

RADIUS HOUSING ASSOCIATION <i>Care & Support Directorate</i> 	Document No: P311	
	Prepared by:	FMcA
TITLE: ADULT SAFEGUARDING POLICY STATEMENT INCLUSIVE OF SAFEGUARDING CHILDREN	Authorised By:	F McAnespie
	Date:	05.11.2025
	Version No:	10
	Date Ratified by SMT:	18.11.2025
	To be Reviewed: 2028	Page 1 of 27

POLICY STATEMENT:

Radius is committed to safeguarding all our tenants, residents and children who visit/live within our general needs housing, sheltered schemes, residential care and supported living schemes.

Radius recognises that everyone has a fundamental right to be safe. Whatever the cause, and whenever it occurs, harm caused to adults/children by abuse, exploitation or neglect is **NOT** acceptable.

The policy emphasizes that safeguarding is the responsibility of **ALL** staff within Radius.

This policy applies to **ALL** staff; including Senior Managers, paid staff, volunteers, agency staff, students or anyone working on behalf of Radius. **SAFEGUARDING IS EVERYONE'S BUSINESS.**

WHO IS A CHILD?

- Children, child or young person is used to refer to anyone under the age of 18 years.
- Parent is a generic term to represent parents, carers and guardians.
- All children/young people irrespective of their age, religion, culture, disability, gender, ethnicity, sexual orientation, nationality, family, dependency or marital status have the right to protection from abuse.

A child in need of protection refers specifically to the activity that is undertaken to protect individual children or young people who are suffering from or are likely to suffer from significant harm.

A child in need of protection is a child who is at risk of, or likely to suffer, significant harm which can be attributed to a person or persons or organisations, either by an act of commission or omission, or a child has suffered significant or is suffering significant harm as defined by in Article 50 of The Children Order.

All children and young people have a fundamental right to be safeguarded from harm.

Radius can play an important role in safeguarding children and young people through recognition and referral of harm or risk of harm. Through their day today contact with families and communities, Housing Officers may become aware of concerns about the welfare of children and young people and should inform the relevant HSCT about such concerns.

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	Date Ratified by SMT:	18.11.2025
	To be Reviewed: 2028	Page 2 of 27

Although the harm from the abuse might take a long time to be recognisable in the child or young person, professionals may be in a position to observe its indicators earlier, for example, in the way that a parent interacts with their child. Effective and ongoing information sharing is key between professionals.

Harm from abuse is not always straightforward to identify and a child or young person may experience more than one type of harm or significant harm.

Harm can be caused by:

- Physical abuse
- Sexual abuse
- Emotional abuse
- Neglect
- Exploitation

Physical Abuse - is deliberately physically hurting a child. It might take a variety of different forms, including hitting, biting, pinching, shaking, throwing, poisoning, burning or scalding, drowning or suffocating a child.

Sexual Abuse - occurs when others use and exploit children sexually for their own gratification or gain or the gratification of others. Sexual abuse may involve physical contact, including assault by penetration (for example, rape, or oral sex) or nonpenetrative acts such as masturbation, kissing, rubbing and touching outside clothing. It may include non-contact activities, such as involving children in the production of sexual images, forcing children to look at sexual images or watch sexual activities, encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for abuse (including via e-technology). Sexual abuse is not solely perpetrated by adult males. Women can commit acts of sexual abuse, as can other children.

Emotional Abuse - is the persistent emotional maltreatment of a child. It is also sometimes called psychological abuse and it can have severe and persistent adverse effects on a child's emotional development. Emotional abuse may involve deliberately telling a child that they are worthless, or unloved and inadequate. It may include not giving a child opportunities to express their views, deliberately silencing them, or 'making fun' of what they say or how they communicate. Emotional abuse may involve bullying – including online bullying through social networks, online games or mobile phones – by a child's peers.

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	To be Reviewed: 2028	Page 3 of 27

Neglect - is the failure to provide for a child's basic needs, whether it be adequate food, clothing, hygiene, supervision or shelter that is likely to result in the serious impairment of a child's health or development. Children who are neglected often also suffer from other types of abuse.

Exploitation - is the intentional ill-treatment, manipulation or abuse of power and control over a child or young person; to take selfish or unfair advantage of a child or young person or situation, for personal gain. It may manifest itself in many forms such as child labour, slavery, servitude, engagement in criminal activity, begging, benefit or other financial fraud or child trafficking. It extends to the recruitment, transportation, transfer, harbouring or receipt of children for the purpose of exploitation. Exploitation can be sexual in nature.

Related Definitions

There are related definitions which interface with Child Protection, in particular:

Domestic violence and abuse - 'threatening, controlling, coercive behaviour, violence or abuse (psychological, virtual, physical, verbal, sexual, financial or emotional) inflicted on anyone (irrespective of age, ethnicity, religion, gender, gender identity, sexual orientation or any form of disability) by a current or former intimate partner or family member'. Domestic violence and abuse is essentially a pattern of behaviour which is characterised by the exercise of control and the misuse of power by one person over another. It is usually frequent and persistent. It can include violence by a son, daughter, mother, father, husband, wife, life partner or any other person who has a close relationship with the victim. It occurs right across society, regardless of age, gender, race, ethnic or religious group, sexual orientation, wealth, disability or geography.'

WHO 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 (may include but 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) and/or
- B. Life circumstances (may include but not limited to, isolation, socio-economic factors and environmental living conditions) 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 or person is causing, or is likely to cause, him or her to be harmed.

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	To be Reviewed: 2028	Page 4 of 27

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**.

In most situations HSC Trusts will make decisions regarding the degree of risk and level of harm an adult may be facing and decide on the most appropriate action to take. 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.

If you think a crime has occurred where medical or forensic evidence might still be present consider the need for an urgent referral to the police service and be cautious not to touch or disturb possible evidential material.

AIM OF POLICY:

- Improve safeguarding arrangements for adults/children who are at risk of harm from abuse, exploitation or neglect.
- Promote zero tolerance of harm to all adults/children from abuse, exploitation or neglect.
- Establish clear guidance for reporting concerns that an adult/child is, or may be, at risk of being harmed or in need of protection and how these will be responded to.

Within this policy the term ‘safeguarding’ is used in its widest sense, that is, to encompass both activities which **prevents** harm from occurring in the first place and activities which **protects** adults/children at risk where harm has occurred or is likely to occur without intervention.

This policy moves away from the focus of protection and the concept of ‘vulnerability’ towards establishing the concept of ‘risk of harm’ in adulthood.

It places the responsibility for harm caused with those who perpetrate it. Harm resulting from abuse, exploitation or neglect violates the basic human rights of a person to be treated with respect and dignity, to have control over their life and property, and to live a life free from fear.

