

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management



Housing Management Safeguarding Policy

Children & Adults at Risk

1. Introduction

- 1.1. The safeguarding of adults and children is a statutory duty for Local Authorities.
- 1.2. The Care Act 2014 and the 1989 and 2004 Children Acts make it clear that safeguarding is everyone's responsibility and that professionals, organisations and local authorities must work in partnership when carrying out their duties under the relevant legislation.
- 1.3. When working with adults The Care Act 2014 makes it a duty on local authorities to promote individual well being in the exercise of its functions and to safeguard adults with care and support needs at risk of or experiencing abuse or neglect.
- 1.4. When working with children the 1989 and 2004 Children Acts set out the duties on the local authority to safeguard and promote the welfare of all children and young people in their area.
- 1.5. The Royal Borough of Kensington & Chelsea's approach to these requirements is set out in its corporate safeguarding policy and overseen by the Local Safeguarding Children Board for Kensington and Chelsea, Hammersmith and Fulham and Westminster, and the Bi-Borough Safeguarding Adults Board.

2. Safeguarding Policy for Housing Management

- 2.1. This policy aims to complement and work in tandem with the relevant statutory safeguarding policy¹ and guidance.

¹ London Multi-agency Adult Safeguarding Policy and Procedures 2019
London Child Protection Procedures and Practice Guidance 2019

Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

2.2. It draws on and reflects the relevant legislation and guidance on safeguarding for both children and adults at risk and sets out the housing management service's aims, role and responsibilities for ensuring effective safeguarding in partnership with other agencies. It includes:

- Definitions of safeguarding and those who may be at risk.
- Types of abuse and neglect.
- How the housing management service may be involved in identifying instances of abuse or neglect.
- How we will respond to instances of abuse and neglect.
- How we will share information and work with others.

2.3. This policy is supported and followed by procedures and guidance (page 8) outlining the escalation and referral process for housing management staff.

2.4. For the purposes of this policy safeguarding is taken to mean protecting children and adults at risk from abuse, neglect, maltreatment or significant harm. The following, more detailed definitions of safeguarding reflect the relevant legislation or official guidance.

2.5 Guidance and legislation

The following are the key policies, procedures and codes of practice that will inform our practice at all times:

- Pan London Safeguarding Adult Procedures
- Mental Capacity Act Code of Practice
- Deprivation of Liberty Safeguards Code of Practice
- Bi-Borough Safeguarding Adults Handbook
- Safeguarding adults from neglect or abuse
- Neglect matters
- Threshold of needs guide
- Children Act 1989 / 2004
- Working Together to Safeguard Children 2018
- Local LSCB guidance
- London Child Protection Procedures
- Care Act 2014
- Crime and Disorder Act 1998
- Human Rights Act 1998

3. Safeguarding Children

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

3.1. In the Government's guidance ' Working Together To Safeguard Children' (Updated 2018) safeguarding and promoting the welfare of children is defined as:

- Protecting children from maltreatment.
- Preventing impairment of children's health or development.
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care.
- Taking action to enable all children to have the best outcomes.

4. Safeguarding Adults

4.1. The Care Act 2014 defines safeguarding as protecting an adult's right to live in safety, free from abuse and neglect and promoting the adult's wellbeing.

4.2. It is aimed at people with care and support needs who may be in vulnerable circumstances and at risk of harm, abuse, neglect or exploitation.

4.3. The guidance also states that local authorities should not limit their view of what constitutes abuse or neglect, as they can take many forms and the circumstances of the individual case should always be considered.

4.4. Incidents of abuse may also be one-off or multiple and affect one person or more. Professionals and others should look beyond single incidents or individuals to identify patterns of harm. (Care Act Guidance para 14.18).

5. How we identify children or adults who may be at risk

5.1. Government guidance² provides examples of the personal circumstances or care and support needs of children and adults which may help identify them as needing early help or being particularly at risk.

6. Children who may be at risk

6.1. Government guidance in 'Working Together to Safeguard Children' 2018 defines a child as being anyone who has not yet reached their 18th birthday.

² Care and Support Statutory Guidance updated Oct 2018 & 'Working Together to Safeguard Children' 2018

Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

6.2. It indicates that providing early help is crucial in safeguarding children and requires all staff to understand their role in identifying emerging problems and sharing information with other professionals.

6.3. We will ensure housing management staff are alert in particular to the potential need for early help for a child who:

- Is disabled and has specific additional needs.
- Has special educational needs.
- Is a young carer.
- Is showing signs of engaging in anti-social or criminal behaviour.
- Is in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health problems or domestic violence.
- Has returned home to their family from care.
- Is showing early signs of abuse or neglect
- Is vulnerable to exploitation including criminal and sexual.

7. Adults who may be at risk

7.1. The safeguarding duties apply to an adult who:

- has needs for care and support (whether or not the local authority is meeting any of those needs)
- is experiencing, or at risk of, abuse or neglect
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect

7.2. Some adults may be more at risk of abuse because they are

- Elderly or frail due to ill health.
- Have a physical disability, sensory impairment or a long-term illness/condition.
- Have mental health needs including dementia or a personality disorder.
- Have a learning disability.
- Unable to demonstrate capacity to make a decisions
- Dependent on alcohol, illegal drugs or medication.
- A care leaver
- Unable to protect themselves against abuse or neglect

8. Six key principles underpin all adult safeguarding work

- **Empowerment**

Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

- People being supported and encouraged to make their own decisions and informed consent.
- **Prevention**
- It is better to take action before harm occurs.
- **Proportionality**
- The least intrusive response appropriate to the risk presented.
- **Protection**
- Support and representation for those in greatest need.
- **Partnership**
- Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.
- **Accountability**
- Accountability and transparency in delivering safeguarding.

