



Safeguarding Adults at Risk

The purpose of this policy is to:

Set out the legal requirements for Relate NI to comply with as an employer and service provider.

Informs all Relate NI staff, management and Trustees volunteers, trainees, supervisors and associate counsellors and anyone else undertaking work on behalf of Relate NI of their individual and collective responsibilities in the management of Safeguarding Adults at Risk within Relate NI.

Controlled by	Head of Clinical Services
Document Status	Organisational live policy

Version	Author	Date created	Reviewed	Review Date
002	Head of Clinical Services	June 2019	April 2022	May 2025

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Overview

Relate NI takes its responsibilities to adults at risk very seriously. During the course of delivering Relate NI services, staff may become aware of concerns about a person at risk (someone 18 and over who has additional needs, are at risk and are less able to protect themselves than others). Consultation about these concerns with a senior member of staff is mandatory and disclosure to the appropriate authorities may be required in order to safeguard these clients. This policy sets out Relate NI's response and is in accordance with relevant legal frameworks.

Equality Statement

In our approach to providing a safe space for adults to access our services, we will make sure that all adults have the same protection regardless of age, disability, gender, racial heritage, religious belief, sexual orientation or identity. We understand that for any of these considerations, we may need to tailor our approach accordingly.

1.0 PURPOSE

This policy sets out Relate NI's commitment to the health, safety and welfare of all adults at risk and who are in contact with Relate NI.

The purpose of the policy and accompanying procedures is to ensure that the rights of adults at risk are protected through staff awareness of who adults at risk and adults in need of protection are; understanding what constitutes abuse; and through understanding the organisations procedures for recording and reporting concerns.

Safeguarding includes activity which **prevents** harm from occurring and activity which **protects** adults at risk where harm has occurred in order to help people live lives free from abuse and neglect. In legislation and guidance the term, "safeguarding," describes individuals' and agencies' responsibilities to protect and promote the welfare of adults at risk.

This policy is supported by other Relate NI organisational policies including:

- Clinical Supervision & Consultation Policy

- Confidentiality & Disclosure Policy
- Domestic Violence & Abuse (DVA) Policy
- Keeping Children Safe Policy
- Keeping Children Safe Code of Behaviour
- Code of Ethics & Operations Guidance
- Clinical Guidance; Writing Clinical Case Notes & Supervision Notes
- Risk Assessment & Risk Management Policy
- Whistleblowing Policy

2.0 SAFEGUARDING POLICY STATEMENT

Abuse is a violation of an individual's human rights. It can take many forms. The staff of Relate NI are committed to practice which promotes the welfare of adults at risk and safeguards them from harm.

Staff in our organisation accept and recognise our responsibilities to develop awareness of the issues that cause adults harm, and to establish and maintain a safe environment for them. We will not tolerate any form of abuse wherever it occurs or whoever is responsible. We are committed to promoting an atmosphere of inclusion, transparency and openness and are open to feedback from the people who use our services, carers, advocates, our staff and our volunteers with a view to how we may continuously improve our services/activities.

We will endeavour to safeguard the adults we work with and care for by:

- Adhering to our adult safeguarding policy and ensuring that it is supported by robust procedures;
- Carefully following the procedures laid down for the recruitment and selection of staff and trainees
- Providing effective management for staff and trainees through supervision, support and training;
- Implementing clear procedures for raising awareness of and responding to abuse within the organisation and for reporting concerns to statutory agencies that need to know, while involving adults at risk and their carers appropriately;
- Ensuring general safety and risk management procedures are adhered to;
- Promoting full participation and having clear procedures for dealing with concerns and complaints;
- Managing personal information, confidentiality and information sharing; and
- Implementing a code of behaviour for staff, associates and trainees

We will review our policy, procedures, code of behaviour and practice at regular intervals, at least once every three years.

3.0 UNDERLYING PRINCIPLES

These principles are contained within the regional adult safeguarding policy “Adult Safeguarding: Prevention and Protection in Partnership”, (DOH and DOJ, 2015). These principles have guided Relate NI’s safeguarding policy.

A Rights-Based Approach:

To promote and respect an adult’s right to be safe and secure; to freedom from harm and coercion; to equality of treatment; to the protection of the law; to privacy; to confidentiality; and freedom from discrimination.

An Empowering Approach:

To empower adults to make informed choices about their lives, to maximise their opportunities to participate in wider society, to keep themselves safe and free from harm and enabled to manage their own decisions in respect of exposure to risk.

A Person-Centred Approach:

To promote and facilitate full participation of adults in all decisions affecting their lives taking full account of their views, wishes and feelings and, where appropriate, the views of others who have an interest in his or her safety and well-being.

A Consent-Driven Approach:

To make a presumption that the adult has the ability to give or withhold consent; to make informed choices; to help inform choice through the provision of information, and the identification of options and alternatives; to have particular regard to the needs of individuals who require support with communication, advocacy or who lack the capacity to consent; and intervening in the life of an adult against his or her wishes only in particular circumstances, for very specific purposes and always in accordance with the law

A Collaborative Approach:

To acknowledge that adult safeguarding will be most effective when it has the full support of the wider public and of safeguarding partners across the statutory, voluntary, community, independent and faith sectors working together and is delivered in a way where roles, responsibilities and lines of accountability are clearly defined and understood. Working in partnership and a person-centred approach will work hand-in-hand.

4.0 OVERVIEW OF RESPONSIBILITIES

Relate NI has a duty to ensure that our people fulfil their responsibilities to prevent abuse of adults at risk and to report any abuse discovered or suspected. Relate NI recognises that any adult can be subject to abuse and all allegations of abuse, no matter how small or trivial, will always be taken seriously and responded to swiftly and in accordance with Relate NI's procedures.

Relate NI staff shall make the safety and protection from harm of all adults at risk involved in activities which come under Relate NI's responsibility our highest priority. It is the responsibility of all staff, trainees, associate counsellors, trainees and trustees within Relate NI to report concerns about abuse or significant harm to an adult at risk.

Board of Trustees (Incl sub-committees)

To ensure that the organisation's policies, procedures and measures are fit for purpose and up to date; to appoint a lead trustee for Safeguarding who will work with the CEO and Head of Clinical Services to ensure the robust and effective implementation of safeguarding policies; and to request and consider reports on the operation of Safeguarding Adults at Risk within the organisation.

CEO

The CEO has overall responsibility for ensuring the effective and robust implementation of the organisation's Safeguarding Adults at Risk framework and for providing strategic leadership and promoting a culture of supporting good practice with regard to Safeguarding Adults at Risk within Relate NI and promoting collaborative working with other agencies

Head of Clinical Services

Keep CEO informed of all Safeguarding Adults at Risk escalations; responsible for liaising with and reporting to external agencies as required; ensuring that policies and procedures and safeguarding responsibilities are up to date and implemented robustly; and take reports from Designated Officers as required.

