

Improving lives to prevent crime

# Safeguarding Policy 2024

This policy was reviewed and revised on 15th February 2024. The next revision will take place on 15th February 2025

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The Senior Responsible Office (SRO) for this policy is Ruth Durham, Chief of Staff

The Designated Safeguarding Lead (DSL) is Steven Hume who can be contacted on mobile: 07925 148940

email: steven.hume@northumbria-pcc.gov.uk

Alternatively, please contact the Office of the Police and Crime Commissioner at <a href="mailto:enquiries@northumbria-pcc.gov.uk">enquiries@northumbria-pcc.gov.uk</a>

In an emergency you should call the police on 999

This Safeguarding Policy sets out the processes in place for staff working in the Office of the Police and Crime Commissioner for Northumbria (OPCC) to ensure children, young people and adults at risk are protected. In addition, this policy applies equally to all OPCC commissioned services and interventions.

### What to do if you are told about abuse or have a safeguarding concern

We recognise that children, young people and adults at risk may not feel ready or know how to tell someone that they are being abused, exploited, or neglected, and/or they may not recognise their experiences as harmful. However, the nature of our work intentionally creates a safe environment and develops trusted relationships with our staff, this may lead to those we work with sharing details of their abuse or you may identify signs and indicators of abuse and neglect.

# If a child, young person or adult at risk raises a safeguarding concern, you should:

- ✓ Listen and take what you are told seriously
- ✓ Do not interrogate them, it is not your role to investigate the allegation or concern – leave that to the Police and/ or Social Workers
- ✓ Stay calm and reassure them using facial expression. Avoid physical contact
- ✓ Tell them what you will do next.
- ✓ Never promise to keep what you have been told a secret you MUST report what you have been told
- ✓ Make a note, using their words, when you can of what you have been told What you are told may be upsetting. If you have been affected by the experience seek support from your line manager or GP. Make sure you look after yourself.

# Reporting an allegation or concern that a child, young person or adult at risk is being abused:

- ✓ If you are in a school, college, youth or other setting speak to the setting's designated safeguarding lead who will implement their Safeguarding Policy. They will take immediate actions to ensure the safety of the child, young person or adult at risk, and are responsible for contacting the relevant local authority or Northumbria Police
- ✓ As soon as practicable, speak to the OPCC Designated Safeguarding Lead
- ✓ Keep the details of the concern or allegation confidential only share information with those who NEED to know
- ✓ You might be asked to write down your concerns. Your DSL will help you with
  this

# Safeguarding Policy Statement of Intent

This policy outlines the expectations and key principles that all staff working in the Office of the Police and Crime Commissioner for Northumbria (OPCC) and Northumbria Violence Reduction Unit (VRU) should be aware of in relation to safeguarding children, young people and adults who are at risk of harm or abuse. The Northumbria area comprises the six local authorities of Gateshead, Newcastle, North Tyneside, Northumberland, South Tyneside and Sunderland. Each local authority has its own arrangements for safeguarding children and adults, these are available at North and South of Tyne Safeguarding Children Partnership Procedures Manual (proceduresonline.com)

The OPCC has a duty under Section 11 of the Children Act 2004 and recognises the welfare of children, young people and adults at risk form part of its responsibility to monitor the effectiveness of safeguarding across Northumbria. This policy also ensures any services the Police and Crime Commissioner (PCC) commissions from third parties are compliant with the legal duty to safeguard and promote the welfare of children and adults at risk. The principles and good practice found in our approach to protecting children and young people are transferable to safeguarding adults at risk.

This policy will be reviewed annually (or as necessary) to reflect current guidance.

This policy applies to all employees of the OPCC and VRU, including temporary employees, secondees, agency staff, contractors and volunteers, and commissioned service providers. For direct employees of OPCC and VRU, this policy is in addition to the principles and expectations for conduct found in the Northumbria Police Staff Handbook.

