



<b>Title</b>	<b>Adult Support and Protection Policy</b>
<b>Purpose</b>	The purpose of this policy is to ensure that all Maryhill Housing Association staff and Board Members are able to recognise when an adult may be at risk of harm and are aware of what they should do if they believe an adult is or may be at risk.
<b>Scope</b>	<p>Board has responsibility for approving, reviewing and monitoring the outcomes of this policy.</p> <p>The Director of Operations holds the lead responsibility for this policy with responsibility for the implementation delegated to the Head of Housing.</p> <p>This policy applies to all Board and Committee members, members of staff whether employees of MHA, freelance, casual, or temporary agency staff irrespective of grade, position or length of service responsible for the management of properties within the Association.</p>
<b>Definitions</b>	<p>The Adult Support and Protection (Scotland) Act 2007 defines Adults at Risk as adults aged 16 years or over, who meet the following three criteria:</p> <ul style="list-style-type: none"> <li>• Are unable to safeguard their own well-being, property, rights or other interests</li> <li>• Are at risk of harm; and</li> <li>• Because they are affected by disability, mental disorder, illness or physical or mental infirmity, are more vulnerable to being harmed than adults who are not so affected</li> </ul> <p>All three criteria must to be satisfied before an adult is considered at risk under this legislation. If, for example, the first two criteria are met but the third is not, action such as a referral to the police or some other action may be appropriate but a referral under the Act would not be required.</p> <p>The Act applies to adults who are not covered by either the Adults with Incapacity (Scotland) Act 2000 or the Mental Health (Care and Treatment) (Scotland) Act 2003</p> <p><b>Types of Harm</b></p> <p>The Adult Support and Protection (Scotland Act) 2007 identifies five main types of harm</p>

	<ul style="list-style-type: none"> <li>• Financial harm</li> <li>• Physical harm</li> <li>• Psychological harm</li> <li>• Sexual harm</li> <li>• Neglect</li> </ul> <p>This can include (but is not restricted to) the following;</p> <ul style="list-style-type: none"> <li>• Mental or physical harm</li> <li>• Bullying</li> <li>• Using the adult's property for parties, drinking, drug dealing (where the vulnerable person is unable to assert themselves or stop the activity)</li> <li>• Self-neglect – such as not washing, eating or taking medication</li> <li>• Grooming – of a vulnerable adult</li> <li>• Neglect of the property – leading to sub-standard living conditions</li> <li>• Increased Fire Risk</li> <li>• Other risk to property such as leaving taps running etc.</li> </ul>
<b>Policy Statement</b>	<p>We believe that staff and Board Members have a responsibility to recognise when an adult may be at risk of harm and to act on any concerns they may have.</p> <p>We will make sure that all staff and Board Members understand their role in relation to protecting adults who may be at risk of harm and are competent in recognising and acting on abuse and neglect.</p> <p>We will promote an organisational culture of openness so that staff and Board Members can raise and report their concerns. Reporting a concern may be the first step in ensuring that an adult at risk of harm is protected.</p> <p>All adults whatever their age, culture, ability, gender, religious belief or sexual identity have the right to protection from abuse or neglect.</p> <p><b>Appendix A to the policy details how the principles set out above will be applied.</b></p>
<b>Approval</b>	Board January 2020
<b>Policy Owner</b>	Head of Housing
<b>Review</b>	<p>January 2023</p> <p>The policy may also be reviewed in light of legislation, good practice, or internal structural and process change.</p>

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## **Appendix A**

### **Reporting concerns**

Concerns about an adult who may be at risk of harm can arise in a number of ways, for example an accumulation of concerns, a single significant incident, observation on child/parent interaction, or information from a relative or a member of the public.

#### **In situations where there is immediate danger**

If at any point a member of staff or Board Member believes that the adult in question is in immediate danger of harm, then the police, other emergency services or a medical practitioner must be contacted immediately.

If a member of staff or Board Member is in immediate danger, they must leave the scene and not return until it is safe to do so.

The staff member should inform their line manager immediately. Board Members should inform a member of the Senior Management Team.

#### **If the adult is considered to be at risk of harm but not in immediate danger:**

Members of staff and Board Members must report their concerns as soon as possible on the same working day to their line manager/Senior Management Team member after seeing or hearing something which indicates an adult is at risk of harm.

In such instances, the staff/Board member should, as soon as reasonably practicable, make a note of the following details. This will help to clearly and accurately report what they have seen or heard to their line manager who may use this information when making a referral to the appropriate Social Work team.

- Name, address, approximate age of adult at risk of harm
- Date and time of incident
- Reason for concern in as much detail as possible including location etc
- Any injuries observed
- Details of any witnesses
- Any action already taken
- Any personal safety issues anyone should be aware of

### **Staff/Board Member responsibilities**

#### **Staff/Board Members**

The responsibility of the front- line member of staff/Board Member is solely to report any concerns they may have to their line manager/Senior Management Team Member.