In partnership with the CEO, liaising regularly with the Trustee Safeguarding Lead;

- Reporting to Board and Sub Committees an up to date account on activities undertaken in relation to the Safeguarding Adults at Risk Policy;
- Ensuring appropriate linkages are made with Clinical Supervisors strategically

and operationally in a timely manner.

- If concern is in relation to allegations of abuse against Relate NI personnel, is responsible for liaising with external agencies and, where appropriate, ensuring a robust internal investigation is undertaken;

Designated Officers

Request and accept Safeguarding Adults at Risk Reporting Form (SAARRF) reports from staff and counsellors;

progress where appropriate Safeguarding Adults at Risk referral to the HSC Trust Adult Gateway Team; contact the PSNI if and when required; maintain key elements of the

safeguarding framework as approved; ensure that Clinical Supervisors are updates as required.

Clinical practitioners and trainees

Listen, identify, record and report to a Designated Officer (DO) and participate in Keeping Safeguarding Adults at Risk discussions with a DO. Where it is not possible to speak to a DO in a timely manner, clinical practitioners are required to use their professional judgement to ensure that timely and appropriate action is taken in line with the policy statement and follow up with a DO as soon as possible. Support from peer practitioners and use of Gateway contacts for guidance and support may all be used to support practitioners in the exercise of their professional judgement.

As well as consulting, reporting and recording responsibilities, clinical practitioners are also responsible for ensuring that all safeguarding concerns in their caseload are discussed in clinical supervision in a timely manner.

Clinical Supervisors

Support Supervisees, check understanding, understand the organisation's policies and procedures. and participate in Safeguarding Adults at Risk discussions as required by the Head of Clinical Services or a DO.

Staff (non-counselling)

Will be familiar with the Safeguarding Adults at Risk policy and procedures and escalate any concerns to a member of the Senior Team or a DO in a timely manner

5.0 LEGAL AND POLICY CONTEXT

There is a range of legislation and policy in force in Northern Ireland which is directly applicable to the protection of vulnerable adults, and as such provides a context for Relate NI's responsibilities in this area. It is also important for Trustees and CEOs and those involved in the safeguarding leadership to ensure adherence to the Charity Commission NI recommendations.

This includes:

- The Criminal Law Act (Northern Ireland) 1967
- Health and Personal Social Services (NI) Orders and the Health and Social Care (Reform) Act (NI) 2009
- Mental Health (NI) Order 1986
- Police and Criminal Evidence (NI) Order 1989
- The Disability Discrimination Act 1995
- The Race Relations (NI) Order 1997
- The Family Homes and Domestic Violence (NI) Order 1998
- The Northern Ireland Act 1998, Section 75
- Human Rights Act 1998 – enacted 2000
- Public Interest Disclosure (NI) Order 1998
- Criminal Evidence (NI) Order 1999
- The Health and Personal Social Services Act (NI) 2001
- The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Safeguarding Vulnerable Groups (NI) Order 2007 (as amended by the Protection of Freedoms Act 2012)
- The Forced Marriage (Civil Protection) Act 2007
- Sexual Offences (NI) Order 2008
- The Human Trafficking and Exploitation (Criminal Justice and Support for Victims) Act (Northern Ireland) 2015
- Adult Safeguarding: Prevention and Protection in Partnership (DoH and DoJ) 2015
- Domestic Abuse & Civil Proceedings Act (Northern Ireland) 2021

*For further information on the detail of policy and legislation quoted above, please refer to Relate NI **Quick Guide 1 Safeguarding Adults – The Legislative and Policy Context in Appendix V.***

6.0 KEY DEFINITIONS

6.1 What is abuse?

Abuse causes harm. Abuse is anything that goes against a person's human and civil rights. An adult at risk may be abused by a wide range of people including relatives and family members, professional staff, paid care workers, volunteers, other service users, neighbours, friends and associates. It can take place anywhere (for example, in a person's own home, a care home or a hospital).

Abuse may be deliberate or unintentional. It may consist of a single act or repeated acts either in a continuing relationship or in a service context and it may be directed to more than one person at a time. This makes it important to look beyond the single incident or breach in standards to underlying dynamics and patterns of harm. Some instances of abuse will constitute a criminal offence. In this respect adults at risk are entitled to the protection of the law in the same way as all other member of the public. In addition, statutory offences have been created which specifically protect those who may be incapacitated in various ways.

Type of abuse	Examples
Physical	<ul style="list-style-type: none">• slapping, pushing, kicking or other forms of violence• misuse of medication (for example, increasing dosage to make someone drowsy)• inappropriate punishments (for example, not giving someone a meal because they have been 'bad')rough handling, misuse of restraint and deprivation of liberty
Sexual	<ul style="list-style-type: none">• rape• sexual assault• sexual acts without consent (this includes if a person is not able to give consent or the abuser used pressure). Sexual violence may include non-contact sexual activities, such as indecent exposure, stalking, grooming, being made to look at or be involved in the production of sexually abusive material, or being made to watch sexual activities.
Psychological	<ul style="list-style-type: none">• emotional abuse• threats of harm, restraint or abandonment• refusing contact with other people• intimidation• threats to restrict someone's liberty. Shouting, yelling and swearing, blaming, controlling.
Institutional Abuse	<ul style="list-style-type: none">• maltreatment or neglect of an adult by a regime, individuals in settings which adults who may be at risk reside in or use. Routines

	and systems may result in poor standards of care, poor practice, violate dignity and human rights and place them at risk of harm. Failure to ensure necessary preventative and /or protective measures are in place.
Financial	• theft • fraud • misappropriation, misuse of money• misuse of property, possessions or benefits • dishonest gain of property, possessions or benefits. Exploitation, embezzlement, withholding pensions, benefits or pressure exerted around wills, property, inheritance.
Neglect and acts of omission	• ignoring the person’s medical or physical care needs • failing to get healthcare or social care • withholding medication and adequate food, clothing and heating.
Discriminatory	including racist, sexist, that based on a person’s disability, and other forms of harassment, slurs or similar treatment.
Exploitation	Deliberate maltreatment, manipulation or abuse of another person

This list of harmful conduct is not exhaustive, nor listed in any order of priority.

6.2 What is an adult at risk of harm?

An “**adult at risk of harm**” is a person aged 18 or over, whose exposure to harm through abuse, exploitation or neglect may be increased by their personal characteristics and /or life circumstances.

- *Personal characteristics* may include, but are not limited to, age, disability, special educational needs, illness, mental or physical frailty or impairment of, or disturbance in, the functioning of the mind or brain.
- *Life circumstances* may include, but are not limited to, isolation, socio-economic factors and environmental living conditions.

