PROTECTION OF VULNERABLE ADULTS POLICY (NO SECRETS)

Reference:	Approved:	HSL05/12/07 BHL30/01/08
	Revised:	

Statement of Intent

Housing Solutions Group (the Group) is committed to ensuring the protection of vulnerable adults from abuse. This policy defines the arrangements and procedures in place within the organizations to ensure that the protection of vulnerable adults from abuse. This policy is designed to conform to the requirements of the Guidance Document 'No Secrets' (Department of Health, 2000)

Aims

The aims of the policy, guidance and supporting information is to:

- Set out the values, principles and policies underpinning all work with vulnerable and abused adults
- Give clear guidance on actions that can be taken in emergencies and when abuse is confirmed, suspected or alleged
- Identify who is at risk;
- Define what is meant by abuse and identify the types of abuse that can occur;
- Promote staff awareness of the common indicators associated with each type of abuse:
- Set out the legal framework within which abuse can be tackled

This policy will be supported by specialised staff Training Programmes as an ongoing process and will be linked to the following additional policies as relevant to individual circumstances:

- Whistle blowing:
- Disciplinary procedures.

The above mentioned policies can be found in the Groups policy folder, or can be obtained from Personnel.

This policy applies to Housing Solutions Group and all of its subsidiaries:

Bridgewater Housing Limited; and Furnival Housing.

Responsibilities

Sheltered Housing Managers, support workers, Line Managers and any other staff suspicious that abuse is occurring within Housing Solutions Group property are responsible for implementing these policies and procedures, in association with their managers and with other agencies.

What is abuse?

The definition of abuse as stated within 'No Secrets' (the government's guidance on policies to protect vulnerable adults from abuse) is:

'Abuse is a violation of an individual's human and civil rights by any other person or persons.'

For vulnerable adults this will focus upon others who have influence over them. These violations may be intentional or unintentional. These violations may be a single act or a repetition of acts over a period of time.

Which adults are vulnerable?

In this guidance 'adult' means a person aged 18 years or over. The broad definition of a 'vulnerable adult' referred to in the 1997 Consultation Paper 'Who decides?' issued by the Lord Chancellor's Department, is 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".

What are the categories of abuse?

For the purposes of this policy, abuse is classified into the following 8 categories: (See supporting information in Appendix 1 for more information)

- Physical
- Institutional/Social
- Sexual
- Psychological/Emotional
- Sectarian
- Financial
- Neglect (other than self-neglect)
- Discrimination

Procedure for actions that can be taken in emergencies and when abuse is confirmed, suspected or alleged

The Group's procedure establishes guidance on what to do in emergencies and when abuse is confirmed, suspected or alleged. Including:

- Dealing with emergencies
- Assessment
- Taking action
- Reporting and supporting
- Recording
- Reviewing the case
- Closing the case

The procedure is attached at Appendix 2 and 3.

Training

Appropriate training on abuse will be provided to staff working with vulnerable adults. Staff should also be pro-active in trying to attend locally arranged multi-agency training on abuse/adult protection.

Advocacy

Staff are encouraged to assist victims by putting them in touch with independent advocates if this is what the person wishes. (See Appendix 5 for more information)

Collaboration with other agencies

Protecting vulnerable adults from abuse is a complex process. Assessment and action on abuse must almost always be in co-operation and collaboration with other agencies, such as social services, doctors and the police.

Housing Solutions Group is committed to interdisciplinary working with these and other agencies, working within the guidelines of "No Secrets" government guidance.

Staff should make contact with lead link abuse officers employed by Social Services and the police in their localities, assist in the development of multi-agency procedures if invited and tap into multi-agency training opportunities.

Confidentiality

Staff must respect confidentiality and not divulge information given in confidence unless justified by assessed risk to the vulnerable adult or if required under contract with Social Services, or agreed through inter-agency protocols. Staff should never promise to keep information to themselves personally, or promise it on behalf of their line managers. It is part of their professional responsibility to notify their line manager, or appropriate professionals, of circumstances that have a bearing on the well-being of a resident, or other parties. They can however promise that the information will be treated in compliance with the Data Protection Act 1998.