In formulating this policy, we rely upon the guidance to be found in the:

- Department for Education (2023). Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children, see <a href="https://assets.publishing.service.gov.uk/media/65cb4349a7ded0000c79e4e1/Working">https://assets.publishing.service.gov.uk/media/65cb4349a7ded0000c79e4e1/Working</a> together to safeguard children 2023 - statutory guidance.pdf
- Department for Education (2023). *Keeping children safe in education* (KCSIE)<sup>1</sup>, see Keeping children safe in education 2023 (publishing.service.gov.uk)
- the Care Act 2014, see http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted

For the purposes of this policy:

A 'child' is defined by the Children Act 1989 as 'anyone under the age of 18'; and safeguarding children means to:

- protect children from abuse and maltreatment;
- o prevent harm to children's health or development;
- o ensure children grow up with the provision of safe and effective care;
- take action to enable all children and young people to have the best outcomes.

<sup>&</sup>lt;sup>1</sup> This Department for Education guidance is updated regularly.

The term 'adult at risk', introduced in the Care Act 2014, applies to anyone aged 18 or over who:

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

An adult at risk of abuse may:

- o have an illness affecting their mental or physical health;
- have a learning disability;
- o suffer from drug or alcohol problems;
- o be frail.

We recognise that the safety and welfare of any child, young person or adult at risk is paramount; and that all children, young people or adults at risk whatever their age, gender, disability, cultural or ethnic origin, colour, religion or belief, social status or sexual identity have a right to be treated with respect and protected from abuse.

For any complaints, issues or comments regarding this policy, child protection or safeguarding children, young people or adults at risk please contact the Designated Safeguarding Lead.

This policy is available at <a href="https://northumbria-pcc.gov.uk">https://northumbria-pcc.gov.uk</a>

## Specific Responsibilities

The **Northumbria Police and Crime Commissioner** has a duty under Section 11 of the Children Act 2004 'to ensure their functions, and any services that they contract out to others, are discharged having regard to the need to safeguard and promote the welfare of children.'

## Senior Responsible Owner (SRO)

The senior responsible owner for this Safeguarding Policy, and with responsibility for the oversight of any safeguarding matters is:

Ruth Durham, Chief of Staff, OPCC

Contact Details: <a href="mailto:Ruth.Durham@northumbria-pcc.gov.uk">Ruth.Durham@northumbria-pcc.gov.uk</a> or Mobile: 07739 354416

The SRO will:

- review and maintain this Safeguarding Policy;
- be contacted as soon as practicable, but in any event within one working day, with the details of any safeguarding allegation or concern
- act as 'case manager' to lead any investigation and support the DSL in dealing with any allegations or concerns reported and ensuring that confidentiality is maintained in all cases;
- support the DSL in co-ordinating training for OPCC staff;
- As appropriate, liaise with any local safeguarding partnership or the Police regarding any allegation or concern;

Section 11 Children Act 2004 responsibilities

Designated Safeguarding Lead (DSL)

The **Designated Safeguarding Lead** is responsible for the application of this Safeguarding Policy and the procedures arising from it

Contact details: Steven Hume

Mobile: 07925 148940

e mail: <a href="mailto:steven.hume@northumbria-pcc.gov.uk">steven.hume@northumbria-pcc.gov.uk</a>
The Designated Safeguarding Lead will:

- investigate any allegations or concerns reported by children, adults or staff of safeguarding issues ensuring that confidentiality is maintained in all cases;
- in the event of a concern or allegation will ensure that the report is immediately (or within one-working day) brought to the attention of the SRO, and agree the appropriate action to be taken;
- be responsible for ensuring that all OPCC staff access and complete safeguarding training as per their induction requirements and that this is refreshed every 3 years.

The Northumbria OPCC operates an open culture, it is the responsibility of all staff to raise any concern they may have regarding child protection or a safeguarding issue and that in doing so are assured that they will be taken seriously and in line with the OPCC Confidential Reporting Policy the report will be treated in confidence.