6.3 What is an adult in need of protection?

An ‘**adult in need of protection**’ is a person aged 18 or over, whose exposure to harm through abuse, exploitation or neglect may be increased by their:

- A. Personal characteristics

And/or

B. Life circumstances

AND

C. Who is unable to protect their own well-being, property, assets, rights or other interests;

AND

D. Where the action or inaction of another person is causing, or is likely to cause, him/ her to be harmed.

In order to meet the definition of an “adult in need of protection” either (A) or (B) must be present, in addition to both elements (C), and (D).

6.4 How might you become aware of abuse?

There are a variety of ways that you could be alerted that an adult may be/ or is suffering harm, abuse or neglect

- Something they say may concern you or alert your suspicions
- Someone else may tell you of their concerns or something that causes you concern;
- They may show some signs of physical injury for which there does not appear to be a satisfactory or credible explanation;
- Their demeanour/behaviour may lead you to suspect abuse or neglect;
- The behaviour of a person close to them makes you feel uncomfortable (this may include another staff member, volunteer, peer or family member); or
- Through general good neighbourliness and social guardianship.
- They may disclose to you

Being alert to “abuse” plays a major role in ensuring that adults are safeguarded and it is important that all concerns about possible abuse are taken seriously and appropriate action is taken.

If there is a clear and immediate risk of harm, or a crime is alleged or suspected, the matter should be referred directly to the PSNI or HSC Trust Adult Protection Gateway Service via the Adult Safeguarding Champion

7.0 RELATE NI SAFEGUARDING PROCEDURES

For clarity and ease of use, Relate NI’s procedures are framed around the organisation’s responsibilities, *Respond, Record and Report*.

7.1 Respond:

- a)** When a safeguarding disclosure is made to you by a service user:
 - Advise the service user that you have heard their disclosure
 - Inform them that you will need to escalate this information and seek their consent
 - On occasions however you will be required to escalate the information when you have not at that point gained consent of the service user
 - Contact the Clinical Consult Rota as soon as possible by telephone or email

- b)** When you are suspicious about a potential safeguarding issue in relation to a service user:
 - Contact the Clinical Consult Rota within 24 hours by telephone or email for discussion

- c)** When you have safeguarding concerns or suspicion about a Relate NI staff member:
 - Contact the Clinical Consult Rota as soon as possible by telephone or email
 - Do not discuss this information with anyone else

7.2 Recording:

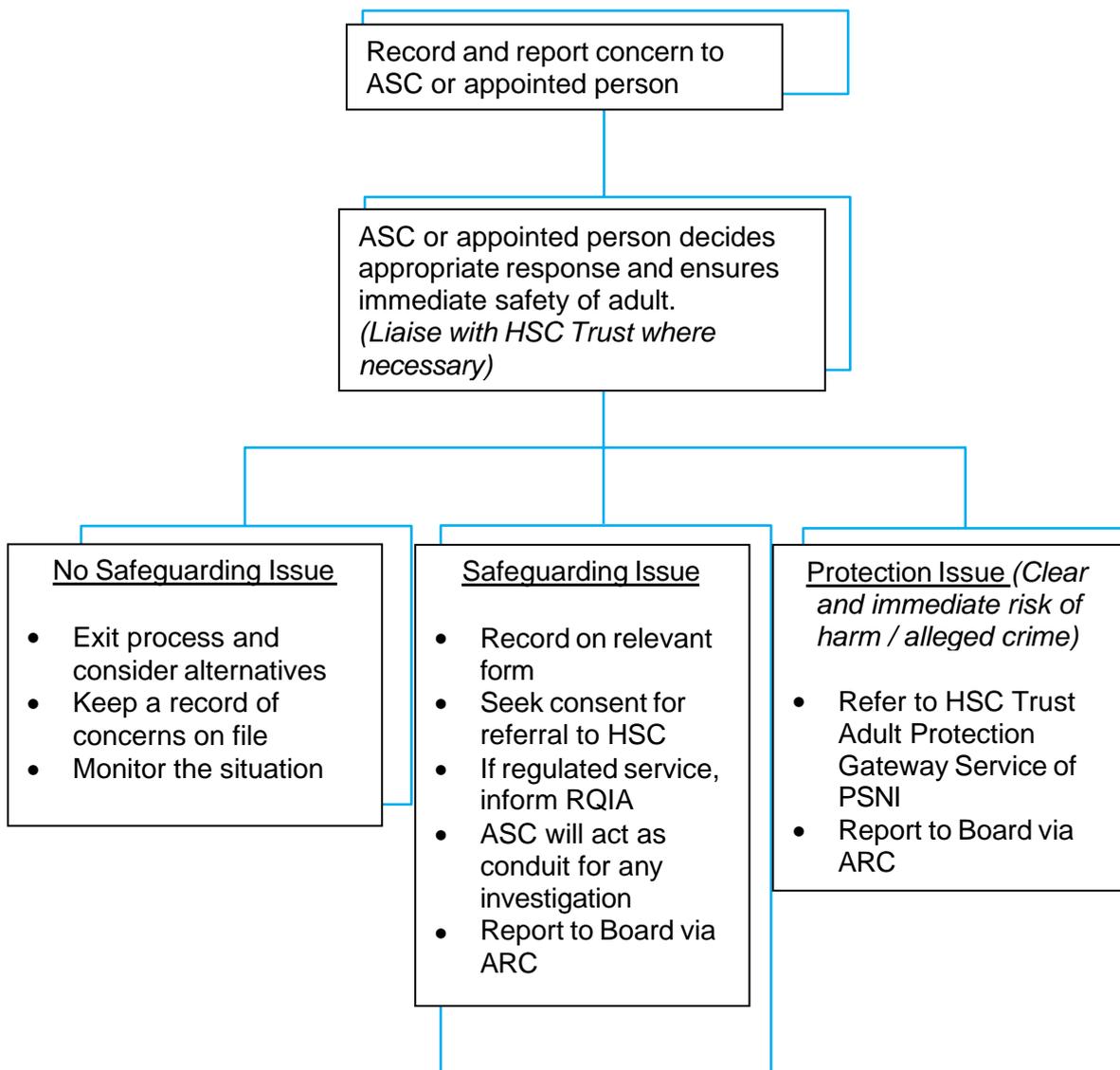
- a) When a safeguarding disclosure is made to you by a service user record the information on a Safeguarding Adults at Risk Reporting Form (SAARRF) and forward immediately to the ASC
- b) When you are suspicious about a potential safeguarding issue in relation to a service user after discussion with the Clinical Consult Rota, SAARRF completion may be required /or not required within 24 hours
- c) When you have safeguarding concerns or suspicions about a Relate NI worker record information on a SAARRF and forward immediately to the

Designated Safeguarding Officer

7.3 Report:

- a) Designated Safeguarding Officer will contact HSC Trust Adult Protection Gateway Service for advice immediately and if required will forward the password protected SAARRF
- b) Designated Safeguarding Officer within 24 hours will contact HSC Trust Adult Protection Gateway Service for advice
- c) Designated Safeguarding Officer will immediately advise Relate NI's CEO
ASC will immediately consult with HSC Trust Adult Protection Gateway Service prior to activation of Relate NI investigatory procedures

Adult Safeguarding Decision Making Flow Chart



7.4 Dealing with allegations made against Relate NI people

Any disclosure from a client or another member of staff about a Relate NI person must be recorded on a Safeguarding Adult at Risk Record Form (SAARRF) immediately and by the person to whom the disclosure is made.

