

# Pembroke EMB Ltd

## Safeguarding Adults Policy

### 1. Policy Statement

1.1 Our organisation is committed to safeguarding adults and promoting their wellbeing, ensuring they are protected from abuse, neglect, and exploitation.

1.2 Safeguarding is everyone's responsibility and applies to all staff, volunteers, contractors, and partners.

1.3 We adopt a **zero-tolerance approach to abuse** and will respond promptly and proportionately to concerns.

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### 2. Purpose of the Policy

2.1 To outline how we safeguard adults at risk.

2.2 To ensure all personnel understand their roles and responsibilities.

2.3 To provide clear procedures for recognising, reporting, and responding to concerns.

2.4 To ensure compliance with UK legislation and best practice.

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### 3. Scope

3.1 Applies to all staff, volunteers, trustees, contractors, and partner organisations.

3.2 Applies to all adults aged 18+ who may be at risk.

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### 4. Legal and Regulatory Framework

4.1 This policy is informed by key UK legislation including:

- Care Act 2014 (primary safeguarding legislation)
- Mental Capacity Act 2005
- Human Rights Act 1998
- Equality Act 2010
- Data Protection Act 2018 / UK GDPR
- Safeguarding Vulnerable Groups Act 2006
- Domestic Abuse Act 2021
- Modern Slavery Act 2015

4.2 Local Safeguarding Adults Board (SAB) multi-agency procedures must be followed.

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### 5. Definition of an Adult at Risk

5.1 An adult at risk is someone who:

- Has care and support needs
- Is experiencing or at risk of abuse or neglect
- Is unable to protect themselves due to those needs

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### 6. Principles of Safeguarding (Care Act)

6.1 All safeguarding work must follow the six statutory principles:

1. Empowerment
2. Prevention

3. Proportionality
  4. Protection
  5. Partnership
  6. Accountability
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## **7. Types of Abuse and Neglect**

7.1 Abuse may include (not exhaustive):

- Physical abuse
  - Emotional/psychological abuse
  - Sexual abuse
  - Financial/material abuse
  - Neglect and acts of omission
  - Discriminatory abuse
  - Domestic abuse
  - Modern slavery
  - Organisational/institutional abuse
  - Self-neglect
  - Radicalisation (Prevent duty)
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## **8. Aims of Safeguarding**

- 8.1 Prevent harm and reduce risk.
  - 8.2 Stop abuse where it occurs.
  - 8.3 Support individuals to make informed choices.
  - 8.4 Promote wellbeing and independence.
  - 8.5 Ensure effective partnership working.
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## **9. Roles and Responsibilities**

### **9.1 All Staff and Volunteers**

- Be aware of safeguarding issues
- Recognise signs of abuse
- Report concerns immediately
- Maintain accurate records

### **9.2 Safeguarding Lead (DSL)**

- Provide advice and guidance
- Manage safeguarding concerns
- Liaise with external agencies
- Ensure training and compliance

### **9.3 Senior Management / Trustees**

- Ensure policy implementation
  - Provide resources and oversight
  - Promote safeguarding culture
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## **10. Recognising Abuse**

- 10.1 Staff must be trained to recognise indicators of abuse and neglect.
  - 10.2 Abuse can occur in any setting and by anyone.
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## **11. Responding to Concerns**

- 11.1 If an adult is in immediate danger → call emergency services.
- 11.2 If a disclosure is made:
  - Listen without judgement
  - Do not promise confidentiality
  - Record facts accurately

- Report immediately

11.3 Staff must not investigate themselves.

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## **12. Reporting Procedures**

12.1 All concerns must be reported to the Safeguarding Lead.

12.2 Referrals may be made to:

- Local Authority Safeguarding Team
  - Police
  - Care Quality Commission (CQC)
  - Disclosure and Barring Service (DBS)
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## **13. Recording and Information Sharing**

13.1 Accurate, timely, and secure records must be kept.

13.2 Records must include: date, time, facts, observations, and actions taken.

13.3 Information sharing must comply with UK GDPR and safeguarding duties.

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## **14. Mental Capacity and Consent**

14.1 Assume capacity unless proven otherwise.

14.2 Respect unwise decisions where capacity exists.

14.3 Act in best interests where capacity is lacking.

14.4 Apply the Mental Capacity Act 2005.

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## **15. Safer Recruitment**

15.1 DBS checks will be carried out where required.

15.2 Robust recruitment and vetting procedures must be followed.

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## **16. Training and Awareness**

16.1 Mandatory safeguarding training for all staff.

16.2 Regular refresher training.

16.3 Role-specific advanced training for safeguarding leads.

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## **17. Whistleblowing**

17.1 Staff must report concerns about poor practice or misconduct.

17.2 Whistleblowers are protected from victimisation.

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## **18. Partnership Working**

18.1 Work collaboratively with:

- Local Authorities
- NHS
- Police
- Safeguarding Adults Boards

18.2 Safeguarding is a multi-agency responsibility.

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## **19. Risk Management and Prevention**

19.1 Promote early intervention and prevention strategies.

19.2 Reduce isolation and vulnerability.

19.3 Address root causes of abuse.

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## **20. Managing Allegations Against Staff**

20.1 All allegations must be taken seriously.

20.2 Follow disciplinary procedures.

20.3 Refer to DBS and regulators where appropriate.

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**21. Confidentiality and Data Protection**

- 21.1 Information will be shared on a need-to-know basis.
- 21.2 Confidentiality must not prevent safeguarding action.

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**22. Equality, Diversity and Human Rights**

- 22.1 Safeguarding must be inclusive and non-discriminatory.
- 22.2 Respect dignity, choice, and independence.

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**23. Monitoring, Quality Assurance and Governance**

- 23.1 Policy implementation will be monitored regularly.
- 23.2 Safeguarding incidents will be reviewed for learning.
- 23.3 Compliance audits will be conducted.

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**24. Learning and Safeguarding Adults Reviews (SARs)**

- 24.1 Lessons from serious cases will be implemented.
- 24.2 Organisations must cooperate with Safeguarding Adults Reviews.

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**25. Approval and Sign-off:**

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|--------------------|--|
| <b>Approved by</b> |  |
| <b>Position</b>    |  |
| <b>Signature</b>   |  |
| <b>Date</b>        |  |

**26. Approval and Sign-off:**

| <b>Date</b> | <b>Notes</b>   | <b>Staff Name</b> |
|-------------|--|-------------------|
| 23.04.2026  | Created and updated the policy to its latest standard as of 2026 | Gianna Schorno    |
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