9. Making safeguarding personal

9.1 Making safeguarding personal means the safeguarding process should be person-led and outcome-focused. It should engage the person in a conversation about how best to respond to their safeguarding situation in a way that enhances involvement, choice and control as well as improving quality of life, wellbeing and safety.

9.2 Nevertheless, there are key issues that should be considered if there is a suspicion or staff are made aware of abuse or neglect. If the adult has the mental capacity to make informed decisions about their safety and they do not want any action to be taken, this does not preclude the sharing of information with relevant professional colleagues. This is to enable professionals to assess the risk of harm and to be confident that the adult is not being unduly influenced, coerced or intimidated and is aware of all the options. This will also enable professionals to check the safety and validity of decisions made. It is good practice to inform the adult that this action is being taken unless doing so would increase the risk of harm.

10. Sources of Risk

Identifying Risk

10.1 Not every situation or activity will entail a risk that needs to be assessed or managed. The risk may be minimal and no greater for the adult, than it would be for any other person.

- Risks can be real or potential;
- Risks can be positive or negative;

Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

- Risks should take into account all aspects of an individual's wellbeing and personal circumstances.

10.2 Sources of risk might fall into one of the four categories below:

- Private and family life: The source of risk might be someone like an intimate partner or a family member which is domestic abuse;
- Community based risks: This includes issues like 'mate crime', anti-social behaviour, and gang-related issues; radicalisation, cuckooing, county lines
- Risks associated with service provision: This might be concerns about poor care which could be neglect or organisational abuse, or where a person in a position of trust because of the job they do financially or sexually exploits someone;
- Self-neglect: Where the source of risk is the person themselves.

11. Types of abuse

11.1 Incidents of abuse may be one-off or multiple, and affect one person or more. Professionals and others should look beyond single incidents or individuals to identify patterns of harm, just as the CCG, as the regulator of service quality, does when it looks at the quality of care in health and care services. Repeated instances of poor care may be an indication of more serious problems and of what we now describe as organisational abuse. In order to see these patterns it is important that information is recorded and appropriately shared.

11.2 Patterns of abuse vary and include:

- serial abuse, in which the perpetrator seeks out and 'grooms' individuals. Sexual abuse sometimes falls into this pattern as do some forms of financial abuse
- long-term abuse, in the context of an ongoing family relationship such as domestic violence between spouses or generations or persistent psychological abuse
- opportunistic abuse, such as theft occurring because money or jewellery has been left lying around

11.3 We recognise that abuse and neglect can take many forms such as the following:

11.4 Physical abuse including:

- assault
- hitting
- slapping
- pushing
- misuse of medication
- restraint
- inappropriate physical sanctions

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

11.5 Domestic abuse including:

- psychological
- physical
- sexual
- financial
- emotional abuse
- so called 'honour' based violence

We recognise that domestic abuse isn't always physical. Coercive control is an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten the adult at risk. This controlling behaviour is designed to make the adult dependent by isolating them from support, exploiting them, depriving them of independence and regulating their everyday behaviour.

11.6 Sexual abuse including:

- rape
- indecent exposure
- sexual harassment
- inappropriate looking or touching
- sexual teasing or innuendo
- sexual photography
- subjection to pornography or witnessing sexual acts
- sexual assault
- sexual exploitation and/or acts to which the adult has not consented or was pressured into consenting

11.7 Psychological abuse including:

- emotional abuse
- threats of harm or abandonment
- deprivation of contact
- humiliation
- blaming
- controlling
- intimidation
- coercion
- harassment
- verbal abuse
- cyber bullying
- isolation
- unreasonable and unjustified withdrawal of services or supportive networks

11.8 Financial or material abuse including:

- theft
- fraud
- internet scamming
- coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

- the misuse or misappropriation of property, possessions or benefits
- other scams such as telephone, postal, doorstep and/or distraction burglary

Financial abuse is the main form of abuse investigated by the Office of the Public Guardian both amongst adults and children at risk. Financial recorded abuse can occur in isolation, but as research has shown, where there are other forms of abuse, there is likely to be financial abuse occurring. Although this is not always the case, everyone should also be aware of this possibility.

The report 'The Financial Abuse of Older People' provides further information.

11.9 Modern slavery encompasses:

- slavery
- human trafficking
- forced labour and domestic servitude.
- traffickers and slave masters using whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment

Read Modern slavery:how the UK is leading the fight for further information.

11.10 Discriminatory abuse including forms of:

- harassment
- slurs or similar treatment:
 - because of race
 - gender and gender identity
 - age
 - disability
 - sexual orientation
 - religion

Read Discrimination: your rights for further information.

11.11 Organisational abuse

Including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

11.12 Neglect and acts of omission including:

- ignoring medical, emotional or physical care needs
- failure to provide access to appropriate health, care and support or educational services
- the withholding of the necessities of life, such as medication, adequate nutrition and heating

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

11.13 Self-neglect

This covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding.

11.15 Female genital mutilation (FGM)

Involves procedures that intentionally alter or injure female genital organs for non-medical reasons. The procedure has no health benefits for girls and women. The Female Genital Mutilation Act (2003) makes it illegal to practise FGM in the UK or to take girls who are British nationals or permanent residents of the UK abroad for FGM whether or not it is lawful in another country.

Further information on safeguarding women and girls at risk of FGM is available via this link: www.gov.uk/government/publications/safeguardingwomen-and-girls-at-risk-of-fgm

11.16 Forced marriages

Is a term used to describe a marriage in which one or both of the parties are married without their consent or against their will. A forced marriage differs from an arranged marriage, in which both parties consent to the assistance of a third party in identifying a spouse.

