**Vulnerable adult guidance**

 The No Secrets Statutory Guidance (2000) which covered adult safeguarding, used a broad definition of a ‘**vulnerable adult**’ as a person:

* “who is or may be in need of community care services by reason of mental or other disability, age or illness; and
* who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation”.

**The Safeguarding Vulnerable Groups Act (SVGA) 2006** defines how an adult is vulnerable in the context of the setting in which they are situated or the service they receive such as;

* Those in residential accommodation provided in connection with care or nursing or in receipt of domiciliary care services
* Those receiving healthcare
* Those receiving a welfare service or direct payments from social services

The Care Act 2014 has superseded this, and s42 now identifies the subtly different ‘**adult at risk**’ ***for the purposes of raising an alert***.

**S42 of the Care Act 2014 defines an Adult at Risk when the individual;**

* Has care & support needs
* ***Is experiencing or is at risk of abuse or neglect;***
* And as a result of those care needs is unable to protect themselves from that abuse or neglect.

**Examples of vulnerable/ at risk adults** (list not exhaustive)

* Individuals known to social care e.g.S42/ MARMS
* Individuals who are resident or have regular respite in care and residential homes/ colleges/ schools
* Individuals with known ‘vulnerabilities’ who have missed health appointments or disengaged from support services
* Individuals who are known to be or suspected to be at risk of self-neglect
* Individuals who have known substance misuse issues
* Individuals experiencing domestic abuse
* Individuals with poor mental health who are unable to take care of themselves
* Individuals who are dependent on others for personal care & activities of daily living or are reliant upon care and support in their own homes.
* Individuals who are at increased risk of pressure ulcers due to reduced mobility/poor nutrition/ ill health
* Individuals who have dementia or an illness such that they have been assessed as lacking Mental Capacity or have fluctuating capacity and are unable to protect themselves against significant harm and/or are unable to make decisions about their safety.
* Individuals with communication difficulties; speech, hearing, sight, literacy, English not their first language
* Sex workers/ individuals at risk of human trafficking/ modern slavery

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| --- | --- |
| **Characteristics that can increase vulnerability** | **Characteristics that can decrease vulnerability** |
| * Not having mental capacity to make decisions about their own safety including fluctuating mental capacity associated with mental illness and other conditions
* Communication difficulties
* Physical dependency – being dependent on others for personal care and activities of daily life
* Low self-esteem
* Experience of abuse
* Childhood experience of abuse
 | * Having mental capacity to make decisions about their own safety
* Good physical and mental health
* Having no communication difficulties or if so, having the right equipment/support
* No physical dependency or if needing help, able to self-direct care
* Positive former life experiences
* Self-confidence and high self-esteem
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| **Factors that can increase abuse risk** | **Factors that can decrease abuse risk** |
| * Being cared for in a care setting, that is, more or less dependent on others
* Not getting the right amount or the right kind of care that they need
* Isolation and social exclusion
* Stigma and discrimination
* Lack of access to information and support
* Being the focus of anti-social behaviour
 | * Good family relationships
* Active social life and a circle of friends
* Able to participate in the wider community
* Good knowledge and access to the range of community facilities
* Remaining independent and active
* Access to sources of relevant information
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Table adapted from Hampshire Safeguarding Adult Board

S.O’M. and L.L. August 2021