Hurst, Hassocks and Ditchling

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HHD Policy Guide 4 SAFEGUARDING ADULTS

This version approved by the Executive Committee on 29.07.26

1 Safeguarding adults

a. Safeguarding adults is part of the wider role of safeguarding and promoting welfare. It refers to the activity which is undertaken to enable adults to protect themselves, or become protected from, abuse or neglect. As members and/or volunteers in u3a, everyone has a responsibility to safeguard peer u3a members and promote their welfare.

b. Safeguarding depends upon effective joint working between families, friends, neighbours, community members, agencies and professionals, each with different roles and expertise.

2 Why is safeguarding guidance needed?

a. As people age, they may have increased care and support needs, which may make them more susceptible to abuse or neglect. Sometimes their vulnerability is evident, whilst for others it may be less so.

b. The types of elder abuse or neglect are categorised within UK statutory guidance[1] in the following 10 categories: physical abuse; emotional/psychological abuse; financial abuse; domestic violence & abuse; sexual abuse; modern slavery; discriminatory abuse; organisational abuse; neglect & acts of omission and self-neglect. See appendix for further details of these types of abuse.

c. Abusers could be anyone e.g. family members, carers, neighbours, local people, professionals or strangers. Abuse or neglect may be intentional or unintentional.

d. Some common examples of psychological/emotional/financial abuse are:

- a carer or close relative may become angry or irritated with an older person, and this could lead to physical or psychological/emotional abuse. This can present in a variety of ways. Examples are: hitting the person or handling them very roughly whilst helping them to mobilise or to wash and dress; neglecting someone who relies on a carer or relative for food or personal care; name calling or humiliating someone.
- In relation to financial abuse, lonely older people can be very vulnerable to scammers who phone or knock on the door or appear very friendly and caring towards them. Older people can also be pressured by trusted people (e.g. family members/carers/friends/neighbours) to part with money.

[1] Care and support statutory guidance, updated 18.02.25 [as of 09.05.25 still stating parts of guidance are under review]

3 Indicators that someone may be being abused

There are many indicators of abuse including the following examples:

a. We all fall and bump into things sometimes, but when an older person has an injury or a bruise it is important to ask how it happened. If bruises or injuries are frequent and/or unexplained this may be a warning sign.

b. If a person appears to be under nourished or uncared for, this could be an instance of neglect or of a person not receiving the help they need.

c. When a person's demeanour changes, it is important to check out what is happening - if someone becomes depressed, cries, or there are other marked psychological changes, this could be evidence of emotional abuse or of essential needs not being met.

d. If a person talks about giving away large sums of money or being badgered for money by family / friends / carers/ neighbours, this may constitute financial abuse.

4 Safeguarding Responsibilities of all u3a members

As u3a members, we are all peers and need to watch out for each other. If we are worried about someone, we should try to help. This means:

a. reporting any concerns you may have about someone's well-being to a group leader, the HHD u3a Safeguarding Officer, the groups co-ordinator or an Executive Committee (EC) member. The Safeguarding Officer can be contacted via the HHD contact phone 07355 943650 or by email edi.carmi@gmail.com.

b. if concerns remain despite reporting to a u3a group leader and/or the safeguarding officer or other EC member, please refer to guidance from West Sussex council, (see https://www.westsussexsab.org.uk/raise-a-concern/types-of-concerns/concerns-about-an-adult/): this will explain how you may contact adult social care directly to seek advice or to make a safeguarding referral. Any member of the public is able to do this.

c. Please note that should you believe that someone is in immediate danger please call police on 999.

5 Safeguarding responsibilities of EC

a. The HHD u3a takes seriously the welfare of all vulnerable adults who are involved in its activities.

b. The HHD u3a aims to ensure that all members are welcomed into a safe, caring environment with a happy and friendly atmosphere that will enhance their well-being.

c. The HHD u3a will do all in their power, with the consent of the individual concerned, to provide support or referral for support to improve a vulnerable member's health and well-being when required.

d. The HHD EC will appoint an HHD u3a member as the Safeguarding Officer, to whom any possible instances requiring safeguarding will be referred by members, group leaders and EC members.

6 Safeguarding responsibilities of group leaders

a. If a group leader becomes aware of safeguarding concerns, they should consult the Safeguarding Officer and agree what further action may be required e.g deciding who is best placed to discuss this further with the vulnerable adult and if necessary, what further actions may be required to safeguard the individual's welfare (see section 8 below).

b. The Safeguarding Officer can be contacted via the HHD contact phone 07355 943650 or by email edi.carmi@gmail.com. In the case of possible immediate danger, the police should be contacted on 999.