11.17 Hate crime

The police define 'hate crime' as 'any incident that is perceived by the victim, or any other person, to be racist, homophobic, transphobic or due to a person's religion, belief, gender identity or disability'. It should be noted that this definition is based on the perception of the victim or anyone else and is not reliant on evidence. In addition, it includes incidents that do not constitute a criminal offence. The police monitor five strands of hate crime:

- disability
- race
- religion
- sexual orientation
- transgender.

11.18 Honour-based violence

Will usually be a criminal offence, and referring to the police must always be considered. It has or may have been committed when families feel that dishonour has been brought to them. Women are predominantly (but not exclusively) the victims and the violence is often committed with a degree of collusion from family members and/or the community.

11.19 Human trafficking

This problem has a global reach covering a wide number of countries. It is run like a business with the supply of people and services to a customer, all for the purpose of making a profit. Traffickers exploit the social, cultural or financial vulnerability of the victim and place huge financial and ethical obligations on them. They control almost every aspect of the victim's life, with little regard for the victim's welfare and health.

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

11.20 Mate crime

A 'mate crime' as defined by the Safety Net Project is 'when vulnerable people are befriended by members of the community who go on to exploit and take advantage of them. It may not be an illegal act but still has a negative effect on the individual.'

Mate crime is often difficult for police to investigate, due to its sometimes ambiguous nature. Mate crime is carried out by someone the adult knows and often happens in private.

11.21 Restraint

Unlawful or inappropriate use of restraint or physical interventions. Someone is using restraint if they use force, or threaten to use force, to make someone do something they are resisting, or where an adult's freedom of movement is restricted, whether they are resisting or not.

Restraint covers a wide range of actions. It includes the use of active or passive means to ensure that the person concerned does something, or does not do something they want to do, for example, the use of key pads to prevent people from going where they want from a closed environment.

11.22 Radicalisation

Radicalisation is comparable to other forms of exploitation, such as grooming and Child Sexual Exploitation. The aim of radicalisation is to attract people to their reasoning, inspire new recruits and embed their extreme views and persuade vulnerable individuals of the legitimacy of their cause. This may be direct through a relationship, or through social media.

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.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

12. How the Housing Management Service may be involved in the prevention of abuse

12.1. Safeguarding issues may be brought to the attention of staff directly by residents, neighbours, contractors or other agencies in contact with residents or their families. In addition, housing management staff working with residents or entering residents homes to carry out visits, repairs, inspections or interviews may encounter situations causing concern for someone's welfare.

For example:

- Children or adults at risk whose care needs appear to be neglected or who appear to be subject to deliberate mistreatment.
- Adults at risk of financial abuse which may be indicated by a lack of heating, clothing or food, inability to pay bills/unexplained shortage of money, unexplained withdrawals from an account, unexplained loss/misplacement of financial documents, the recent addition of authorised signers on a client or donor's signature card, sudden or unexpected changes in a will or other financial documents. Children or adults who say they are being abused.
- Signs of self-neglect such as hoarding, unsanitary conditions, or alcohol or substance misuse.
- Repeated instances of poor or neglectful care by health and social care professionals or workers
- Neglect of a person's needs because those around them are unable to be responsible for their care, for example signs a carer may have difficulties caused by poor health, debt, alcohol or mental health problems.
- Difficulties in maintaining tenancy such as arrears or neighbour problems or harassment which may be linked to a learning difficulty or mental health problems and giving rise to exploitation, financial abuse or harassment.
- Where there is known or suspected domestic abuse.

12.2. We will ensure staff are trained to identify the wide range of circumstances in which potential victims of neglect or abuse may present.

12.3. The training that our staff will take will include the following:

Safeguarding Training for all HM staff:

- Best Practice Safeguarding Roadshow (Available in Learning Zone)
- Introduction to Safeguarding Children (Available in Learning Zone)
- Self-Neglect and Hoarding Awareness (Available in Learning Zone)
- Introduction to Safeguarding Adults (Being developed for Learning Zone)

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

Additional Safeguarding Training for HM departmental Leads:

- Safeguarding Adults Enquiries and the role of service providers (Available in Learning Zone)

12.4. Guidance for front line staff working with adults is also set out in the handbook 'Safeguarding adults from neglect or abuse' which sets what abuse is, the legal context and the responsibilities of front line staff who may come into contact with possible cases of abuse and neglect in adults.

12.5. Guidance for staff working with children is set out in 'Neglect Matters' and 'Thresholds of need guide' which help staff to identify possible cases of neglect and officer guidance on how to respond.

13. How we will respond to suspected abuse or neglect

13.1. We recognise that abuse, neglect or harm can arise in a range of settings and may be perpetrated by a wide range of people including relatives and family members, professional staff, volunteers, other service users, neighbours, friends and associates, or strangers.

13.2. The Housing Management Service will endeavour to safeguard children, young people and adults at risk in the ways outlined in the following sections.

14. Agreed procedures

14.1. We will provide guidance and appropriate safeguarding procedures for housing management staff to ensure the timely reporting, management and referral of concerns or suspicions of abuse and neglect of children, young people and adults at risk. This is set out in the Housing Management Safeguarding Procedure.

14.2. Procedures include guidance and arrangements for supporting children and adults at risk and working with different agencies across different local authority areas.

15. Recruitment, induction and training of staff

15.1. We will ensure the selection and recruitment of staff, contractors and agencies takes into account the need to promote the safeguarding of children and adults. This will include the following:

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

- 15.2. All members of frontline staff who have regular contact with adults at risk or children will be subject to employment checks and Disclosure and Barring Service checks, where appropriate.
- 15.3. As part of their induction in the Housing Management Service, all appropriate staff will be required to read and understand this policy and related guidance and procedures.
- 15.4. Staff will receive training in the legal responsibilities and duties in relation to safeguarding and how to identify signs of abuse and neglect, recognise harm and make appropriate referrals.

