

Policy Name:	Safeguarding Policy and Procedure
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This document relates to the following St Basils policies, procedures and guidelines:

- Complaints, Compliments and Comments
- Equality, Diversity & Inclusion
- Confidentiality
- Health and Safety
- Lone Working
- Allocations and Referrals
- Dignity and Respect
- Domestic Abuse
- Eviction and Abandonment
- Missing Persons Policy
- Historical Abuse Allegation Guidelines
- Security of Information
- Recording Standards
- Data Protection
- Recruitment and Selection
- Whistleblowing
- Code of Conduct
- Probity
- Assessment and Support Planning
- Engagement
- E-Safety

This document also relates to further Local Authority and National Supplementary Guidance which can be found in [Appendix 1](#)

Consultation Framework:

Consultation of this policy has taken place with the following parties during the following periods of time:

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Policy Statement

St Basils has a duty of care (to residents and visitors, staff and the public) and is committed to safeguarding and promoting the welfare of children and young people. We prioritise the provision of a safe and secure environment in which children and young people can thrive and develop and where all aspects of their welfare will be protected and promoted. This commitment is demonstrated by the inclusion of safeguarding as a priority within all our policies and procedures.

St Basils employs a person-centred perspective that focuses on outcomes for the child or young person. The organisation is a Psychologically Informed Environment (P.I.E), in which there is a culture of active listening. Concerns regarding children, young people or their children are discussed with them first and their agreement to any action is always sought, or where necessary they are informed of required actions. Safeguarding decisions must take account of the ability of the individual(s) concerned to give informed consent to any actions proposed and should comply with the Mental Capacity Act 2005.

However, consent is not required if deemed to be in the best interest of the child or young person, for example, placing a child or young person at significant increased risk of harm, suspecting sexual abuse or fabricating illness. Where there is concern about a potential safeguarding issue, we make all necessary enquiries to make an informed and justifiable decision, in line with the requirements of the Children Act 1989, Children Act 2004 and Care Act 2014. Moreover, wherever required, we assist partner local authorities in any enquiries around safeguarding issues, wherever it is reasonable and practicable to do so. Safeguarding issues will be reported to both the placing and the host authority, where a child is placed from one authority and the provision is in a different authority.

Young people and their children are fully supported by our employees and/or external agencies through any process deemed necessary for their safeguarding and health and wellbeing, within the confines of our Confidentiality Policy. They are helped to keep themselves safe from abuse, including bullying, homophobic behaviour, racism, and sexism.

They are informed of our Data Protection Policy and of their right to be consulted about the disclosure of personal information and the limits of this right. A copy of the Data Protection Policy is available to all young people, with employees always available for discussion. Information is provided in a format and language that can be easily understood by all young people. We also have a Youth Advisory Board that scrutinises our policies and procedures.

Scope of Policy

We view the function of safeguarding children and adults, whether they live as a single person, or within a couple or family group setting, as the responsibility of all. Consequently, this policy and procedure applies to all employees, including sessional workers; volunteers; board and committee members; student placements; agency workers; trainees; and those working for bodies on our behalf.

This policy covers all the young people that we provide a service to.

Definitions

Safeguarding is defined as the protection of a person's health, wellbeing, and right to live in safety, free from harm, abuse, and neglect.

Abuse is a violation of an individual's human and civil rights by another person or persons and may result in significant harm to, or the exploitation of the person subjected to it. Abuse may consist of:

- A single act or repeated acts.
- Physical, verbal, psychological or emotional.
- An act of neglect or an omission to act.
- Occur when a person is persuaded to enter into a financial or sexual transaction to which they had not consented or cannot consent.
- Deliberate or unintentional or result from lack of knowledge.