# Whistleblowing or Confidential Reporting

All OPCC staff and volunteers, including suppliers, those providing a contract with the OPCC and advisors, should feel able to raise concerns about poor or unsafe practice or failures in implementing this policy, and that those concerns will be taken seriously by those who are accountable or responsible for safeguarding children, young people or adults at risk. The OPCC Confidential Reporting Policy<sup>2</sup> applies here and can include something that:

- makes you feel uncomfortable in terms of known standards
- your experience or the standards you believe the OPCC subscribes to
- is against the OPCC's Standing Orders and policies; or amounts to improper conduct.

However, where a staff member feels unable to raise an issue with the PCC, Senior Responsible Owner or Designated Safeguarding Lead or feels that their genuine concerns are not being addressed, other whistleblowing channels are open to them, for example<sup>3</sup>:

 general guidance on whistleblowing is available at: Whistleblowing for employees: What is a whistleblower - GOV.UK (www.gov.uk)

the NSPCC is an alternative route for staff who do not feel able to raise concerns regarding child protection failures internally or have concerns about the way a concern is being

<sup>&</sup>lt;sup>2</sup> See OPCC (2021). *Confidential Reporting Policy*. Available at <u>Northumbria-OPCC-Confidential-Reporting-Policy-4.pdf</u> (northumbria-pcc.gov.uk)

<sup>&</sup>lt;sup>3</sup> Adapted from DfE (2023). *Keeping children safe in education* (pp.20-21)

handled. Staff can call 0800 028 0285 (this line is available from 8:00 AM to 8:00 PM, Monday to Friday) and/ or email: <a href="mailto:help@NSPCC.org.uk">help@NSPCC.org.uk</a>

# Safeguarding Procedures:

# Reporting and managing allegations or concerns

The management of allegations or concerns involving people who work with children and young people is an essential component of this Safeguarding Policy, which extends to the management of any allegations or concerns involving adults at risk.

This policy provides a framework for circumstances where it is alleged a person may pose a risk of harm to a child, young person or adult at risk. Harm<sup>4</sup> is not defined in legislation and should be considered in its widest context, including (but not limited to):

- sexual harm
- physical harm
- financial harm
- neglect
- · emotional harm
- psychological harm
- verbal harm

An allegation or concern which does not meet the harm threshold is referred to as a 'low level' concern, however, this does not mean that a 'low level' concern is insignificant.

An 'allegation' is where anyone working with children and young people or adults at risk, including volunteers and contractors, has:

- behaved in a way that has harmed a child, or may have harmed a child and/or
- possibly committed a criminal offence against or related to a child, and/or
- behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children, and/or
- behaved or may have behaved in a way that indicates they may not be suitable to work with children

(Adapted from DfE (2023) KCSIE, p.87)

The term 'low-level' concern does not mean that it is insignificant. A low-level concern is any concern – no matter how small, and even if no more than causing a sense of unease or a 'nagging doubt' - that an adult working in or on behalf of the school or college may have acted in a way that:

- is inconsistent with the staff code of conduct, including inappropriate conduct outside of work and
- does not meet the harm threshold or is otherwise not serious enough to consider a referral to the Local Authority Designated Officer (LADO).

Examples of such behaviour could include, but are not limited to:

<sup>&</sup>lt;sup>4</sup> For more information see the Disclosure and Barring Service guidance on *harm*, available at https://www.gov.uk/guidance/making-barring-referrals-to-the-dbs#what-is-the-harm-test

- being over friendly with children
- having favourites
- taking photographs of children on their mobile phone, contrary to school policy
- engaging with a child on a one-to-one basis in a secluded area or behind a closed door, or
- humiliating children.

(Adapted from DfE (2023) KCSIE, p.101)

In the case of a low-level concern contact will be made with the relevant Local Safeguarding Children Partnership or Local Safeguarding Adults Partnership (in some areas these are combined partnerships); more often this will be where the child, young person or adult at risk resides.

In considering the report of an allegation there are three options for further action:

- a police investigation of a possible criminal offence;
- enquiries and assessment by a local authority about whether the child or adult at risk is in need of protection or other services;
- consideration of disciplinary action of an individual.