The record should be factual and should not include opinions or personal interpretations of the facts presented. It should contain all relevant detail and be as accurate as possible.

If you are the Staff member reporting concerns about a Relate NI staff member please ensure this information is not shared with any other person other than the ASC or someone acting in the capacity of ASC. Once you have discussed this issue with the ASC, you will not receive any further information about any investigation.

If a service user reports concerns about a Relate NI staff member they will be contacted to advise of progress of the procedure.

A record of consultation and subsequent actions including any report made to the statutory authority must also be kept on the SAARRF.

(When the ASC is off a Deputy ASC will be nominated)

7.5 Communicating with and training the Relate NI team.

All Relate NI team members will be required to sign a copy of the induction checklist to indicate that they have received the policy and are aware of their responsibilities under it. The signed version of the induction checklist will be kept on their file.

Safeguarding issues will specifically be discussed as part of the induction process for any new member of the team.

Relate NI commits to providing safeguarding training for our team every 3 years as a minimum.

8.0 ESTABLISHING A CULTURE WHICH PROMOTES SAFEGUARDING THROUGHOUT THE ORGANISATION.

This policy sets out the organisation's responsibilities in relation to safeguarding adults at risk. Best practice indicates that safeguarding should be a theme which permeates all organisational policies which sets a clear organisational culture where safeguarding is taken seriously. Integral to Relate NI's safeguarding culture, there are a suite of policies and procedures that ensure best practice and service delivery in terms of safety, equity and quality.

8.1 Recruitment and Selection of Staff:

Relate NI has a robust process of recruitment which includes a comprehensive application form, agreed job descriptions, Access NI procedure, and reference collection. This ensures that the make-up of the Relate NI staff team is responsive to the needs of those with whom the organisation works and indicates to both clients and potential employees the robustness of the organisation's safeguarding framework.

8.2 Management, Support, supervision and training of Staff:

Relate NI has a robust support system to meet the needs of a dynamic and professional workforce. This includes individual and group supervision, CPD training, daily access to clinical and business support services,

8.3 Receiving comments and suggestions and management of concerns and complaints.

At Relate NI we want to provide the best possible service. However, there may be times when we could do better and other times when we receive compliments about what we have done well.

- A commitment to a listening environment within the organisation;
- Promotion of office@relateNI.org to make suggestions for improvements to give everyone an opportunity to make suggestions about how things could be improved;
- Service User Surveys
- Maintaining a record of matters and suggestions made by service users and actions taken;

- Developments in the organisation recorded in the Relate NI Annual Report

8.4 Management of records, confidentiality and sharing of information

Relate NI has robust procedures for the management of records and information. All records are stored in a secure location and accessed by authorised personnel only. There is a clear procedure for accessing records, record retention/ archiving, record destruction/disposal, the organisation is currently progressing to digital recording. Relate NI has a robust strategy to ensure compliance with current Data Protection Legislation.

8.5 Management of risk:

Relate NI is committed to an organisational culture in which the rights of Adults are fully respected.

The safeguarding procedures support that culture to reduce the likelihood and impact of abuse.

- Preventing unsuitable people from joining the organisation through good recruitment and selection practice;
- Making staff aware of risk of harm in adulthood, the possible signs of abuse and equipping them to respond quickly to concerns about actual, alleged or suspected abuse;
- Ensuring that staff are properly inducted, trained, supported and supervised in their work with adults at risk;
- Ensuring that staff know what constitutes acceptable behaviours and good practice and that they are supported when they challenge poor practice;
- Promoting a culture of inclusion, transparency and openness throughout the organisation and its services and activities;
- Making staff aware of how information about adults should be handled; and
- Having in place good overall organisational management and practice supported by a range of organisational policies and procedures.

APPENDIX 1 – GUIDELINES IF SOMEONE DISCLOSES ABUSE TO YOU

What if an adult at risk discloses abuse? Follow these guidelines:

DO

- Stay calm;
- Listen attentively;
- Express concern and sympathy and acknowledge what is being said;
- Reassure the person – tell the person that s/he did the right thing in telling you;
- Let the person know that the information will be taken seriously and provide details about what will happen next, including the limits and boundaries of confidentiality;
- If urgent medical/police help is required, call the emergency services;
- Ensure the immediate safety of the person;
- If you think a crime has occurred be aware that medical and forensic evidence might be needed. Consider the need for a timely referral to the police service and make sure nothing you do will contaminate it;
- Let the person know that they will be kept involved at every stage;
- Record in writing (date and sign your report) and report as per your organisation's procedures at the earliest possible time
- Act without delay.

DO NOT

- Stop someone disclosing to you;
- Promise to keep secrets;
- Press the person for more details or make them repeat the story;
- Gossip about the disclosure or pass on the information to anyone who does not have a legitimate need to know;
- Contact the alleged person to have caused the harm;
- Attempt to investigate yourself;
- Leave details of your concerns on a voicemail or by email;
- Delay

APPENDIX 2 CODE OF BEHAVIOUR:

Therapeutic staff all have a responsibility to uphold the ethical framework / code of conduct of the relevant accrediting body (BACP; IACP; COSTR etc.). As well as these frameworks, Relate NI has developed the following Code of Behaviour for all personnel within Relate NI.

Acceptable behaviour

All actions taken under these procedures must be carried out sensitively, taking account of the adult at risk's individual, wishes, abilities need, including race, culture and ethnicity, age, gender, religion, disability or sexuality. Adults at risk should be allowed and helped to make their own decisions based on an awareness of the choices available. It is recognised that there will be situations where an adult at risk chooses to remain in a situation perceived by professionals to be risky or dangerous.

The principle of self-determination is important, but may need to be reconsidered if an adult at risk is unable to make an informed choice, where there is a risk to life or limb or where a statutory responsibility exists.