7. Responsibilities of the Safeguarding Officer

a. If an instance of abuse or neglect is brought to the attention of the Safeguarding Officer, s/he will be responsible for agreeing with the group leader (or reporting u3a member) how the matter will be progressed further i.e. who will explore [if appropriate] the concerns with the u3a member at possible risk of abuse or neglect and the possible options for help and support for them e.g. family, friends, referrals to adult social care.
b. The wishes and feelings of the individual u3a member concerned are of prime importance in any subsequent action: are they wanting any further help? are they happy for the concerns about their welfare to be discussed with adult social care and/or family or friends? Are they wanting any kind of informal support network to be put in place?
c. If the person agrees to a referral to adult social care, they can either be given the contact information and refer themselves or the u3a safeguarding officer /group leader can make the referral on their behalf. If the person prefers to make the referral themselves, the u3a safeguarding officer should arrange for follow up so as to be satisfied this has happened.
d. If the individual does not agree to discussions with family or referral to adult social care and the safeguarding officer suspects the risk of serious harm, timely consideration must be given to the need to seek advice or make a referral to adult social care. (see https://www.westsussexsab.org.uk/raise-a-concern/types-of-concerns/concerns-about-an-adult/). If necessary, advice as to how to proceed may be sought in the first place without disclosing the identity of the adult at risk or subject to abuse /neglect.
e. It is for adult social care to decide what action to take on receipt of a referral from the safeguarding officer. That will depend on the wishes of the person suspected to be at risk of harm, what other knowledge adult social care has of this person's circumstances and the outcome of any assessments undertaken subsequently.
f. It is important that in all considerations about the response of u3a to the safeguarding concerns, no actions are taken which may increase the risk of harm to the individual.
g. If there are suspicions that the individual's health and wellbeing is at serious risk of **immediate** harm and a possible crime has been committed the police should be informed.

8. Confidentiality & Record keeping

a. An abused person can feel shamed and embarrassed, so it is vital that the matter is kept completely confidential and that the vulnerable person is assured of this. Any u3a member reporting concerns should only share the identity of the individual with the group leader or Safeguarding Officer or an EC member. The name will not be disclosed to other EC members.
b. The safeguarding officer should maintain confidential and secure records of any involvement in a safeguarding matter.

APPENDIX: Types of adult abuse and neglect

Abuse or neglect can take many forms. The Care and support statutory guidance[2] identifies the following 10 types of abuse:

Physical abuse: Causing someone physical harm, for example by hitting, pushing or kicking them, misusing medication, causing someone to be burnt or scalded, controlling what someone eats, restraining someone inappropriately or depriving them of liberty.

Domestic violence or abuse: This includes psychological, physical, sexual, financial or emotional abuse by someone who is a family member or is, or has been, in a close relationship with the person being abused. This may be a one-off incident or a pattern of incidents or threats, violence or controlling behaviour. It also includes being forced to marry, honour based violence and female genital mutilation (FGM).

Sexual abuse: This may involve a person being made to take part in sexual activity when they do not, or cannot, agree to this. It includes rape, indecent exposure, inappropriate looking or touching, or sexual activity where the other person is in a position of power or authority.

Psychological or emotional abuse: This includes being blamed or controlled by intimidation or fear, shouted at, ridiculed or bullied, threatened, or humiliated. It includes harassment, verbal abuse, online or mobile phone bullying and isolation.

Financial or material abuse: This includes misusing or stealing a person's money or belongings, fraud, postal or internet scams tricking people out of money, or pressuring a person into making decisions about their financial affairs, including decisions involving wills and property.

Modern slavery: This includes slavery, a person being forced to work for little or no pay (including in the sex trade), being held against their will, tortured, abused or treated badly by others.

Discriminatory abuse: This includes forms of harassment, ill-treatment, threats or insults because of a person's race, age, culture, gender, gender identity, religion, sexuality, physical or learning disability, or mental-health needs. Discriminatory abuse can also be called 'hate crime'.

Organisational abuse: This includes neglect and providing poor care in a care setting such as a hospital or care home, or in a person's own home. This may be a one-off incident, repeated incidents or on-going ill-treatment. It could be due to neglect or poor care because of the arrangements, processes and practices in an organisation.

Neglect and acts of omission: This involves not meeting a person's physical, medical or emotional needs, either deliberately, or by failing to understand these. It includes ignoring a person's needs or not providing the person with essential things to meet their needs, such as medication, food, water, shelter and warmth.

Self-neglect: This involves a person being unable, or unwilling, to care for their own essential needs, including their health or surroundings (for example, their home may be very unclean, or there may be a fire risk due to their hoarding).

[2] The Care and support statutory guidance was updated 18.02.25, but as of 09.05.25 still stating that parts of this guidance are under review