Any allegation or low-level concern about a member of staff will be dealt with confidentially. The circumstances will be reported to the Designated Safeguarding Lead who will contact the relevant Local Authority Designated Officer (LADO or equivalent) to ensure that there is independent oversight of the investigation of that allegation or concern.

When an allegation is made, or a low-level concern is reported a written record will be kept with a summary of:

- the allegation or low-level concern;
- details of how the allegation or concern was pursued and resolved;
- decisions and any action taken.

It is important that following the report of an allegation that support is provided for the child, young person or adult at risk involved, and, where appropriate, the person subject of the allegation or concern whilst any investigation is on-going.

The fact that an OPCC member of staff is dismissed or resigns will not prevent an allegation or concern from being pursued. There is a legal duty to refer the moving or removal of an employee where harm has, or may have, occurred to a child or adult at risk to the Disclosure and Barring Service.

# Safeguarding and Commissioned Services

The OPCC may commission services or activities for children, young people or adults at risk. The award of grants or contracts for such services or activities the OPCC will exercise due diligence to ensure they consider safeguarding arrangements for users; this will include (but not limited to):

• The organisation has its own Safeguarding Policy is in place.

- The policy is reviewed annually and includes reference to statutory guidance, has clear instructions and processes on how to recognise, respond to, report and record a safeguarding concern or allegation.
- Is there a Designated Safeguarding Lead (DSL) or named person responsible for safeguarding?
- Provides or accesses safeguarding training for all staff and volunteers, management committee and trustees, and that training is appropriate to the nature of grant or contract and includes induction to organisational policies and procedures and safeguarding good practice.
- Ensure that all people (e.g., staff and volunteers,) working in a regulated activity with children and adults at risk complete a Disclosure & Barring Service.

# Safeguarding children at risk

The OPCC's and VRU's activities may take place in educational, youth provision or other informal settings and are regarded as a 'regulated activity' within the definition set out in Schedule 4 of the Safeguarding Vulnerable Groups Act 2006, as amended by the Protection of Freedoms Act 2012.

The OPCC may engage full-time paid employees or commission intervention providers to work with children, young people or adults at risk, who shall be regarded as being engaged in a 'regulated activity' and will require a Disclosure and Barring Service Certificate (or equivalent). For anyone waiting for their DBS check, arrangements will be put in place for any regulated activity to be supervised.

It is an offence to engage any person in a 'regulated activity' if that person has been barred from such activity by the Disclosure and Barring Service.

# Safeguarding adults at risk

The principles and good practice for protecting children and young people (under the age of 18), set out in this policy, will apply to adults at risk (those over the age of 18) but include additional considerations. Anyone engaged by the OPCC is to act as an 'alerter' for allegations or to raise concerns of any safeguarding issue for an adult at risk.

The Social Care Institute for Excellence suggests 6 principles in the safeguarding of adults<sup>6</sup>:

#### **Empowerment**

People being supported and encouraged to make their own decisions and informed consent.

#### Prevention

It is better to take action before harm occurs.

<sup>&</sup>lt;sup>5</sup> What is a 'regulated activity'? There is more information available on the Home Office website at <a href="http://www.homeoffice.gov.uk/agencies-public-bodies/crb/about-crb/crb-pofa-2012/ra-children/">http://www.homeoffice.gov.uk/agencies-public-bodies/crb/about-crb/crb-pofa-2012/ra-children/</a> and the Department for Education website at

http://www.education.gov.uk/childrenandyoungpeople/safeguardingchildren/a00209802/disclosure-barring 

More information is available at https://www.scie.org.uk/safeguarding/adults/introduction/six-principles/

#### **Proportionality**

The least intrusive response appropriate to the risk presented.

#### Protection

Support and representation for those in greatest need.

#### **Partnership**

Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.

#### **Accountability**

Accountability and transparency in safeguarding practice.