Any action which causes harm may constitute a criminal offence and professional gross misconduct on the part of a Radius employee.

Radius is committed to safeguarding all tenants and those who live within our General needs, Sheltered Housing Schemes, residential care and supported living schemes.

RADIUS HOUSING ASSOCIATION <i>Care & Support Directorate</i> 	Document No: P311	
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	To be Reviewed:	Page 5 of 27
	2028	

Radius is committed to safeguarding children who live in our general needs housing and those who visit our sheltered housing, residential care and supported living schemes,

All relevant staff of contractors who carry out work for Radius should be committed to practices which promote the welfare of children and adults in need of protection.

Management roles and responsibilities

- The Chief Executive and the Director of Care and Support (adult safeguarding champion, ASG) has ultimate responsibility for ensuring compliance with this policy
- Day to day responsibilities for implementation is delegated through the management structure to the operational management teams in each directorate.

RESPONSIBILITIES

Radius staff will endeavour at all times to safeguard adults at risk in our care through:

- Following our own policies/procedures in respect of Safeguarding, Protecting Adults at Risk, Deprivation of Liberty Safeguards, Restraint/Use of Restrictive Practices, indeed all policy/procedure guidance issued by Radius which refer to all aspects of care and support provision.
- Following the guidance issued by our commissioning HSC Trusts, the Local Area Safeguarding Partnerships (LASP), The Department of Health, Social Security and Public Safety and, in regard to sheltered housing and supported living environments, to guidance issued by The Northern Ireland Housing Executive (Equality Unit) in respect of safeguarding adults at risk.
- Following our own recruitment and selection procedures in respect of the selection of staff.
- Providing effective training opportunities for staff that includes, as mandatory, training in the protection of adults at risk/safeguarding and ensuring attendance at such training.
- Providing for staff their effective management through supervision, support, appraisal and practice improvement opportunities.
- Implementing our clear, unambiguous, requirements and procedures for raising awareness of and responding to any indication of abuse and for reporting concerns to Radius.

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	Version No:	10
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	To be Reviewed: 2028	Page 6 of 27

- g) Following statutory requirements for reporting abuse that is alleged, suspected or actual while involving the adult at risk or visiting children and their representatives appropriately.
- h) Safeguarding children, who may, from time to time, visit our sheltered housing, residential and supported living environments or who may be living in our general needs accommodation, where concerns arise for the welfare, safety and wellbeing of a child. The protection of children is everyone's business and the Child Protection Gateway Services should be contacted regarding any concerns.
- i) Ensuring our staff follow all relevant policies and procedures, including those referring to health and safety, risk assessment/management, the management of complaints and concerns, accident/incident reporting, First Aid, Moving and Handling, Managing Resident/Tenant Finances and Fire Safety.
- j) Ensuring that personal information, information sharing and confidentiality occurs in accordance with applicable legislative requirements and is appropriately and effectively managed by our Staff
- k) Implementing The Association's Code of Conduct policy, ensuring those employed in care providing roles are registered with The Northern Ireland Social Care Council (NISCC) and that the NISCC Code of Practice also informs any investigation into the conduct of a care worker when concerns arise or are reported.

Radius recognises that abuse of Residents/Tenants is everyone's business and therefore requires **ALL** staff to be alert to the possibility of abuse.

Radius staff that have concerns regarding alleged, suspected or confirmed abuse of a service user, have an obligation to report their concerns immediately.

Radius will ensure that all staff working with service users are appropriately trained in adult and Child safeguarding.

The level of training will be commensurate with the individual's role and responsibilities.

In regulated services, training and refresher training will be provided in keeping with the Residential Care Homes Minimum standards (DHSSPS DEC 2022) and the Domiciliary Care Agencies Minimum Standards (DHSSPS Aug 2021). Reporting requirements in relation to regulated services will be strictly adhered to and RQIA procedures for reporting will be followed.

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	Date Ratified by SMT:	18.11.2025
	To be Reviewed: 2028	Page 7 of 27

CONTRACTORS

This category covers the following situations:

- Where a contractor provides services to the association
- Where a contractor provides services to others on behalf of the Association
- Where a contractor carries out functions on behalf of the Association

Contractors will be expected to have appropriate Safeguarding policies in place. (What is appropriate will be dependent on the type of work carried out by the contractor, and the general context in which work is carried out).

In this policy, a “contractor” means an external contractor and includes consultants.

WHAT IS ABUSE?

Abuse is ‘a single or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust, which causes harm or distress to another individual or violated their human or civil rights’.

Abuse is the misuse of power and control that one person has over another. It can involve direct and indirect contact and can include online abuse.

THE MAIN FORMS OF ABUSE:

Physical Abuse– is the use of physical force or mistreatment of one person by another which may or may not result in actual physical injury. This may include hitting, pushing, rough handling, exposure to heat or cold, force feeding, improper administration of medication, denial of treatment, misuse or illegal use of restraint and deprivation of liberty

Sexual Violence and Abuse – is any behavior perceived to be of a sexual nature which is unwanted or takes place without consent or understanding. Sexual violence and abuse can take many forms and 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. It may involve physical contact, including but not limited to non consensual penetrative sexual activities or non penetrative sexual activities, such as intentional touching (known as groping).

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	Version No:	10
	Date Ratified by SMT:	18.11.2025
	To be Reviewed: 2028	Page 8 of 27

Psychological/ Emotional Abuse – is behavior that is psychologically harmful or inflicts mental distress by threat, humiliation or other verbal/ non verbal conduct. This may include threats, humiliation or ridicule, provoking fear of violence, shouting, yelling and swearing, blaming, controlling, intimidation and coercion.

Financial Abuse – is actual or attempted theft, fraud or burglary. It is the misappropriate or misuse of money, property, benefits, material goods or other asset transactions which the person did not or could not consent to, or which were invalidated by intimidation, coercion or deception. This may include withholding pension or benefits or pressure exerted around wills, property or inheritance.

Institutional Abuse – is the mistreatment or neglect of an adult by a regime or individuals in setting which adults who may be at risk reside in or use. Institutional abuse may occur when the routines, systems and regimes result in poor standards of care, poor practice and behaviours, inflexible regimes and rigid routines which violate the dignity and human rights of the adults and place them at risk of harm.

Institutional abuse may occur within a culture that denies, restricts or curtails privacy, dignity, choice and independence.

Neglect occurs when a person deliberately withholds, or fails to provide appropriate and adequate care and support which is required by another adult. It may be through a lack of knowledge or awareness, or through a failure to take reasonable action given the information and facts available to them at the time. It may include physical neglect to the extent that health or well being is

impaired, administering too much or too little medication, failure to provide access to appropriate health or social care, withholding the necessities of life, such as adequate nutrition, heating or clothing or failure to intervene in situations that are dangerous to the person concerned or to others particularly when the person lacks the capacity to assess risk.