Person centred approach

Staff must never lose sight of the fact that there is an individual at the centre of the situation. By definition, the individual concerned is in a vulnerable position, and there may be a temptation for staff to take control of the situation in an inappropriate way.

Staff must remember at all times that it is for the individual concerned to decide what action (if any) they want to take. The role of Housing Solutions Group staff is to identify potential threats and assist the victim in determining a way forward.

Some vulnerable adults may not have the mental capacity to make a decision about an abusive situation. For example, someone with dementia might not be able to fully understand a problem or make a realistic assessment of the risk. Housing Solutions Group staff are not qualified to make such judgments. In such situations the individual's next of kin (if not involved in the abuse) in conjunction with the GP or the social services department or Action on Elder Abuse or Advice Information and Mediation Service (AIMS) should be consulted.

There may be occasions when a person with severe dementia is involved that it may be appropriate to consider bringing in a specialist advocate to work with them.

Risk and protection

The Group, acknowledge individuals' rights to independent lives sometimes involve a degree of risk. Where an individual chooses to accept this risk, their wishes should be respected within the context of their capacity to anticipate and understand the risk.

Recording

Staff must ensure that their recording of facts, incidents, assessments, referrals, case discussions are all sufficient, accurate, concise, up-to-date, legible, dated and factual. Opinions should be kept to a minimum and backed up by factual evidence. These records must be stored in an individual file and stored securely in a manner that safeguards the individual's right to privacy and security.

These records are available to individuals on request (not third party information) and records may be used as evidence in civil or criminal prosecutions or in disciplinary proceedings.

Whistle blowing

Staff are encouraged to take action when suspicious that abuse is occurring at work, no matter what the setting, who the perpetrator is or who the victim is. In line with the Public Interest Disclosure Act 1998, Housing Solutions Group will respect and not penalise those who stand up for anyone who is suspected of being abused. Staff should follow the Whistle blowing procedure.

Equal Opportunities

Housing Solutions Group is committed to a policy of fair and equal treatment for all its members, tenants, employees and applicants, regardless of religion, sexual orientation, age, class, racial origin, sex, disability or marital status as determined in the Equality and Diversity Strategy.

Review

This policy will be reviewed on a 3 yearly basis or in response to changes in legislation, regulatory guidance, good practice or changes in other relevant Housing Solutions Group policy.

Protection of Vulnerable Adults Policy - Appendix 1 Supporting information

1 Categories of abuse

For the purposes of this policy, abuse is classified into the following 8 categories

- Physical can include hitting, slapping, pushing, kicking.
- Institutional/Social can include inappropriate restraint, mis-use of medication;
- Sexual can include rape, sexual assault, sexual acts to which the person has not consented;
- Psychological/Emotional can include humiliation, threats, harassment, coercion, blaming;
- Sectarian can include verbal abuse, inappropriate songs and banners etc;
- Financial can include theft mis-use of property, finances or benefits;
- Neglect (other than self-neglect) can include withholding necessities of life, care needs;
- Discrimination can include racism, sexism, slurs, discrimination based upon disabilities etc.

2 Types and indicators of abuse

Physical Abuse:

- Bruises
- Injuries inconsistent with explanations offered
- Clusters of injuries
- Burns and scalds particularly cigarette burns
- Weight loss
- Dehydrations
- Nervous/fearful watchfulness; fear of physical contact

Institutional/Social Abuse:

- Over-medication (used for social control)
- Under-medication
- Inappropriate restraint

Sexual Abuse:

- Scratching/soreness/pain/unexplained rashes in the genital area
- Bruises on inner thighs and buttocks
- Discomfort when sitting or walking
- Sexually transmitted diseases
- Pregnancy when unable to consent

Psychological/Emotional Abuse:

Unwarranted fear of people and places

- Bed-wetting when incontinence has not been initially diagnosed
- Distrust of people
- Depression
- Emotional withdrawal
- High levels of anxiety