More definitions of abuse/harm can be found in [appendix 2](#)

Legislation and Guidance

The Children Act 1989, 2004 <https://www.legislation.gov.uk/ukpga/1989/41>

The Protection of Children Act 1999 <https://www.legislation.gov.uk/ukpga/1999/14/contents>

Working Together to Safeguard Children guidance 2018:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/942454/Working_together_to_safeguard_children_inter_agency_guidance.pdf

Safeguarding Vulnerable Groups Act 2006 http://www.legislation.gov.uk/ukpga/2006/47/pdfs/ukpga_20060047_en.pdf

The Care Act 2014 <http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>

Care and Support Statutory Guidance 2021 [Care and support statutory guidance - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/942454/Care_and_support_statutory_guidance_2021.pdf)

The Modern Slavery Act 2015 <https://www.legislation.gov.uk/ukpga/2015/30/contents/enacted>

Human Rights Act 1998 <https://www.legislation.gov.uk/ukpga/1998/42/contents>

The Equality Act 2010 [Equality Act 2010 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/2010/15/contents/enacted)

Mental Capacity Act 2005 <https://www.gov.uk/government/collections/mental-capacity-act-making-decisions>

The Data Protection Act 2018 <http://www.legislation.gov.uk/ukpga/2018/12/contents/enacted>

A Guide to General Data Protection Regulation 2018 [guide-to-the-general-data-protection-regulation-gdpr-1-0.pdf \(ico.org.uk\)](https://ico.org.uk/for-organisations/guide-to-the-general-data-protection-regulation-gdpr/)

Section 11 of the Children Act 2004 places a duty upon a Local Authority and other named organisations to ensure that, in discharging their function, they have prioritised safeguarding and the welfare of children. St Basils complies with the statutory guidance¹ as contracted providers of services for children and families. Our arrangements reflect the importance of safeguarding to us and promoting the welfare of children as specified by the guidance.

The Mental Capacity Act (Including DoLS) 2005, covering England and Wales, provides a statutory framework for people who lack capacity to make decisions for themselves, or who have capacity and want to make preparations for a time when they may lack capacity in the future. These can be small decisions – such as what clothes to wear – or major decisions – such as where to live, or what happens if abuse has occurred. The Act sets out who can take decisions, in which situations, and how they should go about this.

The Care Act 2014 sets out a clear legal framework for how local authorities and other parts of the system should protect adults at risk of abuse or neglect. The Care Act 2014 identifies the six principles that underpin adult safeguarding work:

We follow the six principles of safeguarding - see [appendix 3](#) for more information.

- **Empowerment.** We pride ourselves in the level of consultation, participation and scrutiny we offer. The St Basils Youth Voice has a formal scrutiny role and we have taken a lead in national developments such as the Youth Homeless Parliament.
- **Prevention.** To safeguard anyone is to prevent them from getting into harm. It is also necessary to help our young people recognise and deal with harmful situations. All our employees are trained to recognise the signs of neglect and harm and act to prevent, respond and safeguard.
- **Proportionality** We equip our young people to deal with and respond to issues themselves in the most appropriate manner. All employees continuously assess risk within their projects and respond in a manner that is effective but minimises the intrusion into the lives of our young people.
- **Protection** Our mission is to support young people in greatest need, and we have a very proactive advocacy role locally, regionally and nationally in promoting their needs and their voice.

¹ 'Working Together to Safeguard Children' (2018)

- **Partnership.** Safeguarding necessitates multi-agency working and we have a history of working in partnership with the community, statutory and voluntary sector agencies, fellow providers, and other stakeholders.
- **Accountability.** We are a diverse community, working at times with some of the most vulnerable people who have never experienced trust, consistency or being heard. Our role is to help support such people and allow them to be accountable and transparent in their future activities.

General Principles

The scope of this safeguarding policy is based on different pieces of legislation, for children and for adults, which covers all our residents and service users including young people between the ages of 16 and 25 and those who may have young children living with them. This document sets out our policy in relation to child protection and safeguarding young people and adults at risk.

St Basils is a registered housing association, a charity, and a limited company, but is **not** a registered care home. We provide accommodation and integrated **support** services for young people aged 16-25, offering a range of accommodation and support services including: direct access schemes, foyers, young parent's schemes; and a range of generic supported housing schemes and supported lodgings, delivering differing levels of support for young people. In addition, we provide floating support to help support young people maintain independent living across all tenures.

Due to the age range and the different levels of vulnerability of young people and children that we work with, three different areas are covered in our approach to safeguarding:

- Child protection (under 18 year olds and under 21 if in the 'looked-after' community)
- Protection of adults at risk (18 and over)
- Other vulnerable young people/young adults (18 and over)

We also work across several Local Safeguarding Partnerships, each of whom have their own procedure manuals and referral processes which need to be followed by organisations working with children and young people. Consequently, we always recognise the importance of operating within a multi-agency framework, including the need to share information with partner agencies with the consent of the child or young person.