The Safeguarding Adults: Prevention and Protection in Partnership Policy does not include self harm or self-neglect within the definition of an ‘adult in need of protection’. Each individual set of circumstances will require a professional HSC assessment to determine the appropriate response and consider if any underlying factors require a protection response. For example, self harm may be the manifestation of harm which has been perpetrated by a third party and which the adult feels unable to disclose.

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	Date:	05.11.2025
	Version No:	10
	Date Ratified by SMT:	18.11.2025
	To be Reviewed: 2028	Page 9 of 27

Exploitation

Exploitation is the deliberate maltreatment, manipulation or abuse of power and control over another person; to advantage of another person or situation usually, but not always, for personal gain from using them as a commodity. It may manifest itself in many forms including slavery, servitude, forced or compulsory labour, domestic violence and abuse, sexual violence and abuse, or human trafficking.

RELATED DEFINITIONS

There are related definitions which interface with Adult Safeguarding, each of which have their own associated adult protection processes in place:

- **Domestic Violence and Abuse**

threatening, controlling, coercive behaviour, violence or abuse (psychological, virtual, physical, verbal, sexual, financial or emotional) inflicted on anyone (irrespective of age, ethnicity, religion, gender, gender identity, sexual orientation or any form of disability) by a current or former intimate partner or family member'. Domestic violence and abuse is essentially a pattern of behaviour which is characterised by the exercise of control and the misuse of power by one person over another. It is usually frequent and persistent. It can include violence by a son, daughter, mother, father, husband, wife, life partner or any other person who has a close relationship with the victim. It occurs right across society, regardless of age, gender, race, ethnic or religious group, sexual orientation, wealth, disability or geography.

The response to any adult facing this situation will usually require a referral to specialist services such as Women's Aid or the Men's Advisory Project. In high risk cases a referral will also be made to the Multi- Agency Risk Assessment (MARAC) process. Specialist services will then decide if the case needs to be referred to a HSC Trust for action under the safeguarding procedures.

- **Human Trafficking/Modern Slavery**

involves the acquisition and movement of people by improper means, such as force, threat or deception, for the purposes of exploiting them. It can take many forms, such as domestic servitude, forced criminality, forced labour, sexual exploitation and organ harvesting. Victims of human trafficking/ modern slavery can come from all walks of life; they can be male or female, children or adults, and they may come from migrant or indigenous communities. The response to adults at risk experiencing human trafficking/modern slavery will always be to report the incident to the Police Service

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	Version No:	10	
	Date Ratified by SMT:	18.11.2025	
	To be Reviewed:	Page 10 of 27	
	2028		

- **Hate Crime**

is any incident which constitutes a criminal offence perceived by the victim or any other person as being motivated by prejudice, discrimination or hate towards a person's actual or perceived race, religious belief, sexual orientation, disability, political opinion or gender identity. The response to adults at risk experiencing hate crime will usually be to report the incident to the Police Service.

INDICATORS OF ABUSE

It is important that those caring for adults at risk are aware of and are vigilant to what may be signs of abuse (maltreatment or neglect).

These can include:

- Recurring or unexplained injuries.
- Expressions or indicators of pain which are not responded to, recognized or treated as intended when a medical practitioner prescribes pain relief (medication not offered/made available/given)
- Untreated injuries and medical problems, including how untoward events involving an adult at risk are managed to the safety and benefit of the person.
- Being emotionally upset and agitated.
- Inconsistency or difficulty in accounting for the cause of injuries.
- The adult at risk not being allowed to speak for themselves.
- Poor personal hygiene, unchanged bedding and/or unsuitable clothing for the conditions or environment.
- Untreated or long standing pressure sores that do not heal.
- Unexplained weight loss or gain or evidence of dehydration noted by poor skin condition and /or frequent urine infections.
- The adult at risk appearing withdrawn, depressed, irregular sleep patterns, low self-esteem, fearfulness, agitation or loss of appetite.
- Abrupt or unexplainable changes to bank accounts or wills.
- Self harm/self neglect

This list is not exhaustive, and a person may present with more than one of the above or other indicators.

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	Version No:	10	
	Date Ratified by SMT:	18.11.2025	
	To be Reviewed: 2028	Page 11 of 27	

SCHEDULE 2 – GUIDANCE FOR STAFF – WHAT YOU DO WHEN ABUSE IS ALLEGED TO YOU OR YOU WITNESS ABUSE IN ANY FORM

Abuse can happen anywhere and by anyone having contact with an adult at risk.

Staff must be vigilant to any suggestion or suspicion of abuse, be aware of the forms of abuse that can occur and take **immediate** steps to share concerns with their line manager

Staff must be aware that **professional abuse** can occur and can include (but not be limited to) anyone employed to provide care/support/services to an adult at risk, examples being:

- Poor care practices
- Neglect/inattention to needs/failure to respond to needs
- Treatment that is degrading or humiliating
- Forming inappropriate relationships/friendships with an adult at risk
- Ill-informed or out dated care/support practices that do not meet need
- Failure to support an adult at risk to access health care services
- Denying an adult at risk access to advocacy or other services
- Inappropriate behaviours on the part of staff when responding to behaviours that challenge
- Restraint/restrictive practices
- Inappropriate humour (making fun of situations involving adults at risk)
- Lack of patience or understanding towards an adult at risk
- Denying an adult at risk their civil and human rights
- Lack of due care and attention to the needs of an adult at risk so as to place that person at any risk or harm
- Failure to report concerns in accordance with Association policy and procedures

OTHER ASPECTS OF ABUSE TO BE AWARE OF:

- a) Stranger abuse – a person unknown to the adult at risk, a member of the general public, a person who targets an adult at risk with ill intent or criminal intent
- b) Domestic/Familial Abuse – abuse of an adult at risk by a member of their family or a close friend.
- c) Peer Abuse – the abuse of one adult at risk by another adult at risk. This can happen in communal settings such as Care Homes, Day Centre's, Clubs.