Sectarian Abuse:

- Inappropriate flags, emblems and symbols
- · Distrust/fearfulness of Ministers of Religion
- Slurs and offensive remarks regarding religious beliefs

Financial Abuse:

- Sudden loss of cash or earnings
- Inability to afford basic services when the person is known to have financial means
- Theft of personal property
- Missing personal property (jewellery, cash etc)
- Power of Attorney obtained illegally
- Third party cashing benefits which do not appear to benefit client
- · Fraud involving wills, property and other assets

Neglect:

- · Unauthorised withdrawal of basic services
- Persistent weight loss/emaciation/malnutrition
- Untreated bedsores, ulcers and other skin conditions
- Poor personal care
- Inadequate/inappropriate bedding/clothing
- Third party cashing benefits which do not appear to benefit client

Discrimination:

- Evidence of racism
- Evidence of sexism
- Evidence of ageism
- Slurs and offensive remarks regarding ethnic origin, religion, culture, sex and age
- Discriminatory practices based upon the person's disabilities

3 Legal framework

Protection is available through the criminal and civil courts, both to prevent a person being abused and to take action against the abuser.

The key legislation, regulations and powers relevant to adult protection are:

• The **Health Services and Public Health Act 1968** which allows local authorities to promote the welfare of older people.

- The NHS and Community Care Act 1990 which requires local authorities to undertake an assessment of need of sheltered and supported housing residents.
- 'No Secrets' guidance on the development and implementation of multi agency policies and procedures for the protection of vulnerable adults.
- The Carers (Recognition and Services) Act 1995 requires that the needs of careers are assessed.
- Sections of the Mental Health Act 1983 (England and Wales) may be used where the older person is mentally ill and believed to be ill treated or neglected.
- The National Assistance Act 1948 Section 47 where a local authority has the power to seek an order from a magistrate's court authorizing the removal from their home of a person at severe risk.
- The Mental Capacity Bill 2004/5 offers protection for vulnerable adults who
 lack capacity to make decisions about their acre and treatment because of
 disability, mental illness, brain injury or dementia.
- The Offences against the Person Act 1861. The Domestic Violence and Matrimonial Proceedings Act and the Sexual Offences Act can also be used in certain circumstances.
- Legislation on domestic violence, including the Family Law Act 1996 (England and Wales) may be used against a wide range of abusers who live with the abused person. It is not confined to spouses.
- The Race Relations Act 1976 may be used if the abuse is of a racist nature.
- Arrangements can be made for the Court of Protection (England and Wales) High Court to manage the financial affairs of someone who is mentally incapable.
- The **Human Rights Act 1998** gives everyone basic rights. A key aspect relevant to adult abuse/protection include 'no one shall be subject to degrading treatment or punishment' (article 3)
- The legislative framework for the registration and inspection of care homes and domiciliary care agencies is the **Care Standards Act 2000**.
- The regulatory framework for the sheltered and supported housing sector is Supporting People.

ELDER ABUSE

ELDER ABUSE IS WHEN AN OLDER PERSON SUFFERS BECAUSE OF:-

- **♦ Physical Cruelty**
- **◆ Emotional Neglect**
- ♦ Sexual Abuse
- **♦** Financial Exploitation

A person may be subject to several kinds of abuse at the same time to a lesser or stronger degree.

The abuser can often be a carer, close family member or someone else in a position of trust.

Elder Abuse usually happens in a care setting, but it can take place anywhere and by anyone.

The abuse of vulnerable people is a very serious issue and in some cases, can result in serious injury. It is important that people are aware of Elder Abuse and prevent it from happening.

STOP ELDER ABUSE

If you feel you could be a victim of abuse or you think you know someone who is and would like more information, you can:-

Visit the Action on Elder Abuse Website – or call the Action on Elder Abuse Helpline on 0808 808 8141

Protection of Vulnerable Adults Policy - Appendix 2

Procedure for action to be taken in the event of alleged or suspected abuse: Front Line Staff

This procedure details the action to be taken when there is a suspicion that a vulnerable adult has been /is being abused.