It is not the staff/Board Member's role to investigate the incident in any way and on no account should a member of staff/Board Member confront or question the person they suspect of causing the harm.

Members of staff and Board Members must report any concerns they have to their line manager/Senior Management Team Member at the earliest opportunity on the same working day, providing as much detail as possible as outlined above. If the line manager is unavailable, concerns must be reported to another manager or the second line manager.

### **Line Managers/Senior Management Team Members**

The manager is responsible for reporting details of the incident or concern to the appropriate social work team. Managers should flag any reported incidents to a senior manager and may discuss or seek advice before the referral is made.

This will be done the same working day and a form AP1 (**Appendix B**) will be completed and submitted to the social work team within one working day.

### **Confidentiality and GDPR**

Information provided to us will normally be treated as confidential and will not be passed to a third party without the consent of the subject. However, our privacy statement allows that we may disclose personal information to other agencies under certain circumstances

This includes sharing information for the purposes of law enforcement and the statement allows us to share information with Police Scotland, Local Authority Departments and the Scottish Fire and Rescue Service.

### **The AP1 referral**

The AP1 needs to include the following information.

- The personal details and circumstances of the adult concerned – eg what they looked like, what they said, what the house looked like
- How the situation meets the three criteria for referral
- Why you believe the action is needed?
- Who else has been told?
- What actions have been taken?
- Have the police been notified?

This will be based on the information provided by the front-line officer outlined in section 5.3.2

The referring agency should be issued with a letter of acknowledgement and after enquiries have taken place, a further letter should be sent to the referring agency detailing action take. This should be sent within five working days.

The following three courses of action may be taken by the Social Work Department following receipt of an AP1

- No further enquiries are to be undertaken in line with the Adult Support and Protection (Scotland) Act 2007 and Glasgow City Council Adult Protection Procedures.
- No further enquiries are to be taken in line with the Adult Support and Protection Act (Scotland) 2007, however the local authority will take some action to address the individual's situation and vulnerability
- Further enquiries will be taken in line with the Adult Support and Protection (Scotland) Act 2007 and Glasgow City Council Adult Protection Procedures and if these result in a case conference or further assessment you will be invited to attend.

### **Issues to consider**

It should be noted that research indicates that up to two thirds of incidents of harm take place in the person's home. The role of the housing professional is therefore potentially important in reporting risk of harm.

It is also important to understand that there are many reasons why an adult at risk of harm may not want to tell anyone what is happening. These include;

- Fear of repercussions
- Loneliness
- Love for the person committing the harm
- Embarrassment
- Fear they will not be believed

Before making a referral, managers should consider whether to inform the adult concerned that a referral is being made. In general, it is considered good practice to let the person know what we are intending to do. However, this might prejudice the outcome of any subsequent social work or police investigation.

This policy is intended to provide basic guidance to staff and Board Members. It is possible that further or more detailed guidance may be required in individual cases and this should be sought from an appropriate professional body. Advice may be sought from the social work team or the police where required.

## Appendix B

Maryhill Housing Adult Protection Form (AP1)

A referral can be made to Glasgow City Council social services team by contacting Social Care Direct on 0141 287 0555.

The following information should be included in any referral made. If you do not have all the information you should give as much information as you can.

### Section A – Adult at Risk Details:

Name	
Known As (if applicable)	
Date of Birth	
Gender	
Address	
Housing Tenure (Local Authority, Housing Association, Private Rent/Owner occupied)	
Phone number	
Any known communication needs?	
Living situation (e.g. lives alone, with spouse etc, type of accommodation, any known supports, caregivers etc)	
GP Details (Name, Address, Phone number)	

### Section B – Referrer Details

Name of referrer	
Occupation	

Location	
Telephone contact	
Email contact	

**Section C – Details of Concern**

<b>All 3 Points of the following criteria must be met</b>
Describe why the adult is unable to safeguard their wellbeing, property rights or other interests?
Describe what type of harm the adult is at risk from
Describe how this adult is affected by a disability, mental disorder, illness or physical or mental infirmity and are more vulnerable to being harmed than adults who are not so affected?

Describe why you believe the action is needed in order to safeguard the adult from harm (unless set out previously)

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**Section D – Other Information**

Does the Adult understand what has happened to them?

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Have you discussed the making of this referral with the adult or relevant person? If not, please explain why not. If yes, please set out any views expressed by the adult or that relevant person.

Note: A relevant person would be where the adult is incapable of expressing any views and could be

- The adult's nearest relative
- Any primary carer, guardian or attorney of the adult
- Any other person who has an interest in the adult's wellbeing or property

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If you believe that a crime has been committed has Police Scotland been notified?  
Detail below Yes/No/Not applicable – and include police contact details where applicable.

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What action, if any, have you taken to ensure the adult at risk is now safe?

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Details of the alleged harmer if known

Name:

Address:

Relationship to Adult:

Is there any further additional information that you consider relevant to this referral?

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Referrer signature	
Print Name	
Designation	
Contact Details	
Email address	
Date	