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	Version No:	10	
	Date Ratified by SMT:	18.11.2025	
	To be Reviewed: 2028	Page 12 of 27	

WHAT TO DO IF YOU SUSPECT ABUSE OR ARE TOLD OF ABUSE BY AN ADULT AT RISK

- a) Stay Calm
- b) Listen attentively
- c) Express concern and sympathy and acknowledge what is being said
- d) Reassure the person – tell the person that s/he did the right thing in telling you
- e) 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
- f) If urgent medical/police help is required, call the emergency services
- g) Ensure the immediate safety of the person
- h) 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
- i) Let the person know that they will be kept involved at every stage
- j) Record in writing (date and sign your report) and report at the earliest possible time
- k) Act without delay

DO NOT:

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

REPORTING AND RECORDING

- a) Do not delay in reporting abuse. Do so immediately.
- b) Give full, clear details of what you were told or what you personally saw or heard to your line manager
- c) Remain calm. You are doing nothing wrong by reporting concerns. If you do not report concerns you may be acting complicity to the actions of an abuser and may, in time, be held accountable for your failure to act.
- d) Ask your line manager to tell you what will happen next

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	Version No:	10
	Date Ratified by SMT:	18.11.2025
	To be Reviewed: 2028	Page 13 of 27

- e) Provide a written report or sign any notes made by your line manager
- f) Be available to speak to Police, HSC Trust Representatives and/or Senior Managers within Radius who may be involved in investigation activities
- g) If you are not told what is happening in respect of a report you have made, approach your Manager, in confidence, to seek assurances on what is being done.

If you believe your concerns are not being addressed contact:

The Director of Care Services (adult safeguarding champion) on 02890 397153

Or

Use The Association's Whistle Blowing Policy provisions (HRPO0034)

Staff are not trained to undertake investigation practices. Conducting investigations is a responsibility of Managers and Senior Managers within the Association in consultation / agreement with HSC Trusts and Police.

It is the responsibility of staff to assist in investigation process as required to do and to provide investigating officers with truthful, factual information known to you which does not rely on speculation, collusion, gossip, innuendo or third party conversations that you do not have personal knowledge of.

SCHEDULE 3 – KEY RESPONSIBILITIES OF THE ADULT SAFEGUARDING CHAMPION

Adult Safeguarding Prevention and Protection in Partnership Policy (2015) sets out the requirement for Organisations to have an Adult Safeguarding Champion (ASC).

In Radius' Residential Care and Supported Living Environments the **Nominated/Appointed Person** is the Registered Manager for the scheme or other nominated member(s) of staff i.e. Senior Person on duty.

In Radius's Communities department it is the Area Housing Manager.

The ASC is the Organisation's Director of Care and Support/Registered Person.

In the event of a safeguarding occurrence the Nominated/Appointed/Manager/Deputy/ASC shall:

- a) provide information, support and advice for staff and/or volunteers on adult safeguarding within the organisation.

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	Version No:	10
	Date Ratified by SMT:	18.11.2025
	To be Reviewed:	Page 14 of 27
	2028	

- b) ensure that the Organisation's Adult Safeguarding policy is disseminated and support implementation throughout the Organisation.
- c) advise the Organisation regarding Adult Safeguarding training needs.
- d) provide advice to staff or volunteers who have concerns about the signs of harm and ensure a report is made to HSC Trusts where there is a safeguarding concern.
- e) support staff to ensure that any actions take account of what the adult wishes to achieve – this should not prevent information about risks of serious harm being passed to the relevant HSC Trust Adult Protection Gateway Service for assessment and decision making.
- f) establish contact with the HSC Trust Designated Adult Protection Officer (DAPO), PSNI and other agencies as appropriate.
- g) ensure accurate and up to date records are maintained detailing all decisions made, the reasons for those decisions and any actions taken.
- h) produce an annual Adult Safeguarding Champion Position Report, to compile and analyse records of reported concerns to determine whether a number of low level concerns are accumulating to become more significant. These records must be available on request for inspection or by way of service level agreements or contract review meetings.

The Registered Person has overall responsibility for adult safeguarding within Radius. In the absence of the Registered Person or as directed by the Registered Person, The Care Services Manager (HWC/Registered Schemes), the Area Housing Manager in Communities Directorate, will act with the delegated authority of the Registered Person in ensuring the co-ordination of action within the organisation and for liaising, in respect of suspected or actual cases of abuse.

The Registered Person/Care Services Manager/ Area Housing Managers will advise the organisation in respect of adult safeguarding training needs and provide information and advice within the organisation as needed.

SCHEDULE 4 – RESPONDING TO AN ADULT SAFEGUARDING CONCERN – THE ROLE OF THE ADULT SAFEGUARDING CHAMPION/APPOINTED/NOMIATED PERSON

When an alert is raised within an organization in relation to an adult safeguarding concerns or disclosure, the ASC or appropriate appointed person, where these tasks have been delegated, will ensure the following action occur:

- Consider whether the concern is a safeguarding issue or not. This may involve some “checking out” of information provided whilst being careful not to stray into the realm of investigation.
- Where immediate danger exists or the situation warrants immediate action ensure any necessary medical assistance has been sought and refer to HSC Adult Protection Gateway or PSNI.

RADIUS HOUSING ASSOCIATION <i>Care & Support Directorate</i> 	Document No: P311	
	Prepared by:	FMcA
TITLE: ADULT SAFEGUARDING POLICY STATEMENT INCLUSIVE OF SAFEGUARDING CHILDREN	Authorised By:	F McAnespie
	Date:	05.11.2025
	Version No:	10
	Date Ratified by SMT:	18.11.2025
	To be Reviewed: 2028	Page 15 of 27

- Support staff to ensure any actions take account of the adult's wishes
- Where it has been deemed that it is not a safeguarding issue, other alternative responses should be considered such as monitoring, support or advice to staff or volunteers.
- If it is decided that it is a safeguarding issue, the situation should be reported to the HSC Key Worker where known. If unaware of HSC Key Worker contact details, a referral will be made to HSC Trust Adult Protection Gateway Service, The HSC Trust will then conduct a risk assessment and decide what response is appropriate.
- If a crime is suspected or alleged, contact the HSC Adult Protection Gateway Service directly.
- If the concern involves a regulated service, inform RQIA.
- Act as the liaison point for any investigative activity which is required and will ensure easy access to relevant case records or staff.
- Ensure accurate and timely records and any adult safeguarding forms required have been completed.

If an adult at risk does not want a referral made to the HSC Trust or PSNI, the ASC or appropriate person must consider the following:

- Do they have capacity to make this decision?
- Have they been given full and accurate information in a way which they understand?
- Are they experiencing undue influence or coercion?
- Is the person causing harm a member of staff, a volunteer or someone who only has contact with the adult at risk because they both use the service?
- Is anyone else at risk from the person causing harm?
- Is a crime suspected or alleged?

HUMAN RIGHTS, CONSENT AND CAPACITY

Adults at risk of harm should be central to decisions regarding any actions to prevent or protect them from harm. The adult's reasons for refusal to consent to a referral to the HSC Trust for assessment and support should be explored with them. Consent may be over-ridden in some cases, for example, where the individual lacks the capacity to appreciate the nature of the concerns and the potential consequences to them of not addressing those concerns; where there is a potential risk to others or in the public interest.