Staff must:

- Promote and protect the human rights of all adults in every aspect of their work;
- Treat all adults with dignity and respect;
- Be patient and listen;
- Communicate clearly, in whichever way best suits the individual and check their understanding;
- Adopt a person centred approach;
- Treat all adults fairly and equally;
- Promote independence and choice;
- Encourage participation;
- Help all adults to fulfil their ability and potential;
- Involve all adults in decision making to the fullest extent.

Unacceptable Behaviour;

- Misuse of authority, intimidation and coercion of adults at risk.

APPENDIX 3



SAFEGUARDING ADULTS AT RISK RECORD FORM (SAARRF)

Relate NI Venue:	Client ref:
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Name of Relate NI person raising the concern: Role:	Date: Contact details: Telephone: Mobile:
Any other people present at the disclosure:	Name of their agency and their role:

SUMMARY OF CONCERN

Please give a brief factual summary of the concern including:

- Any apparent physical signs of abuse
- An account given to you of abuse by the adult concerned, as accurately as you are able
- Dates and times of incidents and when notes are made

CONSULTATION LOG

Record below details of any consultations regarding the case (should include: Name & role of person/s consulted & outcome of consultation)

REPORTING DISCLOSURE OF ABUSE

Reporting Disclosure:

Is a report of the disclosure required?

If **Yes:**

To which agency should a report be made?

Reasons why a report should be made to this agency:

Who will make the disclosure report?

How will this be done (e.g. By letter/ or by telephone and then followed up by letter?)

Who else will be informed?

If No:

Reasons why no report of disclosure will be made:

COMPLETION OF PROCESS

Report sent

Date:

Signed:

Role:

APPENDIX 4 – CONTACT NUMBERS

HSC TRUSTS

Adult Protection Gateway Services

Health and Social Care Trust	Telephone (Mon- to Fri, 9am-5pm)	Email (monitored Mon – Fri, 9am-5pm)
Belfast	028 95041744	adultsguarddutydesk@belfasttrust.hscni.net
Northern	028 94413659	randal.mchugh@northerntrust.hscni.net
South Eastern	028 92501227	adultprotectiongatewayteam@setrust.hscni.net
Southern	028 37564423	adultsafeguard.team@southerntrust.hscni.net
Western	028 71611366	adultsafeguarding.referral@westerntrust.hscni.net

Child Protection Gateway Services

Health and Social Care Trust	Telephone (Mon- to Fri, 9am-5pm)
Belfast	028 90507000
Northern	0300 1234333
South Eastern	0300 1000300
Southern	0800 7837745
Western	028 71314090

Other Statutory Services

Urgent care (GP) Out of Hours	028 38399201
Mental Health Service Emergencies Single point of Referral Service; office hours	028 37412409
Mental Health Service Emergencies Single point of Referral Service; out of hours	028 38334444 028 30835000
Social work out of hours service Regional Emergency Social Work service	028 95049999
Lifeline	0808 808 8000

PSNI

Emergency	999
To report your concerns	101
General Enquiries	0845 600 8000
Crimestoppers	0800 555111

HSE Safeguarding Teams (BORDER COUNTIES)

<https://www.hse.ie/eng/services/list/4/olderpeople/elderabuse/protect-yourself/safeguardprotectteams.html>

APPENDIX 5 – QUICK GUIDE 1 SAFEGUARDING VULNERABLE ADULTS– *The Policy and Legislative Context*

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1.0 Introduction

This Quick Guide is intended to provide more detail on the various pieces of legislation which underpin Relate NI's *Safeguarding Adults at Risk* Policy, and should act as a guide as to the relevant legislative and policy drivers for our safeguarding work.

2.0 The Legislation

Adults at risk are protected in the same way as any other person against criminal acts. If a person commits theft, rape or assault against an adult at risk s/he should be dealt with through the criminal justice system, in the same way as in cases involving any other victim. Where there is a reasonable suspicion that a criminal offence may have occurred, it is the responsibility of the police to investigate and make a decision about any subsequent action. The police should always be consulted about criminal matters.

There are a number of pieces of legislation relating to safeguarding adults at risk which can be accessed through www.opsi.gov.uk. Some of the relevant legislation is as follows:

2.1 *The Criminal Law Act (Northern Ireland) 1967*

Section 5 of the Criminal Law Act (Northern Ireland) 1967 creates an obligation on citizens, if they suspect a serious offence has been committed, to provide the police with any information they may have. In particular, anyone who knows or believes that a "relevant" offence has been committed, and has information which is likely to help to secure the arrest, prosecution or conviction of a suspect, is under a duty to give that information to the police within a reasonable period. A "relevant" offence is either an offence for which the penalty is fixed by law, eg life imprisonment, or one for which someone of 21 years upwards can be sentenced to 5 years' imprisonment. Anyone who fails, without reasonable excuse, to provide information in those circumstances commits an offence under section 5 of the 1967 Act. The maximum custodial punishment for this offence depends on the seriousness of the offence that should have been reported, but the maxima lie between 3 and 10 years. There is one notable exception. A "relevant" offence does not include an offence under Article 20 of the Sexual Offences (NI) Order 2008. This exception means that it is not unlawful if a person does not report to the police information about sexual activity involving a young person under 16 where the other person is under 18. The Act also provides for an exception to the "duty to inform" offence for the victim of the "relevant" offence, or someone acting on his behalf, where the victim is reasonably recompensed by the suspect for any loss or injury

2.2 *The Health and Personal Social Services (Northern Ireland) Orders and the Health and Social Care (Reform) Act (Northern Ireland) 2009*

The Health and Personal Social Services (NI) Order 1972 (the 1972 Order) as amended by the Health and Personal Social Services (NI) Order 1991, the Health and Personal Social Services (NI) Order 1994 and the Health and Social Care (Reform) Act (NI) 2009 (the Reform Act 2009) are key pieces of legislation governing the provision of health and social care in Northern Ireland. The legislation imposes a number of duties including:

- A general duty to promote an integrated system of health and social care designed to secure improvement in the physical and mental health and social well-being of people in Northern Ireland;
- A duty to make arrangements, to such extent as the DOH considers necessary, for the prevention of illness and the care and aftercare of a person suffering from illness;
- A duty to make available advice, guidance and assistance, to such extent as the DHSSPS considers necessary, and to make such arrangements and provide or secure the provision of such facilities as it considers suitable and adequate in order for it to discharge its duty to secure improvement in the social well-being of people in Northern Ireland;
- A duty on health and social services boards (now the Regional Health and Social Care Board under the Reform Act 2009) to make arrangements in respect of their area for the provision of personal medical services.

2.3 The Mental Health (Northern Ireland) Order 1986

The Mental Health (NI) Order 1986 (the 1986 Order) covers the assessment, treatment and rights of people with a 'mental disorder' defined in the Order as 'mental illness, mental handicap and any other disorder or disability of mind'. Learning disability has replaced the term mental handicap in current usage.