It should be read in conjunction with the Protection of Vulnerable Adults from Abuse Policy.

Responsibilities

Every member of staff has an obligation to ensure that they take responsibility for action whenever they suspect that a vulnerable adult has been subjected to abuse. It is absolutely vital that everyone follows the procedure detailed below in its entirety.

Action	Timescale	
Someone who is unconscious is clearly unable to make decisions for themselves. See Section 1 regarding contacting emergency services		
Emergency Services Where the vulnerable adult appears to be in immediate physical danger or there is evidence of sexual abuse and you have either obtained consent or		
established that the abused person is not able to be self-determining (See Sections 5 and 7) contact the emergency services, usually the police first.	Immediate	
2. Consultation with Line Manager		
If you have reason to believe that abuse of any kind (no matter how seemingly insignificant) has taken or is taking place contact your line manager immediately and inform her/him of your concerns and discuss the next steps. The discussion should cover all the facts and the possible courses of action and must include decisions on the following:-	Within 2 hours	24
The level of the abused person's capacity to be involved in decision making.		
Whether independent advice from experts (e.g. Social Services Adult Protection Team / Action on Elder Abuse), whilst protecting the abused person's identity, should be sought.		
Whether to make a referral to Social Services should be made (usually it should be)		
Whether the police should be informed at this stage. In the case of sexual abuse immediate referral is necessary to ensure that vital		

evidence is not destroyed.		
Whether a doctor needs to be called		
3. Other Managers		
If your line manager is not available you should contact their line manager or any other manager and discuss your concerns and the actions to be taken and by whom.	Within hours	24
4. Our Staff as Suspected Perpetrator		
If you believe that the suspected perpetrator is a member of our staff and there is no manager available to whom you can talk, you must contact Human Resources as soon as possible.	Within hours	24
If it is outside of normal working hours, the abuse is grievous* and no manager or HR representative is available you must immediately contact the social services adult protection team / duty team and if an assault has taken place the police. (See Obtaining Consent - Section 5 and Exceptions to Self Determination Section 7)	Within hours	24
Care Agency Staff as Perpetrator		
If you believe that the suspected perpetrator is a member of care agency staff and there is no manager available to whom you can talk, you must advise the manager of the care agency and refer to the relevant Social Services Adult Protection Team as soon as possible.	Within hours	24
If it is outside of normal working hours, the abuse is grievous* and no manager is available you must immediately contact the social services adult protection team / duty team and if an assault has taken place the police. (See Obtaining Consent - Section 5 and Exceptions to Self Determination Section 7)	Within hours	24
 NB Grievous means physical, sexual assault or harm or theft see Section 9. 		
5. Obtaining consent		
All individuals should normally have a right to decide if and how they wish to be helped.		
Within the limits of your relationship with the alleged abused person, their mental capacity and the complexities of the situation, talk to them about your concerns and the risks involved. You should seek to obtain their consent for any subsequent action you believe is necessary.		
You should not attempt to conduct the investigation e.g. try to avoid asking the alleged 'abusee' too many questions. It is the role of the Adult Protection		

Team to establish the facts.

If the abused person wishes, the staff member should involve close relatives, who maintain an interest. This must never happen if they are the alleged perpetrator.

Where the individual has capacity to self determine it must be them and not their relatives who decide on the course of action to be taken.

6. Use of interpreters

Where an interpreter is required it is vital to use an independent one. Social Services should normally have a list.

It is wholly inappropriate to use a family member or someone from a local cultural or religious organisation of which the abused person or suspected perpetrator is a member.

7. Exceptions to Self-Determination

If the vulnerable adult does not want a referral to be made then their wishes should be honoured unless:

- They or others are in physical danger and/or
- It is the considered opinion of the staff member and the manager that they are unable/incapable of making an informed decision for themselves or
- They are not the only person affected and risk to others needs to be considered.