If you have any concerns that the adult at risk may not have capacity to consent or may be coming under pressure to refuse consent you should refer to the HSC Trust Key Worker or HSC Trust Adult Protection Gateway Team.

RADIUS HOUSING ASSOCIATION <i>Care & Support Directorate</i> 	Document No: P311	
	Prepared by:	FMcA
TITLE: ADULT SAFEGUARDING POLICY STATEMENT INCLUSIVE OF SAFEGUARDING CHILDREN	Authorised By: Date:	F McAnespie 05.11.2025
	Version No:	10
	Date Ratified by SMT:	18.11.2025
	To be Reviewed: 2028	Page 16 of 27

If in doubt contact the HSC Trust Gateway service for advice and guidance.

If it is determined that the concern(s) do not meet the definition of an adult at risk or an adult in need of protection, the concerns raised must be recorded; including any action taken; and the reasons for not referring to HSC Trust.

The ASC/Appointed/Nominated Person will ensure that records of reported concerns are compiled and analysed to determine whether a number of low-level concerns are accumulating to become significant. Services regulated by RQIA/NIHE or other bodies records should be made available for inspection.

Where the ASC or appointed person is not immediately available, this should not prevent action being taken or a referral being made to the HSC Trust in respect of any safeguarding concern.

SCHEDULE 5 – INFORMATION REQUIRED TO MAKE A SAFEGUARDING REFERRAL TO THE DESIGNATED OFFICER/ADULT SAFEGUARDING TEAM, HSC TRUST

Nominated Managers/Appointed Person or ASC will ensure the following required information, as a minimum, is provided.

- The name, address and current location of the adult at risk.
- The nature of the harm (alleged, suspected or actual)
- The need for medical assistance, if any. The name and time the Medical Practitioner contacted and the outcome of such contact.
- The reasons why harm/abuse is suspected
- The actions already taken
- Any other relevant information which could include details of the alleged abuser, the current location of the alleged abuser and whether or not the alleged abuser appears aware of monitoring arrangements in place. All such information should be recorded on Epic.
- Form APP1 and all other relevant documentation should be stored securely in designated file.

Registered Nominated Managers will ensure that all reporting formats required by the commissioning HSCT are downloaded, held within an electronic or other folder that is known to all Senior Staff who may be required to act in the role of ASC.

Should the need to make a referral occur **outside normal working hours**, contact with the Out of Hours Social Work Service is required.

RADIUS HOUSING ASSOCIATION <i>Care & Support Directorate</i> 	Document No: P311	
	Prepared by:	FMcA
TITLE: ADULT SAFEGUARDING POLICY STATEMENT INCLUSIVE OF SAFEGUARDING CHILDREN	Authorised By:	F McAnespie
	Date:	05.11.2025
	Version No:	10
	Date Ratified by SMT:	18.11.2025
	To be Reviewed:	Page 17 of 27
	2028	

Registered (Nominated) Managers will ensure the contact details for:

- Out of Hours Social Work Services
- Designated Officers/Adult Safeguarding Teams
- Child Protection Gateway Service are clearly displayed in appropriate location to the benefit of senior staff who may be required to act in a ASC deputy capacity.

Such contact details will include:

- Landline and/or mobile telephone numbers made available by the HSCT
- Email addresses for Designated Officers/Adult Safeguarding Teams, including those “governance” addresses which may apply

INFORMATION TO BE MONITORED BY AN ADULT SAFEGUARDING CHAMPION:

To meet the governance requirements set out in the policy, the ASC will compile an annual Adult Safeguarding Position Report using the following core data:

- Number of referrals made to HSC Trusts involving both an adult at risk and an adult in need of protection
- Number of safeguarding discussions where the decision taken was to not refer to HSC Trust
- Any untoward event that triggered an adult protection investigation
- Adult safeguarding training opportunities plans to take to ensure it is compliant with Adult Safeguarding: Prevention and Protection in Partnership Policy and the associated Operational Procedures 2016.

GENERAL GUIDANCE AND ASSURANCE

Radius will not tolerate abuse of any form by any person towards adult at risk.

Action taken in response to reports of suspected or actual abuse, will be appropriate and robust.

Radius strongly recommends that if in doubt, report it.

You may not be party to all of the process that will follow.

RADIUS HOUSING ASSOCIATION <i>Care & Support Directorate</i> 	Document No: P311	
	Prepared by:	FMcA
TITLE: ADULT SAFEGUARDING POLICY STATEMENT INCLUSIVE OF SAFEGUARDING CHILDREN	Authorised By:	F McAnespie
	Date:	05.11.2025
	Version No:	10
	Date Ratified by SMT:	18.11.2025
	To be Reviewed:	Page 18 of 27
	2028	

You may not, for defined reasons, be told all the details of actions taken. Radius will manage information deemed sensitive in accordance with data protection principles.

Radius will work with commissioning and regulatory agencies and co-operate fully with those bodies in responding to allegations of abuse, including PSNI.

Radius will take all reasonable and required steps to protect the adult at risk and any member of staff bringing forward allegations of abuse.

Radius will manage, as misconduct in reference to the disciplinary process any action on the part of any staff member found to be abusive in any form towards an adult at risk in the care of The Association.

Radius will manage as misconduct any allegation of abuse found to be vexatious, malicious or false on the part of any staff member in reference to the disciplinary procedure. There is a zero tolerance of false or malicious allegations which seek to malign, discredit or unjustly accuse colleagues or others of abuse or actions found to be untruthful.

Radius will make referral to registration bodies such as Northern Ireland Social Care Council (NISCC) or The Nursing & Midwifery Council (NMC) in respect of any member of staff found to have engaged in abusive conduct towards an adult at risk. Such referral could result in the commissioning of professional conduct hearings by such registration bodies.

This Procedure applies to Housing-with-Care Supported Housing and Sheltered Housing For Regulated services with RQIA this refers to Standard 16 of the Residential Care Home Minimum Standards and Standard 14 of the Domiciliary Care Agencies Minimum Standards (2011).