16. Management and supervision

- 16.1. We will provide direction about the service's responsibilities and the promotion of effective practice in relation to safeguarding through regular management and supervision of staff and contractors, the monitoring of performance, reporting, complaints and annual review of policy and notable practice.
- 16.2. Managers will ensure through regular supervision that policy and procedure is adhered to and that adequate arrangements with other parts of the council and other agencies are in place to ensure effective safeguarding and communication. Safeguarding will be a regular item on team meeting agendas and will be included as part of staff supervision.
- 16.3. We will ensure all staff are enabled to challenge inappropriate behaviour in others, are able to access whistle blowing procedures and that any issues relating to the conduct of staff are addressed through appropriate procedures.

17. Sharing information

- 17.1. We will ensure that all housing management staff understand government guidance for sharing information with other professionals and that information is shared effectively and efficiently to support early identification and assessment of any concerns.
- 17.2. As a directorate of RBKC, Housing Management shares the commitment to ensure that all data is in accordance with GDPR 2018 and the Data Protection Act 2018. We will ensure that all data is:
 - processed lawfully, fairly and in a transparent manner
 - collected for a specific and legitimate purpose and not used for anything other than this stated purpose, or as provided for in our privacy and fair processing notices

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

- relevant and limited to whatever the requirements are for which the data is processed
- accurate, and where necessary, kept up to date. Any identified inaccuracies will be amended or removed without undue delay
- stored for as long as required, as specified within RBKC's Records Retention policy
- secured with appropriate solutions, which protect the data against unauthorised or unlawful processing and accidental loss, destruction or damage.
- For further information about the Council's commitment to the General Data Protection Regulations (GDPR), visit the Council's website at www.rbkc.gov.uk.

17.3. We will ensure the information we share is necessary for the purpose for which we are sharing it, it is shared only with those who need to have it, is accurate and up to date and shared securely.

17.4. We will be open about what and with whom information will, or could be shared unless by doing so puts the adult at increased risk of harm, seeking consent and respecting confidentiality except where we consider safety or wellbeing of the adult or others to be at risk.

17.5. If staff are in any doubt about sharing the information concerned without disclosing the identity of the individual where possible they should contact either the Corporate Information Team or the Housing Management Data Co-Ordinator.

17.6. We will routinely review our data sharing arrangements to ensure that they are still appropriate.

18. Working with others

18.1. We recognise that safeguarding is achieved through good joint working with other agencies, organisations and across local authority boundaries. This is an important consideration for the council which owns and manages housing across the local authority area.

18.2. As a provider of social housing and support services we will build and maintain partnerships and effective referral procedures with other local authorities, agencies and organisations to safeguard children and adults at risk.

19. Monitoring and review

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

- 19.1. This policy and its related guidance and procedures will be kept under review (at least annually) by the Housing Management Safeguarding Group and amended to reflect any change in legislation, national guidance or local practice as necessary.

Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

Housing Management Safeguarding Procedure

1. Introduction

All individual regardless of age, ability, race, gender, sexual orientation, faith or beliefs, should have the greatest possible control over their lives.

People should be able to live as independently as possible and to take informed decisions about their own lifestyles, including the opportunity to takes risks if they choose to do so, without fear of harm or abuse from others.

1.1. Housing Management recognises that it may often be difficult for victims of abuse to disclose or report instances of abuse. This may be for a number of possible reasons, such as:

- Fear.
- Stigma.
- Not realising it is abuse.
- Not knowing how to report it.
- Think they won't be taken seriously.
- Learned helplessness.
- Not being able to see any solutions.
- Feeling ashamed.
- Not wanting to get someone else in trouble.
- Lacking capacity or experiencing poor mental health.

1.2. Overcoming these barriers is key to ensuring that no abuse goes unnoticed or unaddressed, and Housing Management aims to achieve this by:

- Engaging and developing joint working protocols with key agencies such as social care, mental health, environmental services, and the police.
- Regularly exploring barriers to reporting abuse with customers during residents meetings, information sharing events and key working sessions. This includes discussing example cases, promoting awareness and reporting processes.
- Using training, team meetings, and supervision to ensure staff are aware of how to recognise and respond to abuse, and how to empower and encourage customers to report it.
- Encouraging services to review and learn for each safeguarding concern raised by considering the need for service improvements and overcoming barriers as part of every safeguarding enquiry.

Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

1.3 What is expected of our staff

We expect all staff to adhere to the following principles

- 1 Ignoring abuse is not an option – if at any time staff think that an adult or child with care and support needs is being abused or is at risk of abuse they must report their concerns so that they can be looked into.
- 2 If staff come across a situation where they think or have been told about an adult or child at risk of abuse they must not ignore the information. They must not assume that others know about it. They must tell someone so that others can help.
- 3 Adults and children have human rights. Staff have a duty of care to ensure the rights and needs of the individual are the main consideration.
- 4 If at any time you feel the person needs urgent medical assistance call for an ambulance or arrange for a doctor to see the person at the earliest opportunity.
- 5 If at the time you have reason to believe the adult or child is in immediate and serious risk of harm or that a crime has been committed call the police
- 6 If someone tells a member of staff something that causes them to be concerned they must:
 - Keep calm; this will help the person.
 - Make sure that the person is safe.
 - Listen carefully to what is said.
 - Do not question except to clarify and ensure that they understand what is being said.
 - Clarify what they want to do or what they would like to happen.
 - Do not make promises that cannot be kept.
 - Do not promise confidentiality, information must be passed on
 - Reassure and take care of the person.
- 7 Record everything that they saw, heard and did. Record the facts of what happened.
- 8 They must pass on any concerns immediately to their manager and in particular seek support if they are unsure about the risks observed or disclosed.

Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

2. Confidentiality, reporting and recording procedure

- 2.1. Whilst every effort will be made to ensure that confidentiality is preserved this will be governed by what may be an overriding need to protect a person who has been or is at risk of abuse or neglect.
- 2.2. The law does not prevent the sharing of sensitive, personal information **within** organisations if the information is confidential, but there is a safeguarding concern.
- 2.3. The law also does not prevent the sharing of sensitive, personal information **between** organisations where the public interest served outweighs the public interest served by protecting confidentiality – for example, where a serious crime may be prevented.
- 2.4. In those instances where the adult lacks the mental capacity to give informed consent, staff should always bear in mind the requirements of the Mental Capacity Act 2005, and whether sharing it will be in the person's best interest. Staff should refer to the handbook 'Safeguarding Adults from Neglect or Abuse' for further guidance.
- 2.5. If an allegation or suspicion of abuse is discovered by any housing management member of staff, representative or contractor, they should where there is an immediate danger, requirement to immediately protect or minimise risks to someone, someone needs urgent medical attention, or you think a criminal offence has been committed - **call the relevant emergency services (999) and alert social services (020 7361 3013) immediately**. Emergency or life-threatening situations can justify the sharing of relevant information with the relevant emergency services without consent.
- 2.6. Otherwise for non-urgent situations, inform and seek advice from the designated or any available Safeguarding Champion (appendix 1), or their line manager or the Housing Management Safeguarding Officer as soon as possible, so that any concerns can be escalated to Adult Social Care in a timely manner. Where appropriate - be conscious/remain aware of the need to ensure that any relevant evidence is preserved.
- 2.7. Adults may not give their consent to the sharing of safeguarding information for a number of reasons. For example, they may be unduly influenced, coerced or intimidated by another person, they may be frightened of reprisals, they may fear losing control, they may not trust social services or other partners, or they may fear that their relationship with the abuser will be damaged. Reassurance and

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

appropriate support may help to change their view on whether it is best to share information. Staff should consider the following:-

- Explore the reasons for the adult's objections – what are they worried about?
- Explain the concern and why you think it is important to share the information
- Tell the adult with whom you may be sharing the information with and why
- Explain the benefits, to them or others, of sharing information – could they access better help and support?
- Discuss the consequences of not sharing the information – could someone come to harm?
- Reassure them that the information will not be shared with anyone who does not need to know
- Reassure them that they are not alone and that support is available to them.

2.8. If, after this, the adult refuses intervention to support them with a safeguarding concern, or requests that information about them is not shared with other safeguarding partners, in general, their wishes should be respected. However, there are a number of circumstances where staff can reasonably override such a decision, including:

- Emergency or life-threatening situations may warrant the sharing of relevant information with the emergency services without consent
- Other people are, or may be, at risk, including children
- Sharing the information could prevent a serious crime
- A serious crime has been committed
- The risk is unreasonably high
- Staff are implicated
- The adult lacks the mental capacity to make that decision – this must be properly explored and recorded in line with the Mental Capacity Act

A person's mental capacity must be judged according to the specific decision that need to be made at a particular time, and not solely because of their illness. Therefore, it is wrong to label someone as lacking capacity to make a certain category of decisions as a whole, e.g. all safeguarding decisions.

Staff should refer to the 'Safeguarding adults from neglect and abuse' handbook for further guidance

2.9. For children staff will attempt to gain the consent of the child's guardian to make a referral to another agency. However, the gaining of the consent is not essential in order for information to be passed on.

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

- 2.10. Housing Management staff's role is to always respond, record and escalate any allegation or suspicion of abuse.
- 2.11. It is not Housing Management staff's responsibility to decide whether abuse has taken place or not, however it is our responsibility to pass on accurate information to the appropriate authority immediately.
- 2.12. Housing Management staff should not carry out an enquiry of the incident. This will be carried out by the council's Adult Social Care social work teams or if the adult has mental health needs by Central North West London Mental Health Trust.
- 2.13. To ensure a prompt and timely escalation, the person reporting the abuse should complete and handover the council's Safeguarding Referral Form (appendix 2) to their designated or any available Safeguarding Champion (appendix 1), or their line manager or the Housing Management Safeguarding Officer as soon as possible. Information should accurately recorded, as the information may be used in the event of any subsequent investigation or criminal prosecution.
- 2.14. If there is any doubt about whether or not to report an issue to Social Services then it should be reported.
- 2.15. If the suspected abuse relates to self-neglect or hoarding staff should also refer to the Housing Management Self-Neglect and Hoarding Policy and Procedure, and alert the relevant neighbourhood management team in order to initiate a Self-Neglect and Hoarding Referral (appendix 3) to social services and review if any additional measures – such as a Tenancy Home visit, LFB HFSV etc. – is needed.
- 2.16. All concerns and/or referrals made by housing management staff, representatives and contractors should go to the Social Care single point of contact, Social Services Line. Their contact details are:
- Social Services Line: 020 7361 3013 (including out of hours)
 - Emergency Duty Team: 020 7373 2227
 - Fax: 0207 368 0228 (office hours only)
 - Secure Email: socialservices@rbkc.gov.uk.cjsm.net
 - Email: socialservices@rbkc.gov.uk
- 2.17. Making and retaining records is important at all stages of this process, so Housing Management staff should also ensure all alerts and referrals relating to council resident's and occupants are added and securely stored as cases against the relevant tenancy or property on the Housing Management CRM system.

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

- 2.18. Where the alleged abuser is a Housing Management member of staff, representative or contractors the council's disciplinary procedure will also be followed.