NB A diagnosis of severe and enduring mental health problems (including dementia) does not necessarily mean that someone is incapable of being self-determining. Care must always be exercised when making a decision to over-ride an individual's wishes.

8. Acting on one's own

There may be circumstances where you have to decide on your own about the course of action you should take, for example, when you are working at weekends or out of hours and a manager is not available.

You should try to contact a manager before taking independent action though it must not cause unnecessary delay.

If you have to take independent action you **must** either obtain the abused person's consent or be very clear that you have established a sound reason to over-ride their wishes. (See Section 7: Exceptions to Self Determination).

9. Independent Action 'Out of Hours'

If the abused person consents or is not able to be self determining, perhaps by being too traumatised or too vulnerable (See Sections 1, 5 and 7), you will have to make a decision on the steps to be taken their behalf. This includes the following but the list is not exhaustive:

 If you believe the degree of abuse is grievous (subjected to physical harm including being inappropriately medicated, denied food, medication, warmth, clothing or appropriate physical care eg toileting) or the persons life may be endangered, contact the Social Services Adult Protection Team/Emergency Duty Team and/or the Police and, if there is physical harm, the Ambulance Service or GP. There must be no exceptions to this whomever the suspected perpetrator may be.

Immediate

 In situations where there is obvious evidence of a criminal offence e.g. assault (physical or sexual), physical harm (denial of food or warmth), or theft a simultaneous referral should be made to the Police.

Immediate

 If you believe the degree of abuse is less than grievous and does not represent immediate danger to the vulnerable adult, consider seeking the advice of an expert agency e.g. Social Services or Action on Elder Abuse. Within 2 hours

24

• If you believe the degree of abuse is less than grievous and does not represent immediate danger make a referral to Social Services

Within hours

You must inform your line manager/a manager as soon as possible on the next working day.

By 9.30am

10. Referral to Social Services - Content of Referral

Tell the Duty Team (or whomever takes referrals in your Social Services areas) that you are making a referral regarding Adult Protection/Adult Abuse and wish the referral to be handled under the requirements of the authorities own policy on Adult Protection or Abuse of Vulnerable Adults.

Ideally, the referral should be made in accordance with the guidance/requirements (on referrals from alerters) of the local authorities own document on Adult Protection / Abuse of Vulnerable Adults. Staff are encouraged to have the local authorities policy to hand when making the referral and when involved in further monitoring work.

At the very least the referral to Social Services should include:

- Personal details of the abuse person (name, address, age, gender, ethnic origin, religion, type of accommodation, family circumstances, support networks, physical and mental health, any communication difficulties).
- The referrer's name, job title and involvement

- Substance of the allegation
- Details of carers
- Details of alleged perpetrator and current whereabouts and likely movements within the next 24 hours
- Details of any specific incidents, dates, times, injuries, witnesses, evidence such as bruising
- Details of any previous concerns
- Awareness or not/consent or not by the abused person, carers, alleged perpetrators of the referral.

11. Following Social Services Inter-agency Guidelines

Once a referral has been made to Social Services that department should then work within its own inter-agency guidelines on abuse of vulnerable adults. Staff should be able to obtain a copy of the Social Services guidelines. Staff should co-operate with Social Services and, if they are involved, the police and/or doctors, in accordance with these guidelines. The inter-agency guidelines may include the referrer's continued involvement through:

- Assistance with any communication difficulties (e.g. sensory impairment, language or speech difficulties).
- Verbal or written clarification and amplification of initial referral details
- Request for further monitoring
- Attendance at a case conference and/or strategy meeting
- Discussions with the police
- Request to be a key worker

In the rare circumstance that staff feel that Social Services are being inappropriately inactive, the staff member should discuss with their line manager whether should take the initiative, for example, by chasing up the Social Services social worker, calling a case conference ourselves or contacting a more senior officer in the Social Services Department.