There are a number of pieces of legislation related to Safeguarding Adults at Risk:

- The Mental Capacity Act (NI) 2016
- The Criminal Law Act (NI) 1967
- The Health and Personal Social Services (NI) Order and Health and Social Care (Reform) Act (NI) 2009
- The Mental Health (NI) Order 1986
- The Police and Criminal Evidence (NI) Order 1989
- The Disability Discrimination Act 1995
- The Race Relations (NI) Order 1997
- The Public Interest Disclosure (NI) Order 1998

RADIUS HOUSING ASSOCIATION <i>Care & Support Directorate</i> 	Document No: P311	
	Prepared by:	FMcA
TITLE: ADULT SAFEGUARDING POLICY STATEMENT INCLUSIVE OF SAFEGUARDING CHILDREN	Authorised By:	F McAnespie
	Date:	05.11.2025
	Version No:	10
	Date Ratified by SMT:	18.11.2025
	To be Reviewed: 2028	Page 19 of 27

- The Family Homes and Domestic Violence NI Order 1998
- The Northern Ireland Act 1998 Section 75
- The Criminal Evidence (NI) Order 1999
- The Human Rights Act 1998
- The Health and Personal Social Services Act (NI) 2001
- The Health and Personal Social Services (Quality, Improvement and Regulation) NI Order 2005
- The Safeguarding Vulnerable Groups (NI) Order 2007 as amended by the Protection of Freedom Act 2012
- The Sexual Offences (NI) Order 2008

This procedure should be read in conjunction with the following guidance such as:

- Protocol for joint investigation of Adult Safeguarding Cases 2016 – HSC/PSNI/RQIA
- Radius Discipline Policy
- NISCC Code of Practice
- HSC Board NI Adult Safeguarding Prevention and Protection in Partnership Policy DHSSPS July 2015 and its associated Operational Procedures September 2016
- All guidance and schedules forming part of P311
- Radius Whistleblowing Policy (HRPO0034)

It is a responsibility of Managers to ensure absolute clarity on local reporting arrangements and that those arrangements are known to and displayed in offices to the benefit staff. The Area Housing Manager, Care Services Manager and Registered Person must be informed of any adult safeguarding issue arising without delay.

Where the ASC or appointed person is not immediately available, this should not prevent action being taken or a referral being made to the HSC Trust in respect of any safeguarding concern.

In addition for regulated services the RQIA must be notified via the web portal – notification is dependent on service type – refer to Appendix 2 reporting requirements grid – Statutory Notification of Incidents and Deaths, Guidance for Registered Persons and Managers of Regulated Services September 2017.

ALLEGATIONS AGAINST STAFF

When responding to an allegation made against a member of staff, Radius has a dual responsibility firstly to the adult at risk and secondly to the staff member. Where an allegation has been made

RADIUS HOUSING ASSOCIATION <i>Care & Support Directorate</i> 	Document No: P311	
	Prepared by:	FMcA
	Authorised By: Date:	F McAnespie 05.11.2025
TITLE: ADULT SAFEGUARDING POLICY STATEMENT INCLUSIVE OF SAFEGUARDING CHILDREN	Version No:	10
	Date Ratified by SMT:	18.11.2025
	To be Reviewed: 2028	Page 20 of 27

against a member of staff the Health & Social Care Trust may conduct an investigation and upon advice from the Trust Radius will instigate an investigation in accordance with its discipline procedure.

In addition to the above course of action for regulated services RQIA will be notified and depending on the nature of the allegation the Northern Ireland Social Care Council will be informed. If the member of staff is a registered nurse then the NMC will also be informed.

If following an investigation the panel determine that abuse has occurred then disciplinary action will be taken and a referral will be made to the Northern Ireland Social Care Council or NMC and The Disclosure and Barring Service (DBS).

In certain circumstances, a period of precautionary suspension may be required by the HSC Trust and/or Radius, as a protective measure to enable investigations to be carried out. Precautionary suspension is a neutral act and in itself does not constitute disciplinary action. Where an investigation finds wrong-doing and/or conduct contrary to terms and conditions of employment, to regulatory requirements, to the code of practice for registered social care workers, The Association will commence disciplinary action on that basis and notify the Northern Ireland Social Care Council (NISCC) who may then commence a separate conduct hearing into the matter.

Training in the area of Protection of Adult Safeguarding will be updated every three years for all staff including those working in registered residential care facilities.

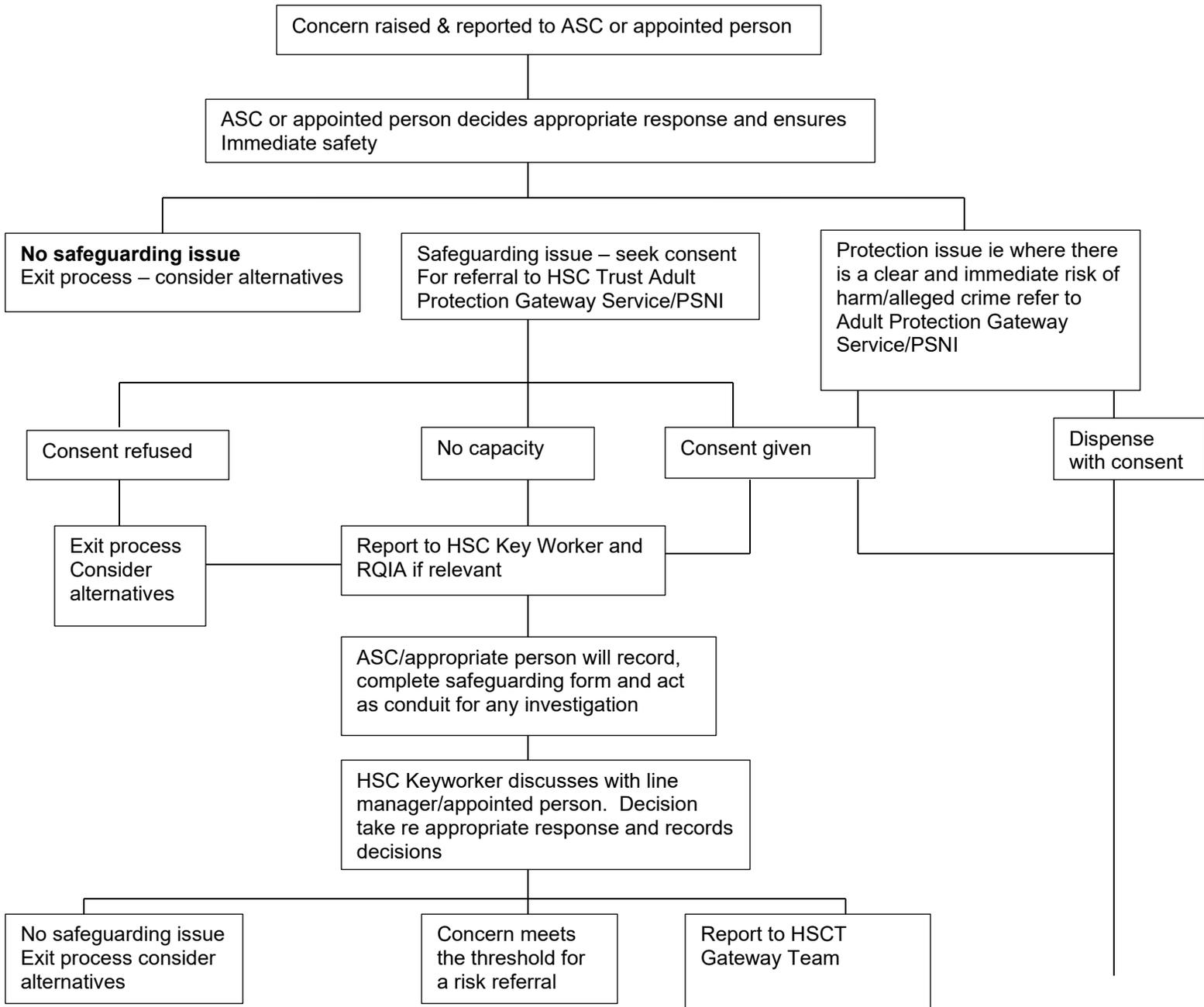
Those staff who work in registered domiciliary services, supported housing and day care facilities will receive updated training every two years.