We aim to be consistent with the requirements of each of these Safeguarding Partnerships in developing our own internal safeguarding policies and procedures. Reference must be made to the appropriate Safeguarding Partnership manual in cases where it is felt a referral should be made to Children or Adult Services. In addition, referrals must be made through the process outlined in these documents and comply with any specific requirements outlined in the manuals/ procedures, including those specifically concerned with information sharing.

We are committed to multi-agency working to safeguard and protect children and young people, including appropriate and effective information sharing and/or multi-agency assessment through initiatives such as: Early Help Assessment and Local Safeguarding Partnership Information protocols. We also work closely with other organisations, when necessary, to address any barriers to an effective approach to safeguarding.

Where a referral to Children's Services is not required but it is evident that a child or young person needs a range of support, we contribute to, and as appropriate, lead on Early Help Assessments to support their safeguarding and wellbeing. We will work to the Right Help, Right Time principles as well as Working Together, Putting the Child and the Family at the Centre, building on strengths, and providing effective support to help them.

Roles and Responsibilities

It is the responsibility of all our employees, volunteers and students on placement to report any discovered or suspected safeguarding concern.

For more roles and responsibilities see [appendix 4](#) Safeguarding Responsibilities

St Basils has a Designated Safeguarding Lead (DSL) and a Designated Board Member for Safeguarding (DBMS). Their contact details can be found in [Appendix 4a](#) – Safeguarding Contacts

The designated safeguarding lead (DSL) is the main source of support, advice and expertise for safeguarding within St Basils. Their responsibilities are to:

- Advise and support the senior team in developing and establishing your organisation’s approach to safeguarding.
- Play a lead role in maintaining and reviewing your organisation’s plan for safeguarding.
- Coordinate the distribution of policies, procedures and safeguarding resources throughout your organisation.
- Advise on training needs and development, providing training where appropriate.
- Provide safeguarding advice and support to employees and volunteers.
- Delegate responsibilities to, monitor outcomes and supervise all DSO’s
- Report on a regular basis to St Basils Senior Management Team and Board
- Report to regulatory bodies

In addition to the DSL and DBMS all St Basils services within a local authority area will have a named Designated Safeguarding Officer (DSO). These can be found in [appendix 4a](#) – Safeguarding Contacts, attached to this policy.

The DSO will:

- Manage safeguarding concerns, allegations or incidents reported to St Basils.
- Manage referrals to key safeguarding agencies (eg social services or police) of any incidents or allegations of abuse and harm.

Training Requirements

All employees, students, volunteers and board members receive Safeguarding training. It is available for, and taken up by, all employees, including regular updates at the required level, including the designated safeguarding lead.

All	Safeguarding Awareness
DSL/DSO/Supervisors/ Frontline Workers	Safeguarding Adults, Safeguarding Children PREVENT
DSL/ DSO	Designated Safeguarding Lead Training Managing allegations of abuse Safeguarding Practice Review

Communication

This policy will be communicated effectively to all employees via a range of different communication avenues and can be produced in other formats where needed.

Policy Responsibility

The Director of Progression is responsible for ensuring this policy is implemented and monitored.

Continuous Renewal Clause

This procedure will be reviewed annually by the organisation to ensure it is in accordance with good practice guidance, prevailing legislation, and statutory frameworks. However, this policy may be assessed before that time as necessary – such as:

- if it becomes ineffective.
- to reflect substantial changes in practice.
- following inspection, as recommended by auditors.
- changes required by law.

Disclaimer

This document can only be considered valid when viewed on the St Basils Shared Drive or Workplace (St Basils intranet). If this document has been printed or saved to another location, you must check that the version number on your copy matches that of the document online. Hard copies of this document are considered uncontrolled - please refer to the St Basils Shared Drive or Workplace for the latest version.

St Basils Corporate Code of Practice – Safeguarding

Safe Recruitment

At St Basils safe recruitment starts when we are preparing to advertise a post. Job descriptions and person specification outline the safeguarding responsibilities of the post. Wherever possible this is also mentioned in the advertisement. Applicants are required to complete our application form which asks for detailed information including: their name; personal details, education, training, employment history; and their reason for applying for the post. We identify any gaps in their history and ensure an explanation is sought at interview if the applicant is to be shortlisted. They are also required to declare any offences they may have at this stage. All shortlisting is carried out by the interview panel.