3 Whistleblowing

- 3.1 It is everybody's responsibility to alert managers where there are concerns about the abuse of adults or children at risk. Whilst it is not easy to complain about a colleague's behaviour, everyone's first concern must be the safety and wellbeing of service users.
- 3.2 Whistleblowing is the popular term used to describe when someone within an organisation contacts someone outside of their normal operational management to share information about a matter that is concerning them.
- 3.3 Our whistleblowing policy can be found on KCnet under the Human Resources section
- 3.4 As long as it is not motivated by malice, 'whistle blowing' is viewed as a vital and responsible safety valve. Whistle-blowers at work will receive statutory protection from being victimised or dismissed, provided that the information they disclose meets certain criteria.
- 3.5 In most instances staff are willing to voice concerns to their line manager but occasionally something prevents this from happening – a belief that they will not be taken seriously or because the manager is believed to be the cause of concern. In these instances, it is legitimate, indeed important in terms of safeguarding adults, that another channel is available.
- 3.6 As a first step, staff should normally raise concerns with their immediate manager or their superior. This depends, however, on the seriousness and sensitivity of the issues involved and who is thought to be involved in the malpractice.
- 3.7 Whenever reporting wrong doing:
- If desired, everything possible will be done to respect confidentiality. However, it may be necessary to take a statement as part of the enquiry and enforcement process
 - Staff will not be required to prove their allegation, but they will be asked to give as much detail as possible.
- 3.8 If staff feel management are in some way involved or are condoning the activity they should approach Human Resources or the Director of Internal Audit, Fraud, Risk Management and Insurance. The contact points for these are

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

- Director of Human Resources, Debbie Morris, 020 7361 2136
- Director of Audit, Risk, Fraud and Insurance David Hughes, 07817507695

3.9 Trade Unions: employees may wish to be represented by or seek the advice of their staff representative when using the provisions of this policy. The majority of Trade Unions have issued their own guidance on reporting concerns and RBKC endorses the trade union officers' role in this area. The principal staff side contacts are:

- Unison: 0845 355 0845
- GMB: 020 7736 5683

3.10 Public Concern at Work (telephone 020 7404 6609) also provides independent legal advice and support to anyone who is concerned about something that is happening in their workplace.

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management


Appendix 1 – Housing Management Safeguarding Champions/Lead Officer

Department/Service Area	Champion	Job Title	Contact details
Neighbourhood Management	TBC		
Repairs	TBC		
Asset & Regeneration	TBC		
Customer Services	TBC		
Supported Housing	TBC		

Housing Management Safeguarding Officer	Hash Chamchoun	Head of Supported Housing	020 7605 6509 Hash.Chamchoun@rbkc.gov.uk
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.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

Appendix 2: Safeguarding Referral Form



**THE ROYAL BOROUGH OF
KENSINGTON
AND CHELSEA**

Safeguarding Adults Referral Form

To be completed by a staff member or a third party who witnessed or was informed about the alleged or suspected abuse.

LOCAL AUTHORITY CONTACT DETAILS

Social Services Line: 020 7361 3013

Emergency Duty Team: 020 7373 2227

Fax: 020 7368 0228 (office hours only)

Secure Email: socialservices@rbkc.gov.uk.cjsm.net

Email: socialservices@rbkc.gov.uk

The referrer must send in the referral form to social services line immediately or within 24 hours of the safeguarding concern coming to notice. If in doubt please call to discuss

DETAILS OF THE ADULT BEING REFERRED					
NAME					
ADDRESS					
DOB		AGE		GENDER	

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

ALLEGED, SUSPECTED , WITNESSED OR REPORTED ABUSE / NEGLECT INCIDENT(S)				
DESCRIPTION OF THE ALLEGED, SUSPECTED OR WITNESSED INCIDENT (WHAT WAS SEEN, WHEN AND WHERE, WHAT WAS SAID, WHO ELSE WAS PRESENT ETC)				
DATE & TIME OF ALLEGED, SUSPECTED OR WITNESSED ABUSE OR NEGLECT		DATE & TIME CONCERN REPORTED		
IN YOUR OPINION DOES THE ADULT HAVE NEEDS FOR CARE & SUPPORT (WHETHER OR NOT THE LOCAL AUTHORITY IS MEETING ANY OF THOSE NEEDS)?	Yes <input type="checkbox"/> No <input type="checkbox"/> Not Known <input type="checkbox"/>	IS THE ADULT EXPERIENCING OR AT RISK OF ABUSE OR NEGLECT?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
AS A RESULT OF THOSE CARE & SUPPORT NEEDS IS THE ADULT UNABLE TO PROTECT THEMSELVES FROM EITHER THE RISK OF OR THE EXPERIENCE OF ABUSE OR NEGLECT?	Yes <input type="checkbox"/> No <input type="checkbox"/> Not Known <input type="checkbox"/> Please give details :			
ABUSE SETTING	Own Home	<input type="checkbox"/>	Supported Housing	<input type="checkbox"/>
	Residential Care (permanent)	<input type="checkbox"/>	Nursing Care (permanent)	<input type="checkbox"/>
	Residential Care (temporary)	<input type="checkbox"/>	Residential Care (temporary)	<input type="checkbox"/>
	Home of person alleged to have caused the harm	<input type="checkbox"/>	Mental health inpatient setting	<input type="checkbox"/>
	Acute hospital	<input type="checkbox"/>	Community hospital	<input type="checkbox"/>
	Other health setting	<input type="checkbox"/>	Day centre/service	<input type="checkbox"/>
	Education/training/workplace establishment	<input type="checkbox"/>	Not known	<input type="checkbox"/>
	Public Place	<input type="checkbox"/>		
	Other (please give details)			
TYPE OF ABUSE	Physical	<input type="checkbox"/>	Sexual	<input type="checkbox"/>