#### Capacity

Where it is suspected that a child is subject of abuse or neglect there is an absolute duty to act and report suspicions, however, adults at risk or any adult who finds themselves in vulnerable circumstances are assumed to have the *capacity* to make decisions about their own situation. This requires informed consent from the individual concerned regarding any actions that may be taken regarding concerns or allegations. For example, an adult at risk may choose to remain in an abusive situation, and this will limit how a report or information about concerns is shared.

The Mental Capacity Act 2005 describes *capacity* or *mental capacity* as the ability to make a decision at a particular time and proposes five guiding principles<sup>7</sup>:

- A presumption of capacity: Every adult has the right to make his or her own decisions and must be assumed to have capacity to do so unless it is proved otherwise; it cannot be assumed that someone cannot make a decision for themselves just because they have a particular medical condition or disability.
- 2. **Individuals being supported to make their own decisions**: A person must be given all practicable help before anyone treats them as not being able to make their own decisions.
- 3. **Unwise decisions**: People have the right to make decisions that others might regard as unwise or eccentric.

Where it has been judged, by professionals who are trained and qualified to make such a judgement, that an adult lacks capacity then decisions should consider:

- 4. **Best interests**: Anything done for or on behalf of a person who lacks mental capacity must be done in their best interests.
- 5. Less restrictive option: Someone making a decision or acting on behalf of a person who lacks capacity must consider whether it is possible to decide or act in a way that would interfere less with the person's rights and freedoms of action, or whether there is a need to decide or act at all.

It is not the responsibility of OPCC staff to judge whether an adult at risk 'lacks capacity' but we should be mindful of our duty of care in considering the individual's wishes outlined in the principles 1. to 3. above.

<sup>&</sup>lt;sup>7</sup> See <a href="https://www.scie.org.uk/mca/introduction/mental-capacity-act-2005-at-a-glance">https://www.scie.org.uk/mca/introduction/mental-capacity-act-2005-at-a-glance</a>

#### Safer Recruitment

As part of the OPCC safer recruitment process, guidance and support is provided by Northumbria Police, Human Resources (HR) which includes managing and advertising job vacancies, processing application forms, checking references and ensuring guidance from the Northumbria Police Vetting Team is sought and vetting completed in accordance with that advice.

For any staff role involving regular contact or engaging in regulated activities with children, young people or adults at risk, for example, the VRU Education Team, then Northumbria Police HR will advise on the level of DBS check required, and line-managers will ensure that staff are appropriately supervised in any regulated activity until the DBS process is complete.

The details of staff considered **not** suitable to work with children, young people and adults at risk will be referred to the Disclosure and Barring Service (DBS) with the advice and support of the Northumbria Police HR.

#### Induction and safeguarding training

All OPCC staff will be introduced to this safeguarding policy and their responsibilities as part of their induction programme.<sup>8</sup> All staff will receive safeguarding training and this should be refreshed every three years.

#### Social media9

OPCC staff should only be 'friends' with work-related contacts on social networking sites via a designated and approved work account for business purposes.

#### Personal details

OPCC staff should not divulge personal information on social media, such as your home address, personal phone numbers and email addresses to work contacts, e.g., volunteers, service users, intervention providers and beneficiaries.

#### Role modelling

Please remember that as OPCC staff you are representing a community facing service and your actions should reflect the level of responsibility that this entails. All staff should aim to be excellent role models and display behaviours that reinforce the wider image and values of the OPCC and VRU, including:

- treat everyone equally with respect and dignity;
- promoting healthier lifestyles
- be appropriately dressed and work in a respectful manner, for example, not use obscene language

<sup>&</sup>lt;sup>8</sup> As set out in the Northumbria Police, Police Staff Induction Handbook.