12. Exploring Alternative Courses of Action

If no referral is made in line with the vulnerable adult's wishes, then other courses of action should be considered including utilising the help-line advice services provided by other agencies (See Appendix 5) and the situation regularly monitored and reviewed by the front line worker and their

line manager.	
13. Ongoing work with the Vulnerable Adult	
Staff should agree with their line manager a framework for working with the vulnerable adult, whether or not the referral to Social Services has been made or accepted. Within this framework, staff should continue to support the vulnerable adult and ensure their safety as well as work, with other agencies, toward the elimination of the abuse.	
14. Locating an Independent Adult /Advocate	
Where it is felt that a vulnerable adult would benefit from having an independent person / advocate to represent their interests, and is in agreement, one of the agencies on the appended list should be contacted on the abused person's behalf.	
15. Minimal Action Option	
Staff should be prepared to accept that in some circumstances little action apart from continued support, recording and monitoring may be the only option due to current legal limitations or the abused person's wishes.	
16. Recording	
It is vital that any incident, assessment, options identified and decisions and actions taken (including no immediate / further action) is recorded. Records must be up-to-date, accurate, legible, factual and verbatim at all times. You must record word for word of what the abusee tells you and all that the abusee tells you have to be recorded. Do not summarise in any way.	Immediately after each event / meeting
Complete an Abuse of Vulnerable Adults monitoring form and return to the Social Services Department.	After referring to SSD and Police
17. Keeping Line Management Informed	
Where there are suspicions of serious abuse or a series of possibly related incidents, for example a number of thefts from residents, staff must ensure that the Assistant Director is informed through their line manager or directly. The AD must inform a Group Director.	Within 24 hours or on next working day

If you are at all in doubt, complete the referral form and send to the Assistant Director of Housing Services who will complete the formal referral to Social Services.

Protection of Vulnerable Adults Policy - Appendix 3

Procedure for action to be taken in the event of alleged or suspected abuse: Team Leaders/Line Managers/Senior Managers

This procedure details actions and additional management considerations when there is a suspicion that a vulnerable adult has been /is being abused.

It should be read in conjunction with the Protection of Vulnerable Adults from Abuse Policy

Responsibilities

Every member of staff has an obligation to ensure that they take responsibility for action whenever they suspect that a vulnerable adult has been subjected to abuse. It is absolutely vital that everyone follows the procedure detailed below in its entirety.

Action	Timescale
1. Discovering an abusive situation	
Where you are the person who discovers the abuse you should follow the procedure outlined within the Protection of vulnerable adults from abuse: Procedure: Front line Staff.	As above
2. Support of staff member	
Where a member of staff reports an instance of suspected abuse you should discuss who is to do what. It should be yourself who contacts the social services adult protection team and informs them of the suspected abuse. Follow sections 11 and 12 within the Protection of Vulnerable Adults from Abuse Procedure: Front line staff.	Clarify roles immediately Contact SSD within 24 hours
Where police involvement is indicated it should be yourself who contacts them.	On being
You must provide the necessary support to the staff member either directly or via an agreed source, possibly another manager or by Counselling Service or both.	informed of the abusive situation
3. Informing Human Resources Where a member of staff is the suspected perpetrator you must inform Human Resources immediately	Within 1 hour or by 9.30 on next working day if situation out of hours

4. Implications for Policy, Systems and Procedures	
Senior managers need to consider whether the abuse raises organisational issues that need addressing.	
5. Implications in partnership settings	
In the case of extra-care schemes or other collaborative projects, line managers need to consider:	Within 48
 Whether the abuse raises issues that need to be jointly handled (eg publicity) 	hours
 Whether the abuse raises issues related to joint arrangements and procedures 	
If there has been a breach in service standards	
If so a meeting of managers of appropriate seniority from each stakeholder organisation is to be arranged to address these issues.	Within 1 week

Protection of Vulnerable Adults Policy - Appendix 4 Referral form

Information about the individual being referred	Comments
1. General information Surname Forename(s) Maiden name or alias Title Date of Birth National Insurance No. (if known) Dismissed, suspended or resigned? (if resigned, please confirm that the individual would have been dismissed or considered for dismissal) Last known address Postcode Telephone number	
Length of the person's involvement (if known)	
Details of the person's history (if known)	
Details of the person's relevant skills and qualifications and training received (if staff member)	
Summary of alleged misconduct to include the nature of the abuse.	
 Explanation of how the person harmed or put at risk of harm the vulnerable adult(s). 	
7. Impact of the alleged abuse on the victim(s).	