Safeguarding runs through different stages in the recruitment, selection and management processes at St Basils. The following apply to all employees:

recruitment and selection:

- have clear roles, responsibilities and accountabilities identified for them, captured within job descriptions and person specifications, including a specific mention of safeguarding children and young people.
- are properly selected through a systematic selection process designed to assess the applicant's suitability to work with children and young people, together with the necessity to undertake Disclosure & Barring Service (DBS) checks
- have received a copy of the safeguarding statement.
- have been subject to our shortlisting procedures, including the seeking of references.
- are vetted, including ensuring that DBS checks, appropriate to the role, are carried out and updated every three years. Their details are held on a single central register. Any changes in regulations in relation to vetting and barring are implemented when required. When recruiting support employees or volunteers who have recently resided overseas, employees must ensure that a copy of a recent DBS check (or equivalent) from the country or countries of residence is obtained.
- When the DBS check is positive, a decision on the suitability for the candidate to be recruited will be made by the Safer recruitment panel. The DSO for that area will undertake a risk assessment which will be presented to the panel and the DSL will make the final decision.
- Risk management plans will be put in place and monitored in line with our Recruitment & Selection Policy.

Induction and training

- Employees, volunteers, students and board members receive training on our safeguarding policies and procedures relevant to their role, including recognising and responding to safeguarding issues in their bespoke induction programme.
- are subject to a defined probationary period.
- as part of the approach to employee's development, and through our training programme, receive specific training on safeguarding adults; child protection; and promoting the welfare of children and young people at the required level including the DSO/DSL.
- have all their safeguarding training recorded and evaluated.
- participate in learning and development training, including all aspects of safeguarding, which is compulsory.
- have regular supervision which is recorded and includes safeguarding if relevant to their function.

Positive Disclosure & Barring Service Check - A positive DBS is one where offences have been identified. In cases of a positive DBS during employment the following procedures will be followed:

- The Human Resources Department (HR) is responsible for continued compliance with the DBS and informing the DSL who will instigate necessary action.

- Any necessary investigation will include a risk assessment of the individual and work activity to ensure the safety of children and adults with care and support needs, undertaken by the DSO with support from HR.
- The DSL is responsible for informing the Directorate and the decision relating to the notification of disclosure to the Local Authority.
- The operation of a similar process for existing employees with investigations being processed within the framework of the Disciplinary procedure.
- The Directorate may consult with and seek the guidance of the relevant Local Authority Designated Officer (LADO).
- The Directorate decides whether the applicant can be or remain employed, acting as a volunteer or an external contractor.
- All employees are fully aware of the need to disclose if they are living in the same household where another person is living who is disqualified *as specified in regulation 9 of the Childcare (Disqualification) Regulations 2009 as made under section 75 of the Childcare Act 2006*
- Any individual in post who receives a positive disclosure is removed from duties if they have access to children or adults with care and support needs pending investigation and risk assessment being undertaken.

Assessment and Admission policy and procedures

We minimise potential situations of abuse of children and young people through our assessment and allocation procedures. We conduct comprehensive needs and risk assessments for each of our referrals that covers safeguarding issues and informs the allocation process. We provide support plans for all our service users that are tailored to individual young people; with their progress being monitored on a regular basis. We also ensure that all our service users have a named support worker who works in partnership with them to develop and review their support plan. We participate in multi-agency assessment procedures.

New developments and existing accommodation

We recognise the need to safeguard and promote the welfare of children and young people in:

- Standards of our accommodation
- New service developments
- The refurbishment of existing buildings
- The design and construction of new buildings

We undertake a risk assessment of a room or building to check its suitability. Furthermore, when designating accommodation as suitable for young people with children, we take all necessary action to minimise risk.

There is a designated safe, secure, and confidential area within each of our projects and premises where children and young people can be seen or cared for. The safety and suitability of these designated areas is kept under regular review.

All our employees and volunteers have been issued with an organisational identity badge, which displays the name and a photograph of the individuals.

All external contractors who work at our sites are expected to have a DBS check in place and any external contractor on the project or premises should sign the visitors' book and display identification from their contracted organisation. All visitors to our projects and premises sign in and out at arrival and departure. Visitors are never left unsupervised where sensitive data is stored.