Staff are recruited in line with current legislative requirements including a satisfactory Enhanced Disclosure Access NI background check.

Care/Support staff and Registered Managers in all regulated services must be registered with The Northern Ireland Social Care Council, or NMC if nursing qualified, as a condition of continued employment.

RADIUS HOUSING ASSOCIATION <i>Care & Support Directorate</i>			Document No: P311	
	Prepared by:	FMcA	Authorised By: Date:	F McAnespie 05.11.2025
TITLE: ADULT SAFEGUARDING POLICY STATEMENT INCLUSIVE OF SAFEGUARDING CHILDREN	Version No:	10	Date Ratified by SMT:	18.11.2025
	To be Reviewed: 2028	Page 21 of	27	

PATHWAY FOR DEALING WITH CONCERNS



RADIUS HOUSING ASSOCIATION <i>Care & Support Directorate</i>			Document No: P311
	Prepared by:	FMcA	
TITLE: ADULT SAFEGUARDING POLICY STATEMENT INCLUSIVE OF SAFEGUARDING CHILDREN	Authorised By:	F McAnespie	
	Date:	05.11.2025	
	Version No:	10	
	Date Ratified by SMT:	18.11.2025	
	To be Reviewed:	Page 22 of 27	
	2028		

SCHEDULE 8 – SAFEGUARDING

Consider appropriate responses

Follow Adult Protection Procedures

This guidance applies to the safeguarding of children who may visit Radius Shared Housing Schemes Care Services Housing-with-Care and Supported Living Schemes or Those who reside in our General Housing Accommodation

This guidance should be read in conjunction with the following documents;

- Safeguarding Vulnerable Groups (NI) Order 2007 (as amended by The Protection of Freedoms Act 2012)
- Co-operating to Safeguard Children - DHSSPS May 2003.
- Our Duty of Care' DHSSPS
- Area Child Protection Committees' Regional Policies & Procedures
- The Children (NI) Order 1995
- Radius Discipline Policy

Radius is committed to safeguarding the welfare of children who live in our accommodation or visit our schemes. Everyone who comes into contact with children in their everyday work, including staff who do not have a specific role in relation to child protection have a duty to safeguard and promote the well-being and safety of children. Child protection is everyone's business

DEFINITIONS:

Children

The Children (NI) Order 1995 defines a child as 'a person under the age of 18 years'.

Safeguarding

A relatively new term which is broader than 'child protection' as it also includes prevention. It has been defined as:

"All agencies working together with children and young people, and their families taking all

RADIUS HOUSING ASSOCIATION <i>Care & Support Directorate</i>		Document No: P311	
		Prepared by:	FMCA
TITLE: ADULT SAFEGUARDING POLICY STATEMENT INCLUSIVE OF SAFEGUARDING CHILDREN		Authorised By:	F McAnespie
		Date:	05.11.2025
		Version No:	10
		Date Ratified by SMT:	18.11.2025
		To be Reviewed: 2028	Page 23 of 27

reasonable measures to ensure that the risk of harm to children's welfare is minimised; and where there are concerns all agencies take appropriate actions to address those concerns, working to agreed local Policies & Procedures in full partnership with other local agencies.

Child abuse

Occurs when a child is neglected, harmed or not provided with proper care. Children may be abused in many settings, in a family, in hospital, in a residential or institutional setting or in a community setting. This can include care and housing environments where a child has legitimate reason to visit.

Types of abuse

Abuse may be

- Physical
- Emotional
- Sexual
- Neglect

It may also be as a result of the child's own behaviour which places them at risk of significant harm e.g. alcohol consumption or drug abuse.

Indicators of abuse

It is important that those caring for adults at risk are aware of and are vigilant to what may be signs of abuse with children (maltreatment or neglect).

These can include:

- Recurring, untreated or unexplained injuries noted or disclosed during contact with a child visiting a scheme
- Someone expresses concern about the welfare of a child
- Inappropriate sexual awareness or engaging in sexually explicit behaviour
- Being emotionally upset and agitated while in the scheme
- Distrust of adults
- Becomes increasingly dirty or unkempt at each visit

RADIUS HOUSING ASSOCIATION <i>Care & Support Directorate</i>			Document No: P311
	Prepared by:	FMcA	
TITLE: ADULT SAFEGUARDING POLICY STATEMENT INCLUSIVE OF SAFEGUARDING CHILDREN	Authorised By:	F McAnespie	
	Date:	05.11.2025	
	Version No:	10	
	Date Ratified by SMT:	18.11.2025	
	To be Reviewed: 2028	Page 24 of 27	

- The child not being allowed to speak for themselves when in the scheme

This list is not exhaustive, and one child may present with more than one of the above indicators.

Significant Harm

“There are no absolute criteria for judging what constitutes significant harm. However, this may include the degree, extent, duration and frequency of harm. Sometimes, a single traumatic event may constitute significant harm, e.g. a violent assault, sexual assault, suffocation or poisoning. More often, significant harm is a series of events, both acute and long-standing, which interrupt, change or damage, the child’s physical and/or psychological development. Some children live in family and social circumstances where their health and development are neglected. For them, it is the corrosiveness of long-term emotional, physical and/or sexual abuse that causes impairment, sometimes to the extent of constituting significant harm”.

What to do if you have a concern about a child’s well-being and/or safety

Although parents have primary responsibility to safeguard their children, statutory & voluntary agencies, neighbours and friends also have a responsibility.

It is not the responsibility of those implementing this policy to decide whether or not a child is suffering/has suffered significant harm. However, as the welfare of children is paramount it is necessary to act to protect children wherever possible.