Background details on the victim(s)	
Information about the individual being referred	Comments
Details of the care relationship between the person and the victim.	
10. Evidence of alleged misconduct.	
11. Details of investigations and their conclusions carried out to date.	
12. Details of the action taken against the person.	
13. Information on Police involvement or any other agency (if known).	
14. Details of proposed further action.	
15. Any other information considered relevant to the referral.	
16. Employer details, name, address and postcode (if care agency).	
17. Type of establishment	
Contact name:	
Contact number:	
Email Address:	
Position:	
Signed: Date:	
LDale:	I .

Protection of Vulnerable Adults Policy - Appendix 5 Useful contacts

Action on Elder Abuse (AEA)	Practitioner Alliance Against Abuse
Astral House	of Vulnerable Adults (PAVA)
1268 London Road	PO Box 4670
London	Bournemouth
SW16 4ER	
	BH6 3BL
020 8765 7000	Consilitation and the Space of the second
Helpline 0808 808 8141	Email: trsh.parkin@pavauk.org.uk
Email: enquiries@elderabuse.org.uk	Website: www.pava.org.uk
Website: www.elderabuse.org.uk	
Age Concern England	Carers National Association
Astral House	Ruth Pitter House
1268 London Road	20-25 Glasshouse Yard
London	London
SW16 4ER	EC1A 4JT
020 8765 7200	020 7490 8818
Information line: 088 009966	Helpline 0345 573369
Website: www.ageconcern.org.uk	
Victim Support	Counsel & Care
National Office	Twyman House
Cranmer House	16 Bonny Street
39 Brixton Road	London NW1 9PG
London	020 72418555
SW9 6DZ	Helpine: 0845 300 7585
020 77359166	Email: advice@counselandcare.org.uk
Victim Support Line 0845 3030900	Website: www.counselandcare.org.uk
Email: contact@victimsupport.org.uk	
Website: www.victimsupport.org.uk	
Alzheimer's Society	Ann Craft Trust (focus on learning
Gordon House	disabilities and abuse)
Greencoat Place	Centre for Social Work
London	University of Nottingham
SW1P 1PH	University Park
020 73060606	Nottingham
Helpline 0845 3000336	NG7 2RD
Email: info@alzheimers.org.uk	0115 9515400 or 0115 8477334
Website: www.alzheimers.org.uk	Email: information@anncrafttrust.org
Tresener www.a.z.remiererergran	Website: www.anncrafttrust.org
Public Concern at Work	Relatives & Residents Association
Suite 306	24 The Ivories
16 Baldwins Gardens	6-18 Northampton Street
London	London
EC1N 7RJ	N1 2HY
020 74046609	020 7359 8148
Email: helpline@pcaw.co.uk	Email: advice@relres.org
Website: www.pcaw.co.uk	Linaii. advice wielies.org
vvansila. www.hcaw.co.uk	

Voice UK	Prevention of Professional Abuse
Wyvern House	Network (POPAN)
Railway Terrace	Delta House
Derby	175-177
DE1 2RU	Borough High Street
01332 295775	London
Helpline 08700 133965	SE1 1HR
Email: voice@voiceuk.org.uk	020 79399920
Website: www.voiceuk.org.uk	Helpline 08454 500300
	Email: info@popan.org.uk
	Website: www.popan.org.uk
ERoSH	Respond (focus on learning
PO Box 2616	disabilities)
Chippenham	Helpline: 0808 808 0700
Wiltshire	Email: admin@respond.org.uk
SN15 1WZ	Website: www.respond.org.uk
01249 654249	
Email: info@shelteredhousing.org	
Website: www.shelteredhousing.org	