where an adult with capacity declines help but there is risk to others or a public-interest concern (serious crime; risk to children or other adults), **we may share information without consent, recording our rationale.**

- Share on a 'need-to-know' basis; record what, why, with whom and outcomes.
- Follow Caldicott principles and local SAB information-sharing protocols.

The 8 Caldicott Principles

1. **Justify the purpose** — Be clear *why* you need the information.
 2. **Only use it when necessary** — Don't use identifiable data if you can avoid it.
 3. **Use the minimum necessary** — Share the smallest amount possible.
 4. **Need-to-know access** — Only the right people should see it.
 5. **Everyone understands responsibilities** — Train staff/volunteers.
 6. **Follow the law** — UK GDPR, DPA 2018, etc.
 7. **Duty to share (when needed)** — Sharing to protect someone can be *as important* as keeping data confidential.
 8. **Be transparent** — Inform people how their information is used.
- Apply the Retention Schedule to safeguarding records; restrict access to DDSO/need-to-know.

9. Reporting Concerns & Referrals (Adults)

If you are worried about an adult at risk: report immediately to the DDSO (or deputy). In an emergency, call 999.

- Listen, reassure, avoid leading questions; **do not promise confidentiality.**
- **Preserve evidence:** facts, dates/times, what was seen/said; avoid investigating.
- Log the concern on the same day; DDSO decides actions and referrals (Adult Social Care/Safeguarding Adults Team under Care Act s.42).
- If you disagree with inaction, you may make a direct referral to the local authority.

Urgent contacts (Tower Hamlets — VERIFY locally)

- Adult Social Care / MASH (Mon–Fri, 9–5): 0300 303 6070 · enquiry@towerhamletsconnect.org
- Out of hours Emergency Duty Team: 020 7364 4079
- Police emergency: 999 · Non-emergency: 101

10. Allegations about People in a Position of Trust (PiPoT)

Where a safeguarding concern involves someone who works with adults at risk (paid or unpaid), follow the local ****PiPoT**** framework. **The DSO/manager will consult the Local Authority's ****Designated Adult Safeguarding Manager (DASM)**** / Safeguarding Adults Team.**

- Do not investigate internally without advice from the DASM/Adult Safeguarding Team.
- Consider **suspension/redeployment** and immediate risk management as advised.
- Where threshold is met, make a ****DBS referral**** (if removed from regulated activity for harm/risk of harm).

11. Records, Confidentiality & Retention

- Keep safeguarding records **accurate, timely and secure**; separate from HR files; restricted access.
- Record decisions and rationales (including capacity/consent and public-interest sharing).
- Follow the Retention Schedule; securely dispose at end of retention period.

12. Whistleblowing & Complaints

SEEAWA encourages staff/volunteers to raise concerns in **good faith about malpractice, unsafe practice or safeguarding failures**. Use our Whistleblowing and Complaints Policies. External routes include the local authority, DBS and relevant regulators/helplines.

13. Governance & Review

This Policy is prepared by the Operations & Systems Manager and reviewed by the DDSO (Adults). It is reviewed annually by the Trustee Safeguarding Champion and approved by the Board, or sooner if law/guidance changes.

Annex A — Quick Reference (What to do today)

- Immediate danger? Call 999.
- Report to DSO — Sarah Reid (Advocacy and Policy Manager): SarahReid@seeawa.org.uk ·
- Listen, reassure, avoid leading questions; do not promise confidentiality.
- Record facts (who/what/when/where); preserve evidence; do not forward illegal material.
- DDSO triage → Adult Social Care/Safeguarding Adults Team referral if Care Act s.42 criteria met.
- Consider PiPoT/DASM if the concern involves a worker/volunteer; consider DBS referral duty.
- Follow-up: support the adult; agree next steps; log outcomes; update risk assessment.

Annex B — Detailed Definitions of Abuse

- Physical — assault, misuse of medication, restraint, inappropriate sanctions.
- Sexual — any sexual activity without consent; coercion; exploitation; exposure; online grooming.
- Psychological/Emotional — threats, humiliation, controlling/coercive behaviour, isolation.
- Neglect/Self-neglect — failure to meet basic needs; hoarding.
- Financial/Material — theft, fraud, coercion around money, property or benefits.
- Discriminatory — abuse based on protected characteristics; hate incidents/crime.
- Organisational — poor practice/abusive regimes in services; misuse of power.
- Domestic Abuse — including economic abuse and tech-enabled control.



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- Modern Slavery/Exploitation — slavery, servitude, forced labour, trafficking.

Annex C — Key Contacts by Borough (Adult Social Care / MASH / DASM / PiPoT)

Use this table to enter and maintain local contact points. Replace placeholders with official details and review each quarter.

Borough	Adult Social Care / MASH (Phone)	Adult Social Care / MASH (Email/Web)	Out of Hours	DASM / PiPoT email	Safeguarding Adults Board (SAB) website
Tower Hamlets (VERIFY)	0300 303 6070	enquiry@towerhamletsconnect.org	020 7364 4079		

Annex D — PiPoT Flowchart (One-page)

Use this at-a-glance guide when a concern involves someone working with adults at risk (paid or unpaid).

- 1) Concern raised → Is there **immediate risk**? If yes, call **999** and take emergency safeguarding steps.
- 2) **Report to DSO** (Adults) immediately; preserve evidence; do not investigate internally.
- 3) DSO/Manager screens for ****PiPoT**** (does the concern relate to a person in a position of trust?).
- 4) If yes → ****Consult DASM / Adult Safeguarding Team**** (local authority) for advice on next steps.
- 5) Risk management as advised (temporary redeployment/suspension, supervision adjustments).
- 6) **Information-sharing** with partners on a need-to-know basis; record legal basis and rationale.

- 7) If threshold met → **DBS referral** duty (if removed from regulated activity for harm/risk of harm).
- 8) **Record decisions and outcomes**; agree communications; support the person(s) affected.
- 9) **Close and learn**: update risk assessments, training and procedures as needed.

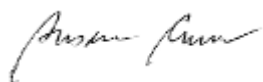
Annex E — MCA Capacity & Consent Checklist (One-page)

Apply this for decisions about information-sharing, consent to support, and safeguarding actions.

- Five principles (MCA 2005): presume capacity; help decision-making; unwise ≠ lack of capacity; best interests if no capacity; least restrictive option.
- Two-stage test:
 - (1) Is there an impairment of mind/brain?
 - (2) Does it mean they **cannot** understand, retain, weigh, or communicate this specific decision **now**?
- Support first: use simple language; interpreter/advocate; different time of day; written/visual aids.
- If **has capacity** but refuses help: respect choice unless there's a legal/public-interest basis to share (e.g., serious crime; risk to others). **Record your rationale.**
- If **lacks capacity** for this decision: act in **best interests**; consider the person's wishes, feelings, beliefs, and less-restrictive alternatives; involve family/advocate where appropriate.
- Record: decision, capacity assessment, consent/basis for sharing, people involved, and outcomes.

Signed by Trustee Champion

Trustee





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