<sup>&</sup>lt;sup>9</sup> The OPCC has a *Social Media Policy* detailing expectations for acceptable behaviour here: <a href="https://northumbria-pcc.gov.uk/contact-feedback/general-enquiries/social-media-policy/">https://northumbria-pcc.gov.uk/contact-feedback/general-enquiries/social-media-policy/</a>

- report any concerns that you may have about the conduct or behaviour of child, young person or adult at risk to the setting's staff or the Designated Safeguarding Lead (in any other instance);
- be aware that you are in a position of trust and influence, recognising the boundaries between professional conduct and personal friendship;
- prioritise the safety and well-being of children, young people and adults at risk involved in any sessions or activities, ensuring that session content and/ or the activities are appropriate for the age, maturity, experience and ability of the individual or group;
- avoid spending any significant time working with children in isolation;
- challenge negative or disruptive attitudes and behaviour;
- avoid being drawn into inappropriate attention-seeking behaviour, such as tantrums;
- remember that your behaviour or actions may be misinterpreted by others, even if they are well meant, for example, inappropriate humour;

# If you are unsure or require advice and guidance, seek support from other staff, your line manager or the OPCC DSL.

#### You should never:

- socialise with or invite a volunteer or service user to your home
- enter into inappropriate relationships, for example, relationships of an intensely personal or sexual nature, even though some volunteers are over the age of consent
- allow or engage in inappropriate touching of any form
- allow the use of inappropriate language unchallenged or use inappropriate language yourself, this includes the spoken word or when writing in e mails or using social media
- trivialise or allow inappropriate or abusive conduct or behaviour to go unchallenged, such as bullying
- take part in inappropriate behaviour or contact, this can be physical, verbal or sexual;
- engage in physical contact games with young people, such a rough-housing
- make sexually suggestive comments to a child, even in fun
- undertake any activity that could be construed as being 'personal care' (this type of support should have been identified during the booking process and appropriate arrangements made)
- allow a child or young person to drink alcohol or use drugs when working or attending events or interventions.

# Appendix 1 – Definitions, signs and indicators of Child Abuse and Neglect

If you are concerned about possible abuse, please speak to the setting's or OPCC Designated Safeguarding Lead, who will make the decision to contact Children's or Adult's Social Care Services or the Police. It is not our responsibility to decide if abuse is taking place, but it is our responsibility to act on our concerns.

Dhysical Abyes	Clause and indicators or as Saulustan
Physical Abuse	Signs and indicators may include:
A form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child.  Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately induces illness in a child.	<ul> <li>Multiple bruising/ scratching, adult bite marks, outline bruising (e.g. belt, hand, finger tips), bruises to the eyes and ears;</li> <li>Burns and scalds, cigarette burns;</li> <li>difficulty in moving limbs;</li> <li>blood in the white of the eye;</li> <li>injuries to 'not-yet mobile' babies;</li> <li>injury to the mouth;</li> <li>drowsiness from head injury or poisoning;</li> <li>aggressive or withdrawn behaviour;</li> <li>poor concentration.</li> </ul>
Emotional Abuse	Signs and indicators may include:
The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.  It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.  It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction.	<ul> <li>self-harm;</li> <li>developmental delay;</li> <li>eating disorders;</li> <li>poor self-image;</li> <li>unwillingness to join in;</li> <li>fear of failure, lack of confidence;</li> <li>few friends;</li> <li>low self-esteem;</li> <li>may bully others;</li> <li>difficulty in forming relationships;</li> <li>fear of new situations;</li> <li>obsessive rocking/ thumb sucking;</li> <li>attention seeking behaviour;</li> <li>witnessing domestic violence;</li> <li>frozen watchfulness.</li> </ul>
It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.	

#### **Sexual Abuse**

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening.

The abuse may involve physical contact, including assault by penetration (e.g. rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.

May also include non-contact activities, such as involving children in looking at, or in the production of sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the Internet).

Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse as can other children.

#### Signs and indicators may include:

- injuries to genital and or anal area;
- sexually transmitted disease;
- unwanted pregnancy;
- bruises, scratches, burns or bites;
- eating disorders;
- self-harm:
- bleeding from the vagina or anus;
- pain in passing urine or faeces;
- persistent discharge;
- frequent masturbation;
- wetting, soiling, smearing excreta;
- sexual awareness inappropriate to developmental stage;
- acting out sexual activity;
- aggression/ withdrawal.