While most people with a mental disorder receive care and treatment in the community or in hospital on a voluntary basis, the Order sets out the criteria and process whereby a person may be compulsorily admitted to hospital and, subject to further criteria being met, treated without his or her consent. The 1986 Order gives power to an Approved Social Worker (who is specially trained for the purpose) to make an application for admission to hospital for assessment in respect of a mentally disordered person.

The 1986 Order also contains provisions in relation to the need for a person with mental illness or severe learning disability to receive the less restrictive means of assistance in the form of guardianship in a community care setting. Article 129 of the 1986 Order makes provision for a police officer to enter, if need be by force, any premises specified in a warrant authorised by a Justice of the Peace and remove to a place of safety a person believed to be suffering from mental disorder who (a) has been, or is being, ill-treated, neglected or kept otherwise than under proper control; or (b) being unable to care for him/herself, is living alone.

The 1986 Order sets out offences in relation to the ill treatment or wilful neglect by staff of a patient who is receiving in-patient or out-patient care in a hospital, private hospital or nursing home. Similarly, offences apply to any individual who ill-treats or wilfully neglects a patient who is subject to guardianship under the 1986 Order or who is otherwise in his or her custody or care.

Article 107 of the Mental Health (NI) Order 1986, places a duty on a Health and Social Care (HSC) Trust to notify the Office of Care and Protection¹ if it is satisfied that any person within its area is incapable, by reason of mental disorder, of managing and administering his or her property and affairs. A similar duty is placed on a person managing a nursing home, a residential care home or a private hospital if s/he is satisfied that any person within his/her care is incapable, by reason of mental disorder, of managing and administering his property and affairs.

The Office of Care and Protection may appoint someone, who will have the authority to manage and administer a person's financial affairs. Such a person is called a Controller and is often a relative or close

¹ The Office of Care and Protection is part of the Family Division of the High Court. It operates under the supervision of a Master, who is authorised to exercise any direction, power or other function of the court.

friend. If no relative or friend is willing or able to act, or because there is a disagreement between members of the family as to who should be appointed, the Master can order that the Official Solicitor be appointed as Controller. If circumstances change later the Court can direct a change of Controller. It is important to note that the Controller's authority relates only to finances and does not allow another individual to make welfare or medical decisions on another person's behalf 3 Useful Leaflets published by the Office of Care and Protection can be accessed through www.courtsni.gov.uk

2.4 The Police and Criminal Evidence (Northern Ireland) Order 1989

Codes of Practice issued under the Police and Criminal Evidence (Northern Ireland) Order 1989 state that a person of any age suspected of being mentally disordered or otherwise mentally vulnerable and detained by police must have the support of an appropriate adult. The appropriate adult can be a parent, relative or guardian or someone experienced in dealing with mentally disordered or mentally vulnerable people. Generally if police can't secure the attendance of a parent or guardian then they will contact the Northern Ireland Appropriate Adult Scheme which will provide a trained person to perform the appropriate adult role. MindWise has been contracted by the Department of Justice to deliver the Northern Ireland Appropriate Adult Scheme. The scheme aims to protect and safeguard the rights of young people and mentally vulnerable adults who are detained by the Police. The role of the Appropriate Adult is to make sure an individual is supported and that they fully understand the process during their period in police detention. The scheme is accessible to every designated PSNI station throughout Northern Ireland.

2.5 The Disability Discrimination Act 1995

The Disability Discrimination Act 1995 introduces new laws and measures aimed at ending the discrimination faced by many people with a disability in the fields of employment; access to goods, facilities and services; and the management, buying or renting of property. The discrimination occurs when, for a reason related to an individual's disability, they are treated less favourably than other people to whom the reason does not apply, and this treatment cannot be justified. It also applies when an employer or service provider fails to make a reasonable adjustment in relation to a person with a disability cannot be justified. Further information on the Disability Discrimination Act 1995 can be obtained from www.equalityni.org

2.6 The Race Relations (Northern Ireland) Order 1997

The Race Relations (NI) Order 1997 outlaws discrimination on the grounds of colour, race, nationality or ethnic or national origin. The Irish Traveller community is specifically identified in the Order as a racial group against which racial discrimination is unlawful. The Race Relations Order makes direct racial discrimination, indirect racial discrimination and victimisation unlawful in the fields of employment; access to goods, facilities and services; education; and housing management and disposal of premises. Further information on the Race Relations (NI) Order 1997 can be obtained from www.equalityni.org

2.7 The Public Interest Disclosure (Northern Ireland) Order 1998

The Public Interest Disclosure (NI) Order 1998 protects most workers who 'whistleblow' about wrongdoing in their place of work from suffering detriment from their employer for doing so. Detriment may take the form of denial of promotion or training or dismissal as a consequence of whistleblowing.

The Order sets out a list of situations, which if an employee discloses, should not result in detriment to them. Such situations would include criminal offences, or where there is a danger to the health and safety of individuals.

2.8 The Family Homes and Domestic Violence (Northern Ireland) Order 1998

Domestic violence includes threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional), occurring between adults who are or have been intimate partners or family members. The main purpose of the Family Homes and Domestic Violence (NI) Order is to consolidate the law on domestic violence and occupation of the family home. Under this legislation, a Non-Molestation Order can be issued to prevent the perpetrator from threatening or using violence against the victim. A perpetrator can be forced to leave and stay away from a property by an Occupation Order so as to protect a victim.

2.9 The Northern Ireland Act 1998, Section 75

Section 75 of the Northern Ireland Act 1998 requires public authorities designated for the purposes of the Act to comply with two statutory duties.

The first duty is the Equality of Opportunity duty, which requires public authorities in carrying out their functions relating to Northern Ireland to have due regard to the need to promote equality of opportunity between the nine equality categories of persons of different religious belief, political opinion, racial group, age, marital status or sexual orientation; men and women generally; persons with a disability and persons without and persons with dependants and persons without.

The second duty, the Good Relations duty, requires that public authorities in carrying out their functions relating to Northern Ireland have regard to the desirability of promoting good relations between persons of different religious belief, political opinion and racial group.

Section 75 aims to mainstream consideration of equality of opportunity and good relations in the policy development process. The statutory duties require more than the avoidance of discrimination. Public authorities should actively seek ways to encourage greater equality of opportunity and good relations through their policy development such as, for example, the kind of measures permitted under disability discrimination legislation.

Authorities should give particular consideration to positive action where the impact of a policy will affect different people in a different way, for example, the impact of a policy on people with disabilities. Authorities should take an approach which recognises that certain groups such as people with disabilities may experience higher levels of inequalities than people without disabilities.

The Equality Commission for Northern Ireland recommends that authorities, as part of the policy development process, effectively assess the equality implications of a policy through screening of all policies for equality impact and undertaking an equality impact assessment where appropriate.