Monitoring our effectiveness and continuous improvement

Issues of Safeguarding Adults and Children receives continuous attention. We regularly review our practice to support this principle, including monitoring and reviewing the effectiveness of our performance and reporting within individual directorates and across the whole organisation. In addition, the Board receive effectiveness reviews and regular reports on our progress against any strategic goals set for the safeguarding of Adults and Children.

We have an open culture focused on organisational learning, service improvement and identifying and addressing weaknesses in the system. We operate within a Psychologically Informed Environment, (PIE) in which the physical and emotional needs of the child or young person is central to the delivery of, and reflection on our practice. The results of such considerations are shared with employees and reflected in our future strategic planning.

We value the input of all our children and young people in the design, delivery and evaluation of our safeguarding policy and procedures, eliciting feedback through formal and informal methods.

PROCEDURE - SAFEGUARDING

1. If You Suspect or Discover Abuse

1.1 It is the responsibility of all our employees to report any discovered or suspected abuse. Due to the age range of the children and young people, we work with and the different levels of risk, there are three strands to this procedure and employees must follow the one that is most appropriate.

- **Child Protection (child under 18 or under 21 if from the 'looked-after' community)**
Employees must immediately trigger our Child Protection Procedures. Protection is a statutory responsibility if there are any indications, or it has been identified that a child under 18 may be suffering from any form of abuse.
- **Adults at Risk (18 years or over)** employees must immediately trigger our Adult at Risk Safeguarding Procedures if there are indications, or it has been identified that an adult at risk may be suffering from any form of abuse.
- In **All other cases** the employees must follow our policies and procedures in relation to safeguarding young people. If it involves discrimination abuse you must refer to our Equality, Diversity, and Inclusion Policy.

2. Responding to Disclosure of Abuse

2.1 A person is more likely to disclose details or concerns about abuse to someone they trust and with whom they feel safe. The following points are a guide to help St Basils employees respond appropriately should a similar situation arise.

2.2 Always:

- Record exactly what has been said to you as soon as possible.
- Remain sensitive and calm about what you are hearing.
- Reassure the person that they:
 - Are safe
 - Were right to tell you
 - Are not to blame
 - Are being taken seriously
- Let the person talk – do not interview or prompt; listen and hear; you must give the person time to say what they need to tell you.
- Try to create a positive experience.
- Explain that you must tell other people, but that the information shared will remain confidential and, on a need, to know basis only.
- Tell the person what will happen next.
- Reassure the person that they have done the right thing in telling and that it will be dealt with appropriately and as quickly as possible.
- Involve appropriate individuals and/or partner organisations immediately.

2.3 Never:

- Question, unless for clarification
- Make promises you cannot keep
- Rush into actions that may be inappropriate
- Make/pass a judgment on the alleged abuser
- Say you don't believe them.
- Take sole responsibility – you must consult your line manager or Area Designated Safeguarding Officer (DSO)

3. Raising a Concern

3.1 Where there is a concern, it is the responsibility of St Basils employees or a representative to:

- Record and report any concerns regarding the safety and welfare of children, young people or adults with care and support needs and to escalate the concern to the area DSO who will in turn report this to the appropriate agencies.

- Concerns that an adult with care and support needs or a child is suffering or may be at risk of suffering significant harm may require an urgent response, under these circumstances, follow the guidance below:
 - If you suspect a serious criminal act has taken place, telephone 999 and inform them; tell them you think it might be abuse of a vulnerable person
 - If the individual is injured seek immediate medical treatment. Tell the ambulance personnel or A&E staff that this is a potential abuse situation
- 3.2 Historical allegations of abuse should be responded to in the same way as current allegations. The intervention should include both the investigation of the alleged incident(s) and consideration of any risk currently posed to young people and children. Where there are current risks to any young people or children, safeguarding procedures should be followed. All St Basils responses to allegations by an individual, of abuse experienced as a young person or child must be of as high standard as a response to allegations of current abuse because:
- There is a significant likelihood that a person, who abused a child/young person in the past, will have continued and may still be doing so.
 - Criminal prosecution remains a possibility if sufficient evidence can be carefully collated.
 - Any potential victims should have the opportunity to be listened to.