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

	Psychological	<input type="checkbox"/>	Organisational	<input type="checkbox"/>
	Financial	<input type="checkbox"/>	Neglect / Act of Omission	<input type="checkbox"/>
	Discriminatory	<input type="checkbox"/>	Self Neglect and or Hoarding	<input type="checkbox"/>
	Domestic Violence	<input type="checkbox"/>	Modern Slavery	<input type="checkbox"/>
SOURCE OF REFERRAL	Domiciliary care staff	<input type="checkbox"/>	Residential/nursing care staff	<input type="checkbox"/>
	Day care staff	<input type="checkbox"/>	Social worker/care manager	<input type="checkbox"/>
	Self-directed care staff	<input type="checkbox"/>	Other social care staff	<input type="checkbox"/>
	Primary healthcare staff/GP	<input type="checkbox"/>	Community health care staff/District nurses	<input type="checkbox"/>
	Mental health staff	<input type="checkbox"/>	Hospital staff	<input type="checkbox"/>
	Family member	<input type="checkbox"/>	Self-referral	<input type="checkbox"/>
	Other service user	<input type="checkbox"/>	Friend/neighbour	<input type="checkbox"/>
	Housing	<input type="checkbox"/>	Care Quality Commission (CQC)	<input type="checkbox"/>
	Police	<input type="checkbox"/>	Education/training/workplace establishment	<input type="checkbox"/>
	Third sector	<input type="checkbox"/>	Other	<input type="checkbox"/>
HAVE THERE BEEN ANY OTHER SAFEGUARDING CONCERNS OR REPEATS OF THE SAME INCIDENT? IF YES, PLEASE GIVE DETAILS	Yes <input type="checkbox"/> No <input type="checkbox"/> Not known <input type="checkbox"/>			
WERE YOU ABLE TO DISCUSS THE CONCERN WITH THE ADULT? IF NO PLEASE GIVE REASONS.	Yes <input type="checkbox"/> No <input type="checkbox"/>			
DID THEY CONSENT TO THE CONCERN BEING RAISED WITH SOCIAL SERVICES?	Yes <input type="checkbox"/> No <input type="checkbox"/> Lack mental capacity to consent <input type="checkbox"/>			
WHAT WOULD THEY LIKE TO HAPPEN AS A RESULT OF THE REFERRAL?				
HAS REFERRER TAKEN PROTECTIVE STEPS?	Yes <input type="checkbox"/> No <input type="checkbox"/>			

Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

IF YES, WHAT STEPS HAVE BEEN TAKEN TO PROTECT THE ADULT AT RISK, THIS MAY INCLUDE A CHANGE IN STAFF ROLE, A SUSPENSION ETC							
WHERE IS THE ADULT YOU HAVE CONCERNS ABOUT PRESENTLY? IF THIS IS NOT THEIR USUAL ADDRESS WHAT LENGTH OF TIME ARE THEY EXPECTED TO STAY AT THEIR CURRENT LOCATION?							
HAS THIS INCIDENT BEEN REPORTED TO THE POLICE?		Yes <input type="checkbox"/> No <input type="checkbox"/>					
IF YES, NAME OF POLICE STATION							
DATE REPORTED				POLICE CAD/CRIS NUMBER			
USER GROUP	Learning Disability		<input type="checkbox"/>		Mental Health		<input type="checkbox"/>
	Older People		<input type="checkbox"/>		Physical & Sensory		<input type="checkbox"/>
	Substance Misuse		<input type="checkbox"/>		Other people at risk		<input type="checkbox"/>
ETHNIC ORIGIN	White British	<input type="checkbox"/>	White Irish	<input type="checkbox"/>	Other White		<input type="checkbox"/>
	White Traveller of Irish Heritage	<input type="checkbox"/>	White Gypsy/Roma	<input type="checkbox"/>			
	Black Caribbean	<input type="checkbox"/>	Black African	<input type="checkbox"/>	Other Black		<input type="checkbox"/>
	Indian	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>	Bangladeshi		<input type="checkbox"/>
	Chinese	<input type="checkbox"/>	Other Asian	<input type="checkbox"/>	Mixed White and Black Caribbean		<input type="checkbox"/>
	Mixed White and Black African	<input type="checkbox"/>	Mixed White and Asian	<input type="checkbox"/>	Mixed White and Chinese		<input type="checkbox"/>
	Other	<input type="checkbox"/>					
RELIGION	Christian COE	<input type="checkbox"/>	Roman Catholic	<input type="checkbox"/>	Buddhist		<input type="checkbox"/>
	Hindu	<input type="checkbox"/>	Muslim	<input type="checkbox"/>	Sikh		<input type="checkbox"/>
	Jewish	<input type="checkbox"/>	None	<input type="checkbox"/>	Other		<input type="checkbox"/>