Public authorities must consult on screening decisions and equality impact assessments with stakeholders, including those directly affected by the policy. Further information on Section 75 of the Northern Ireland Act 1998 can be obtained from www.equalityni.org

2.10 The Criminal Evidence (Northern Ireland) Order 1999

The Criminal Evidence (NI) Order 1999 introduced a range of special measures to assist vulnerable and intimidated witnesses to give their best evidence in criminal proceedings. This includes giving evidence by live link.

2.11 The Human Rights Act 1998 – enacted 2000

The Human Rights Act 1998 came into effect in 2000 and makes the European Convention on Human Rights part of the law of Northern Ireland. It allows individuals and organisations to go to court or tribunal to seek redress if they believe that the rights conferred on them by the European Convention have been violated by a public authority. The Human Rights Act says that persons carrying out certain functions of a public nature will fall within the definition of a public authority. The courts are still deciding exactly what this means. In any event, following human rights standards, even in matters not strictly covered by the ambit of the Human Rights Act, will be good practice. It should be noted that Section 145 of the Health and Social Care Act 2008 extended the coverage of the Human Rights Act to residents in residential care and nursing homes where their care has been contracted for by HSC Trusts. There are 16 basic rights in the Human Rights Act – all taken from the European Convention on Human Rights. The following have particular relevance to adult safeguarding:

- *Article 2 Right to Life*

Everyone's right to life will be protected by law. This places a positive obligation on public authorities to act in a manner which reduces the risk of harm (including death) to individuals. For example, if staff were aware of an abusive situation and did not take any action to prevent it, and the individual died as a result of the abuse, it could be argued that the authority had failed in respect of its positive duty under Article 2.

- *Article 3 Prohibition of Torture*

No one will be subjected to torture or to inhuman or degrading treatment or punishment. This places a positive duty on public authorities to prevent inhuman or degrading treatment by others, e.g. a care worker mistreating a person using health or social care services. If the public authority was aware of the abuse and did not take steps to prevent this, it could be argued that it had failed in respect of its positive obligations under Article 3.

- *Article 4 Prohibition of Slavery and Forced Labour*

Everyone has an absolute right not to be held in slavery or servitude or to be required to perform forced or compulsory labour. This has relevance in that people who are victims of organised crimes such as human trafficking, prostitution and slavery are adults who are being exploited. There is a positive obligation on public authorities to intervene to stop slavery, servitude or forced or compulsory labour as soon as they become aware of it.

- *Article 5 Right to Liberty and Security*

Everyone has the right to liberty and security of person. No one will be deprived of liberty unless in accordance with a procedure prescribed in law. In terms of safeguarding adults, this has implications for actions such as seclusion, restraint, 'locked door' policies and use of medication. There is a positive obligation on public authorities to intervene to prevent abusive situations in relation to these occurring.

- *Article 6 Right to a Fair Trial*

Everyone has the right to a fair trial and public hearing within a reasonable time by an independent and impartial tribunal established by law. This is relevant in terms of equality of access to justice. It was one

of the drivers behind the development of the Criminal Evidence (NI) Order 1999 and the “Protocol for Joint Investigation of Adult Safeguarding Cases”².

- Article 8 Right to Respect for Private and Family Life

Everyone has the right to a private and family life without interference, except in accordance with the law. A positive duty is also placed on public authorities to ensure others do not infringe the individual’s Article 8 rights.

- First Protocol - Article 1 Protection of Property

A person has the right to the peaceful enjoyment of their possessions. Public authorities cannot usually interfere with things people own or the way they use them, except in specified limited circumstances. This has implications for the prevention of financial abuse.

- First Protocol - Article 2 Right to Education

No person will be denied the right to an education. Adults at risk therefore have the same right to education as everyone else. This has implications, for example, for adults with learning difficulties in terms of their right to sex education. Further information about human rights can be accessed through www.nidirect.gov.uk

2.12 The Health and Personal Social Services Act (Northern Ireland) 2001

The Health and Personal Social Services Act (Northern Ireland) 2001 (the 2001 Act) established the Northern Ireland Social Care Council (NISCC) to regulate the social work profession, and other social care workers, in line with the introduction of similar bodies in England, Scotland and Wales. The 2001 Act also sets out NISCC’s functions with regard to regulating the education and training of social workers. It is the duty of the Council to promote (a) high standards of conduct and practice among social care workers; and (b) high standards in their training. Among other things, NISCC is required to maintain a register of social workers and social care workers; and from time to time publish codes of practice laying down (i) standards of conduct and practice expected of social care workers; and (ii) standards of conduct and practice in relation to employers of social care workers. Individuals have a right of appeal against a decision of NISCC not to register them or to remove them from the register. Appeals are heard by an independent Care Tribunal.

2.13 The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003

The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 (the 2003 Order) is part of a framework designed to raise the quality of services provided to the community and tackle issues of poor performance in health and social care provision. Among other matters, the 2003 Order:

- Established the Regulation and Quality Improvement Authority (RQIA), an independent body, with overall responsibility for monitoring, regulating and reporting on the quality of health and social care services delivered in Northern Ireland;

² The protocol can be accessed through www.hscboard.hscni.net

- Gave RQIA responsibility for and powers to regulate a wide range of care services including many services (establishments and agencies) which had previously been unregulated and many services delivered by the Health and Social Care sector as well as services delivered by the voluntary, community and independent sectors;
- Introduced a common system of regulation based on Minimum Standards set out by the DOH, and supported by a programme of registration and inspection; and
- Reconstituted the main appeals tribunal used by this and other legislation.

The 2003 Order also provides for an appeal against a decision of RQIA in relation to the regulation of establishments and agencies (“Regulated Services”). Appeals are heard by an independent Care Tribunal.

2.14 The Safeguarding Vulnerable Groups (Northern Ireland) Order 2007 (as amended by the Protection of Freedoms Act 2012)

The Safeguarding Vulnerable Groups (NI) Order 2007 establishes certain safeguarding requirements when organisations are recruiting staff and volunteers to certain positions which involve contact with adults at risk.

Under the Order it is an offence for employers to knowingly recruit barred individuals into ‘regulated activity’ with adults. Organisations can ensure that they are complying by requesting an Enhanced Disclosure with Barred List Check from AccessNI, before confirming an appointment in regulated activity.

There is also a requirement for organisations to refer to the Disclosure and Barring Service (DBS), any individual who has harmed or poses a risk of harm to adults, and who has been permanently removed (or would have been had they not left the organisation) from regulated activity.