For further information refer to St Basils Historical Abuse Allegations Guidelines

4. Concerns around a person in a Position of Trust

- 4.1 We place trust in our employees to effectively carry out their duties in the most protective manner. We operate the most stringent checks and balances to ascertain the most competent and trustworthy of employees. We continue our constant vigilance through supervision and ongoing training.
- 4.2 The supervision of employees ensures that the children and young people using our services receive adequate and appropriate protection and high service standards. We will be extra vigilant in our supervisory role where employees occupy high-risk posts or are working in high-risk settings.
- 4.3 Safeguarding is our priority and we operate a wide range of associated policies and procedures to ensure protection and harm reduction. These are consistent with guidance on allegations against employees setting out how we safeguard children and young people once an allegation is made through a thorough risk assessment of the individual concerned. In addition, there is a named senior officer with responsibility to investigate and conclude on any allegations against employees, volunteers, or external contractors. These cover:
- clear guidance consistent with the Local Authority Children's Safeguarding Partnerships and Adult Safeguarding Partnerships procedures on who to contact next, and how to do so, if an employee, volunteer, parent, young person, or child has any concerns.
 - a procedure in place to liaise with partner agencies
 - a procedure in place to refer to the DBS and the Independent Safeguarding Authority.
- 4.4 We fully support any employee or volunteer following an allegation of abuse, whether suspended during the investigation process or not. We hold as paramount, the safeguarding of the child or young person throughout. In the case of an external contractor, the accused person remains off-site throughout the investigation period, until a satisfactory conclusion is reached with the contracted organisation.
- 4.5 Employees must never dismiss any disclosure in relation to concerns around a person in a position of trust.

5. Concerns about the safety and welfare of children (under 18)

5.1 Vulnerability and Safeguarding

- a. Under the Children Act 1989, a child in need is defined as being unlikely to achieve or maintain a reasonable level of health or development; or whose health and development is likely to be significantly or further impaired without the provision of services under section 17.
- b. The UK Government guidance Working Together to Safeguard Children (2018) defines abuse as *'A form of maltreatment a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Harm can include ill treatment that is not physical as well as the impact of witnessing ill treatment of others. This can be particularly relevant, for example, in relation to the impact on children of all forms of domestic abuse. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults, or another child or children'*.

And identifies five types of child abuse and defines them as:

Physical abuse is 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 fabricates the symptoms of, or deliberately induces, illness in a child.

Emotional abuse is 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. 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 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 activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They 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. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Child Sexual Exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

Neglect is 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 of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

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

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

- 5.2 All children are vulnerable by nature compared to adults, but some are more critically vulnerable than others. All vulnerable children have one common denominator; they have no reliable social safety networks on hand to depend upon, in order to adequately manage the risk to which they are exposed to daily.
- 5.3 Child Protection and Safeguarding Children is the individual responsibility of each person working with children and young people. Responsibility for formally investigating whether or not a child has been abused lies with Social Care Services and the Police.
- 5.4 Robust systems are in place to make employees aware of children subject to Child Protection. These systems are supported by appropriate training and are subject to regular monitoring to identify and resolve any issues
- 5.5 A Child Protection issue may come to the notice of an employee in several ways. A child may:
 - Make a direct allegation
 - Make a comment, which seems to suggest abuse
 - Have bruises or marks – see [appendix 5](#)
 - Display behaviour that suggests the possibility of abuse
- 5.6 The procedure that must be followed in all child protection cases is outlined below. For further information on responding to different child protection situations – see [appendix 6](#). The focus of any action must be on the welfare of the child as a possible victim of abuse. Employees must always respond to child protection enquiries. Employees must also be alert to the concerns of the child and respond to any disclosure of potential abuse to the child. Employees must never dismiss any disclosure or ignore the concerns of the child.
- 5.7 If an employee has concerns about a child, employees must complete an incident report, and list the reasons for their concerns. They must write down exactly what the child said and the details of any significant marks or observed behaviour, noting names, dates, times and witnesses who either heard what the child said or saw the marks or noticed the behaviour. This must be done as soon as possible and form part of the incident report.
- 5.8 Employees must discuss their concerns with their line manager as soon as possible unless they are either unavailable or the allegation relates to their line manager. In either case, the concern must be discussed with another senior manager. The concerns must be raised directly with Children's Services following the appropriate Local Safeguarding Partnership referral procedures. **Never delay action where it is necessary for the immediate safety of a child – dial 999 if there is an immediate risk.**
- 5.9 All matters must be reported to the DSO, who will consult with the DSL.
- 5.10 Any further action and the person taking the action, must be recorded in the incident log and the support plan updated. Even when no action is taken, a written record must be placed in the log and the support plan updated.
- 5.11 The DSO (or those delegated responsibility by the DSO) must refer to the relevant local authority's Children Services if a child protection issue is identified as soon as possible on the

same day, following the agreed Local Safeguarding Partnership referral procedures for their area. If a telephone referral is made this must be followed up in writing within 48 hours.