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

DETAILS OF PERSON ALLEGED TO HAVE CAUSED THE HARM (Do not put details if employed by the Local Authority)							
NAME		DOB		AGE		GENDER	
ADDRESS							
IS THE PERSON ALLEGED TO HAVE CAUSED THE HARM A	Partner	<input type="checkbox"/>	Other family member	<input type="checkbox"/>			
	Health care worker	<input type="checkbox"/>	Volunteer/befriender	<input type="checkbox"/>			
	Domiciliary care staff	<input type="checkbox"/>	Residential care staff	<input type="checkbox"/>			
	Day care staff	<input type="checkbox"/>	Social worker/care manager	<input type="checkbox"/>			
	Self-directed care staff	<input type="checkbox"/>	Other social care staff	<input type="checkbox"/>			
	Another Service User	<input type="checkbox"/>	Statutory Agency	<input type="checkbox"/>			
	Friend/neighbour	<input type="checkbox"/>	Stranger	<input type="checkbox"/>			
	Other	<input type="checkbox"/>	Not known	<input type="checkbox"/>			
	Institutional Abuse	<input type="checkbox"/>					
IS THE PERSON ALLEGED TO HAVE CAUSED THE HARM THE MAIN FAMILY CARER?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>			
IS THE PERSON ALLEGED TO HAVE CAUSED THE HARM LIVING WITH THE ADULT AT RISK AT TIME OF ABUSE?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>			
	If yes, are they still living with adult at risk? Yes	<input type="checkbox"/>	No	<input type="checkbox"/>			
PLEASE GIVE DETAILS OF THE PERSON ALLEGEDLY CAUSING THE HARM AND RELATIONSHIP							
DETAILS OF ANY RECORDS MADE AND WHERE HELD EG; INCIDENT REPORTS, CASE NOTES, REGULATION 18 NOTIFICATION TO CQC ETC.							

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

DETAILS OF THE REFERRER			
(To be completed by a staff member who has managerial responsibilities)			
NAME		NAME OF AGENCY	
JOB TITLE / PROFESSION		EMAIL	
CONTACT NUMBER		DATE	
TO BE COMPLETED BY STAFF IN ADULT SOCIAL CARE OR MENTAL HEALTH TRUST			
RISK ASSESSMENT	<p>Please complete risk assessment in order to evidence base your decision making process to determine level of response to concern.</p> <p>NOTE: If you have access to Frameworki, please complete the risk assessment on Frameworki. If you do not have access to Frameworki, please complete the word document 'Safeguarding Assessment of Risk'.</p>		
ACTUAL START DATE			
OUTCOME	<p>NFA under safeguarding <input type="checkbox"/></p> <p>Progress a s42 Enquiry Yes <input type="checkbox"/> No <input type="checkbox"/></p>		
FEEDBACK TO REFERRER	<p>Yes <input type="checkbox"/></p> <p>If yes, date referrer was notified of outcome:</p>	<p>No <input type="checkbox"/></p> <p>If no, please comment:</p>	
DECISION DATE (ACTUAL END DATE)			
DETAILS OF THE MANAGER MAKING DECISION			
NAME		CONTACT DETAILS:	
JOB TITLE / PROFESSION		DATE	

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

Person Raising Concern	
Include full name and contact details	
Name	
Job Title	
Team/Service	
Telephone no.	
Email	
Relationship to the Adult at Risk: tick one	<input type="checkbox"/> Social care staff (LA & Independent sector staff) <input type="checkbox"/> Health staff <input type="checkbox"/> Self referral <input type="checkbox"/> Family member <input type="checkbox"/> Friend/neighbour <input type="checkbox"/> Other client <input type="checkbox"/> Care Quality Commission <input type="checkbox"/> Housing (including Supporting People) <input type="checkbox"/> Education / training / workplace establishment <input type="checkbox"/> Police <input type="checkbox"/> Other (including probation, anonymous, contract staff, Multi-Agency Public Protection Arrangements (MAPPA), Multi-Agency Risk Assessment Conference (MARAC))
Has the Adult at Risk given consent for this concern to be raised? Y/N/Lacks mental capacity to consent/Not known- Please give details	
Has the person raising the concern discussed with the Adult at Risk that the Concern is being shared with Adult Social Care? Y/N/Lacks mental capacity to consent/Not known- Please give details	



RBKC ADULT SOCIAL CARE CONTACT DETAILS

Social Services Line: 020 7361 3013

Emergency Duty Team: 020 7373 2227

Fax: 020 7368 0228 (office hours only)

Secure Email: socialservices@rbkc.gov.uk.cjsm.net

Email: socialservices@rbkc.gov.uk

DETAILS OF SELF-NEGLECT/HOARDING CASE

Personal Details of the Adult at Risk

Name (include title)	
Preferred Name	
Address (include postcode)	
Tenure Type	Home Owner <input type="checkbox"/> Lease Holder <input type="checkbox"/> Council Tenant <input type="checkbox"/> Private rented <input type="checkbox"/> Housing Association Tenant <input type="checkbox"/> Temporary Accommodation <input type="checkbox"/> Other <input type="checkbox"/>
Household Structure	
Telephone No.	
Email Address	
Date of birth	
Religion	

.Document Reference	Document Name	Version	Publication Date	Ownership
Safeguarding Policy & Procedure	SP1	1	March 2019	RBKC Housing Management

First Language (interpreter required? If yes, give details)		
Gender		
Ethnicity (Tick one box only)		
<div> <input type="checkbox"/> Prefer not to say </div> <div> White <input type="checkbox"/> British <input type="checkbox"/> Irish <input type="checkbox"/> Any other White background Specify if Other: </div> <div> Mixed <input type="checkbox"/> White and Black Caribbean <input type="checkbox"/> White and Black African <input type="checkbox"/> White and Asian <input type="checkbox"/> Any other Mixed background Specify if Other: </div> <div> Asian, or Asian British <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Any other Asian background Specify if Other: </div> <div> Black, or Black British <input type="checkbox"/> Caribbean <input type="checkbox"/> African <input type="checkbox"/> Any other Black background Specify if Other: </div> <div> Chinese, or other ethnic group <input type="checkbox"/> Chinese <input type="checkbox"/> Any other Specify if Other: </div>		
DATE & TIME OF REFERRAL		
DESCRIBE THE NATURE OF THE CONCERNS REGARDING THE SELF NEGLECT OR HOARDING BEHAVIOUR INCLUDING FOR HOW LONG THIS HAS BEEN KNOWN		