For more information on the requirements visit www.volunteernow.co.uk or contact the Our Duty to Care Team in Volunteer Now on 028 9023 2020. For further guidance on the DBS referral process visit www.gov.uk/government/organisations/disclosure-and-barring-service

2.15 The Forced Marriage (Civil Protection) Act 2007

A forced marriage is a marriage where one or both people do not or cannot consent to the marriage, this includes where physical force or emotional pressure have been used. This is different from an arranged marriage where families may take a lead role in arranging the marriage but both parties have the free will and choice to accept or decline the arrangement.

The Forced Marriage (Civil Protection) Act 2007 seeks to assist victims of forced marriage, or those threatened with forced marriage. It extends to England and Wales and Northern Ireland. A person threatened with forced marriage can apply to court for a Forced Marriage Protection Order. The Order will contain provisions to prevent the forced marriage from taking place, or to protect a victim of forced marriage from its effects.

Protection measures may include confiscation of passports or restrictions on contact with the victim. A person who violates a Forced Marriage Protection Order may be subject to imprisonment or a fine.

2.16 The Sexual Offences (Northern Ireland) Order 2008

The Sexual Offences (NI) Order 2008 provides a new legislative framework for sexual offences, including offences against people with a mental disorder, as defined in the Mental Health (NI) Order 1986. Articles 43 – 46 relate to offences against people who are unable to legally consent to sexual activity because of a mental disorder. Articles 47 - 50 provide added protection for those who have capacity to consent but might be at risk of exploitation through inducement, threats or deception.

The Order also sets out clear parameters for people working with adults at risk and sets strong penalties for offenders. Articles 51 – 57 contain new offences for people who are engaged in providing care, assistance or services to adults at risk. Under the Order, any sexual activity between a care worker (which includes doctors, nurses and social workers) and a person with a mental disorder is prohibited whilst that relationship of care continues, whether or not the victim appears to consent and whether or not they have the legal capacity to consent. Friends or family members who provide care, assistance or services to the adult also fall within the scope of the Order.

2.17 The Human Trafficking and Exploitation (Criminal Justice and Support for Victims) Act (Northern Ireland) 2015

The Human Trafficking and Exploitation (Criminal Justice and Support for Victims) Act (NI) 2015 aims to provide Northern Ireland with a more robust legal framework in relation to; the prosecution of traffickers and those subjecting people in Northern Ireland to conditions of slavery; the provision of improved support for victims; and tackling the demand for the services of trafficked victims.

The Act establishes a new offence of slavery, servitude and forced or compulsory labour, a new consolidated offence of human trafficking and clarifies that a victim's consent to any act forming part of these offences is irrelevant. It enhances public protection by increasing the maximum sentence for such offences to life imprisonment; introducing a minimum 2 year sentence for such offences, unless there are exceptional circumstances to warrant a lower sentence; and by introducing slavery and trafficking prevention orders (STPOs) which enable courts to restrict the behaviour of any individual convicted, where necessary. Additionally, the Act makes forced marriage an illegal offence in Northern Ireland.

The Act creates a new offence of paying for sexual services of a person, whilst ensuring that the person who is selling sex is not guilty of aiding and abetting, counselling or procuring this offence, conspiring to commit the offence, or encouraging or assisting the commission of the offence. It also places a duty on the DOH to provide a programme of assistance and support for people who want to leave prostitution.

Under the Act, the Department of Justice is required to provide assistance and support to adult potential victims who are referred to the National Referral Mechanism (NRM). Examples of support which may be provided include safe accommodation; help with living/travel costs; help to access healthcare; sign-posting to immigration advice; sign-posting to independent legal advice and advice on compensation; help to access counselling or other therapeutic services; and interpreter/translation services.

The Act also introduces new measures aimed at protecting victims of human trafficking and slavery-like offences during investigations and criminal proceedings. This includes the introduction of a statutory defence for victims who have been compelled to commit offences as a direct consequence of their trafficking or slavery situation.

Under the Act, victims of human trafficking and slavery-like offences are protected in respect of avoiding secondary victimisation in police interviews and are automatically eligible for special measures in court when giving evidence.

2.18 Domestic Abuse & Civil Proceedings Act (Northern Ireland) 2021

According to section 1 of the Domestic Abuse and Civil Proceedings Act (Northern Ireland) 2021, it is a criminal offence to engage in a course of behaviour that is abusive of another person where the parties are personally connected to each other; a reasonable person would consider the course of behaviour to be likely to cause physical or psychological harm; and the perpetrator intends the course of behaviour to cause physical or psychological harm, or is reckless as to whether the course of behaviour causes such harm. 'Psychological harm' includes fear, alarm and distress.

Under section 2, behaviour that is abusive includes, in particular, behaviour that is violent or threatening. Abusive behaviour also includes behaviour which has the effect of making the victim dependent on, or subordinate to, the perpetrator; isolating the victim from friends, family members or other sources of social interaction or support; controlling, regulating or monitoring the victim's day-to-day activities; restricting the victim's freedom of action; or making the victim feel frightened, humiliated, degraded, punished or intimidated.

According to section 5(2), the parties are 'personally connected' if they are, or have been, married to each other or civil partners of each other; they are living together, or have lived together, as if spouses of each other; they are, or have been, otherwise in an intimate personal relationship with each other; or they are members of the same family. Under section 8(1) the offence is aggravated if the victim was under the age of 18 at the time when the offence was committed; and under section 9(1), the offence is also aggravated if a relevant child is involved, for example if a child witnessed the offence taking place.

According to section 14, a person who commits the domestic abuse offence is liable, on summary conviction, to imprisonment for a term not exceeding 12 months or a fine (or both) or, on conviction on indictment, to imprisonment for a term not exceeding 14 years or a fine (or both). However, under section 12, it is a defence to show that the course of behaviour in question was reasonable in the particular circumstances, and under section 11(1), a person does not commit the domestic abuse offence if the course of behaviour was carried out in relation to someone for whom they have responsibility and who is under the age of 16

3.0 Policy Context

A new regional adult safeguarding policy "Adult Safeguarding: Prevention and Protection in Partnership" was launched in July 2015. The policy was jointly developed and published by the Department of Health (DOH) and the Department of Justice (DOJ) on behalf of the Northern Ireland Executive. The aim of the policy is to improve safeguarding arrangements for adults who are at risk of harm from abuse, exploitation or neglect. It sets out how the Northern Ireland Executive intends adult safeguarding to be taken forward across all Government Departments, their agencies and in partnership with the voluntary, community, independent and faith organisations. A key objective is to reduce the incidence of harm of adults who are at risk; to provide them with effective support and, where necessary, protective responses and access to justice for victims and their families.

Organisations should take time to read the new regional policy and associated operational procedures to ensure they are meeting their safeguarding expectations. "Adult safeguarding: Prevention and Protection in Partnership" can be accessed at www.health-ni.gov.uk/publications/adult-safeguarding-prevention-and-protectionpartnership-key-documents