- 5.12 All employees understand clearly the Right Service Right Time referral thresholds and the circumstances in which an Early Help Assessment is required. Any issues relating to its application are effectively identified and addressed.
- 5.13 All employees are able to make high quality referrals to the Multi-Agency Safeguarding Hub (MASH) when appropriate and required. They can all participate in multi-agency meetings and forums to consider individual children.
- 5.14 Concerns must be passed to the local authority's Children Services /Social Care service where there is disagreement over the level of concern. They must follow the approved Local Children Safeguarding Partnership's escalation procedures, as soon as possible but on the same day. A telephone referral must be followed up in writing within 48 hours.
- 5.15 As far as possible St Basils employees must respect the rights of the person causing, or alleged to be causing, harm. If the person alleged to have caused harm is also a vulnerable child in need or at risk, they must receive support and their needs must be addressed in partnership with the local Childrens Services.

6. Procedures in relation to Safeguarding Adults at Risk (aged 18 and over)

- 6.1 The Care Act 2014 (Section 42) defines an adult at risk as someone who is aged 18 or over who:
 - has needs for care and support, whether or not the authority is meeting any of those needs.
 - is experiencing, or is at risk of, abuse or neglect.
 - is unable to protect themselves as a result, or the risk of, abuse or neglect.

Many of our young people who are over 18 are adults in a vulnerable situation, for example, homeless, lack of funds etc, however this does not mean they are vulnerable adults (adults with care and support needs)

- 6.2 Abuse can be a single one-off act or something that happens over weeks, months, or years. It can be accidental or deliberate. Just because there is no injury does not mean there is no abuse. Abuse can happen in lots of different ways. Abuse and neglect can be defined in many ways and there can be no exhaustive list, however the most recent guidance from the Government identifies 10 types of abuse and neglect: (See appendix 2)
- 6.3 A Protection issue may come to the notice of an employee in several ways. The person may:
 - Make a direct allegation
 - Make a comment, which seems to suggest abuse
 - Display behaviour that suggests the possibility of abuse
 - Disclosure by another person
- 6.4 Historical allegations of abuse should be responded to in the same way as current allegations. For further information refer to St Basils Historical Abuse Allegations Guidelines.
- 6.5 Employees must complete an incident report and list their concerns and reasons. The employee must write down the exact words of the adult at risk and the details of any significant marks or behaviour, which were observed, noting names, dates, times and witnesses. This must be done as soon as possible and form part of the incident report.
- 6.6 Employees must report promptly to the DSO, any concerns or suspicions that an adult with care and support needs is being, or is at risk of being, abused.

- 6.7 The employee should take immediate action to protect the adult from abuse. Keep in mind to ensure the dignity, safety and wellbeing of the individual. **Never delay action where it is necessary for the immediate safety of an adult at risk - dial 999 if there is an immediate risk.**
- 6.8 Employees must discuss their concerns with their line manager as soon as possible. If unavailable or the allegation relates to the line manager, the concern must be discussed with another senior manager. If this delays proceedings, concerns must be raised directly with Social Care/ Adult Care services, using the appropriate Local Safeguarding Partnership referral procedures.
- 6.9 The line manager/senior manager must consult with the DSO. If the allegation relates to the DSO, they must consult with the DSL.
- 6.10 Any further action and the person taking the action must be recorded in the incident log and the support plan updated. A written record must be placed in the log and the support plan updated, even when no action is taken.
- 6.11 If 'an adult with care and support needs' safeguarding issue is identified, the manager must make a referral to the relevant local authority via the approved Local Safeguarding Partnerships referral procedures as soon as possible on the same day. Any telephone referral must be followed up in writing within 48 hours.
- 6.12 As far as possible St Basils employees must respect the rights of the person causing, or alleged to be causing, harm. If the person alleged to have caused harm is also an adult with care and support needs, they must receive support and their needs must be addressed.