Where concerns arise in regard to the protection of children who are visiting Radius Schemes and there is reason to believe that a child is suffering or may suffer significant harm, then under Article 66 of the Children’s Order, the Health and Social Care Trust must be informed to enable discharge of the Health and Social Care Trust’s statutory duty to ensure the welfare of children and investigate any claim of abuse.

If staff in Radius have reason to believe a child who is living in our general needs accommodation or visiting our Sheltered, Housing with Care or Supported living schemes is at risk of “significant harm” they should : -

- Alert their Manager or Senior person on duty

RADIUS HOUSING ASSOCIATION <i>Care & Support Directorate</i> 	Document No: P311	
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	Authorised By: Date:	F McAnespie 05.11.2025
TITLE: ADULT SAFEGUARDING POLICY STATEMENT INCLUSIVE OF SAFEGUARDING CHILDREN	Version No:	10
	Date Ratified by SMT:	18.11.2025
	To be Reviewed: 2028	Page 25 of 27

- Outline why you suspect that a child's safety and well-being is at risk or concerns that a child is being abused
- Provide the Manager/Senior with all relevant information to enable an appropriate response by Radius
- Be available to assist with any investigation carried out by the Health and Social Care Trust or Police

Radius Schemes hold contact details for all Health & Social Care Trust Gateway Services for Children's Social Work Services and the Senior on duty Person should make contact to report concerns raised and seek advice as needed.

Allegations against staff

When responding to an allegation made against a member of staff, Radius has a dual responsibility; firstly to the child and secondly to the staff member. Where an allegation has been made against a member of staff the Health & Social Care Trust will conduct an investigation and upon advice from the Trust Radius will instigate an investigation in accordance with its Discipline Procedure. In addition to the above course of action for regulated services RQIA should be notified and depending on the nature of the allegation the Northern Ireland Social Care Council will be informed. If the member of staff is a registered nurse then the NMC will also be informed

If following an investigation the panel determine that abuse has occurred then disciplinary action will be taken and a referral will be made to the Northern Ireland Social Care Council, or NMC and the Disclosure and Barring Service (DBS).

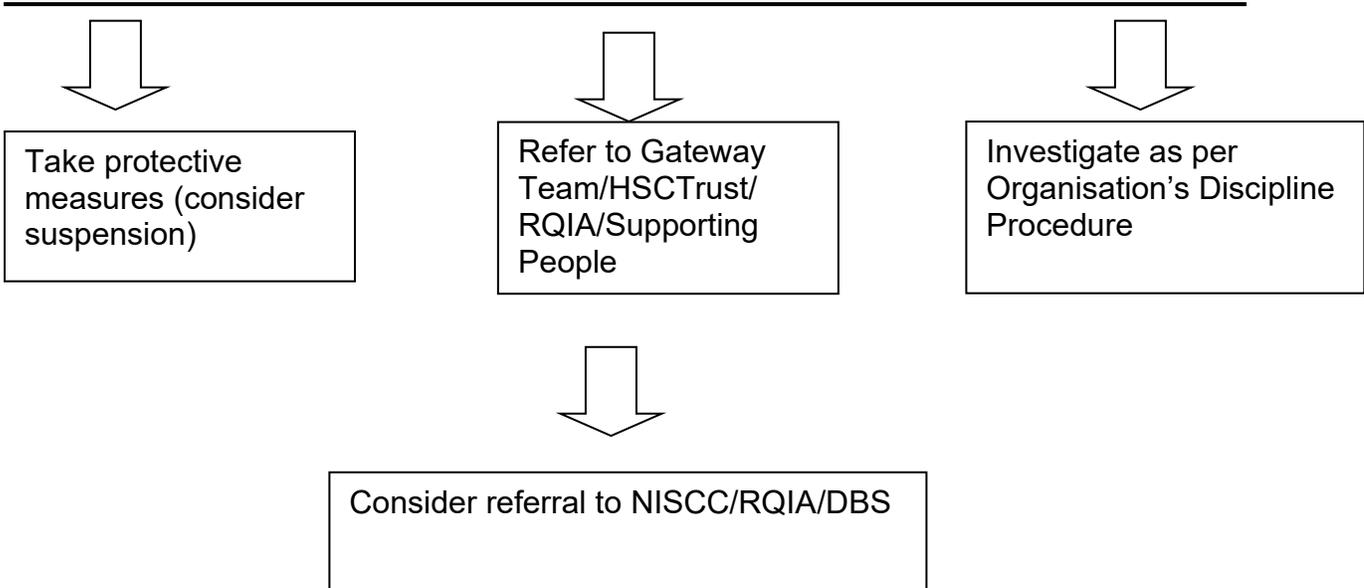
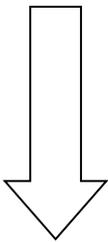
Where circumstances arise, a period of precautionary suspension may be imposed as a neutral act and as a protective measure to enable investigations to be made.

Training in the area of Protection of Vulnerable Groups will be updated every three years for all staff and those working in registered residential care schemes. Those staff who work in registered domiciliary services will receive updated training every two years.

Staff are recruited in line with current legislative requirements including an enhanced Access NI background check. Care/Support staff in all care services schemes must be registered with Northern Ireland Social Care Council as a requirement of employment.

RADIUS HOUSING ASSOCIATION <i>Care & Support Directorate</i>		Document No: P311	
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	Date:		05.11.2025
	Version No:		10
	Date Ratified by SMT:		18.11.2025
		To be Reviewed: 2028	Page 26 of 27

Flow chart - Allegation made



NB: Any investigation conducted as part of Radius' Discipline Procedure will not prejudice HSC Trust or PSNI investigations

RADIUS HOUSING ASSOCIATION <i>Care & Support Directorate</i>		Document No: P311	
		Prepared by:	FMcA
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	Date:		05.11.2025
	Version No:		10
	Date Ratified by SMT:		18.11.2025
		To be Reviewed: 2028	Page 27 of 27

HSC TRUST ADULT SAFEGUARDING CONTACT DETAILS:

HSCT TRUST	Adult Safeguarding Number
Belfast	028 9504 1744
Northern	028 2563 5512
South Eastern	028 9250 1227
Southern	028 3741 2015/2354
Western	028 7161 1366

REGIONAL EMERGENCY SOCIAL WORK SERVICE (RESWS)

Tel: 0289 9504 9999 (Mon-Friday 5pm – 9am; Saturday and Sunday)

HSC TRUST CHILD PROTECTION CONTACT DETAILS:

HSCT TRUST	Adult Safeguarding Number
Belfast	028 9050 7000
Northern	0300 1234 33
South Eastern	0300 1000 300
Southern	0800 7837 745
Western	028 7131 4090