#### **Neglect**

The persistent failure to meet a child's basic physical and/ or psychological needs, likely to result in the serious impairment of the child's health or development.

Neglect may occur during pregnancy as a result or maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment); or
- protect a child from physical or emotional harm or danger; or
- ensure adequate supervision (including the use of inadequate care-givers); or
- ensure access to appropriate medical care or treatment.

Signs and indicators may include:

- delayed physical development;
- underweight and small structure;
- overweight or obese;
- chronic nappy rash;
- slow growth;
- frequently smelly;
- persistently dirty;
- persistent hunger;
- impairment of health;
- infections slow to clear;
- persistent head lice;
- low self-esteem;
- destructive tendencies;
- stealing or hiding food.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

**Bullying** is a deliberately hurtful behaviour, usually repeated or sustained over a period of time, where it is difficult for those being bullied to defend themselves. The bully may often be another young person. Although anyone can be the target of bullying, victims are typically shy, sensitive and perhaps anxious or insecure and may have been singled out for physical reasons – being overweight, physically small, having a disability or belonging to a different race, faith or culture.

# Appendix 2 – Types of adult at risk abuse

Abuse is a violation of an individual's human and civil rights by another person or persons. Adults at risk may be abused by a wide range of people including family members, professional staff, care workers, volunteers, other service users, neighbours, friends, and individuals who deliberately exploit their vulnerability. Abuse may occur when an adult at risk lives alone or with a relative, within nursing, residential or day care settings, hospitals and other places assumed to be safe, or in public places.

The following are examples of abusive or exploitative behaviours which could give rise to a safeguarding concern:

**Physical abuse** - including assault, hitting, slapping, pushing, misuse of medication, restraint, or inappropriate physical sanctions.

**Domestic violence** – including psychological, physical, sexual, financial, emotional abuse and so called 'honour' based violence. This may not happen in a structured setting, such as a club or centre, but this could be occurring in a home situation.

**Sexual abuse** - including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, exposure to pornography or witnessing sexual acts and sexual assault or sexual acts to which the adult has not consented.

**Psychological abuse** - including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, 'gaslighting' and coercion, harassment, verbal abuse, isolation or unreasonable and unjustified withdrawal from services or supportive networks.

**Financial or material abuse** - including theft, fraud, internet scamming, coercion in relation to an adult's financial affairs or arrangements, such as wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits. People with learning disabilities or dementia are particularly vulnerable to this type of abuse; sometimes by perpetrators who befriend victims with the intention of exploiting them.

**Discriminatory abuse** - including forms of harassment, slurs or similar treatment due race, gender and gender identity, age, disability, sexual orientation or religion.

**Neglect and acts of omission** - including ignoring medical, emotional or physical care needs, failure to provide appropriate health and social care and support or educational services; the withholding of the necessities of life, such as medication, adequate nutrition and heating.

**Self-neglect** – this covers a wide range of behaviour neglecting to care for one's own personal hygiene, health or surroundings. Self-neglect might indicate that the person is not receiving adequate support or care or could be an indication of poor mental health.

**Organisational abuse** – including neglect and poor care practice within an institution or specific care setting such as a hospital or care home. This may range from one-off incidents to on-going ill-treatment arising from structure, policies, processes and practices within an organisation.

**Modern slavery** – encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.

#### Recognising abuse

Patterns of abuse vary and include:

- Serial abusing in which the perpetrator seeks out and 'grooms' victims. Sexual abuse and financial abuse often follow a sustained pattern of behaviour
- Long-term abuse in the context of an ongoing family relationship such as domestic violence between partners or generations; or
- Opportunistic abuse, such as theft occurring because money or valuable items have been left lying around.

**Signs and indicators** are similar to those for children and young people (see Appendix 2) but may also include:

- Self-harming;
- A person's belongings or money go missing;
- The person is not attending or no longer enjoying their sessions;
- A person has a fear of a particular group or individual;
- An allegation someone tells you or another person that they are being abused.