7. Maintaining records, monitoring and reporting

- 7.1 St Basils has a corporate responsibility to maintain our records and record keeping systems in accordance with the regulatory environment and in line with our Data Protection Policy. The person with overall responsibility for this is the Data Protection Officer (DPO).
- 7.2 We adhere to the basic rules of
- all personal information is kept in secure, lockable storage.
 - personal information held on computer systems is password protected.
 - Information is never left on screen if the computer is unattended.
 - files containing personal or sensitive information are never left on the desks unattended
 - sensitive personal information is only sent externally by e-mail, if there is no other course of action and is always [password protected](#) or [Encrypted](#).
 - files taken off site are secured in the boot of a car or in lockable containers, signed in and out and returned the same day, where practicable.
 - when data is carried on removable data carriers, it is encrypted using appropriate software.

Incident Reporting

- 7.3 Employees must report an incident using the 'My Compliance' reporting system listing their safeguarding concerns and reasons. They must use the exact words of the young person and the details of any significant marks or observed behaviour, noting names, dates, times and any witnesses as soon as possible to form part of the incident report.
- 7.4 The incident report must be shared with their line manager or local DSO as soon as possible and within 12 hours of the incident occurring. If, however, the allegation relates to the DSO, they must consult with the DSL. **Never delay action where it is necessary for the immediate safety of the young person.**

- 7.5 An annual review and sample audit of incident log files are carried out to assess the effectiveness of this policy and procedure and its implementation. It also seeks to identify and address any disincentives to reporting concerns. The practice of this policy is monitored locally by department and Youth Service Managers (YSM), at YSM meetings and through Policy to Practice inspections. Guidance on recording and maintaining information related to Safeguarding is contained within [Appendix 7](#). In addition, employees must follow St Basils Data Protection, Security of Information and Recording Standards when dealing with Safeguarding information.
- 7.6 Any further action and the person taking the action must be recorded in the incident log and the support plan must be updated whether action was taken or not.
- 7.7 The line manager or senior manager must ensure that all incidents are investigated as soon as possible. They must ensure the relevant authority is notified of the allegation/incident and its initial investigation within 12 hours, passing on all relevant information to them.
- 7.8 The line manager or senior manager must take any necessary immediate preventative action if a child or young person is at immediate risk of abuse, maintaining confidentiality where possible. They must also consider any required further action to prevent future cases of abuse, together with the needs of the victim, alleged perpetrator and others involved.
- 7.9 Employees must be willing and able to participate in multi-agency meetings and forums. In addition, they must contribute to Safeguarding Practice Reviews (SPR), where required. We will comply with the recommendations or instructions of the SPR in terms of completing actions, gathering evidence, embedding recommendations and disseminating learning.

Information Sharing

- 7.10 Information sharing is vital to safeguarding and the promotion of children's and young people's welfare. A key factor identified in safeguarding practice review has been a failure by practitioners to record information, to share it, or to understand its significance and then take appropriate action – please refer to [Information sharing advice for safeguarding practitioners - GOV.UK \(www.gov.uk\)](#).
- 7.11 Individuals need to feel confident that information that is personal to them and their families will be kept safe and secure and will not generally be shared except on a need-to-know basis. It should be made clear that the child or young person's welfare is paramount and therefore information will be shared if there are protection or safeguarding concerns.
- 7.12 All employees have access to our guidance on information sharing in line with their Local Safeguarding Partnership procedures and are aware of their personal responsibilities and those of our organisation.
- 7.13 We share information about our young people and any incidents or potential incidents on a need-to-know basis, in compliance with the Data Protection Act 2018 and GDPR guidelines.

8. Disclosure, complaints and allegations against St Basils Employees or Board members

Allegations here refer to a claim to reasonably suspect that an employee, board or committee member has acted in a way that has harmed a child, young person or adult at risk, or put a child, young person or adult with care and support needs at risk, or in possible serious harm.

- 8.1 Any child or young person using our services may disclose to an employee any abuse they may be suffering anywhere in their lives, including domestic violence (please refer to our Domestic Abuse policy). Employees are vigilant in their support and will initiate appropriate procedures if they have concerns that a child or young person may be at risk of harm.

- 8.2 The parent/ carer of the child or young person in such cases can only be informed of the accusation under the authority of the DSO. The safety and confidentiality of the child or young person is paramount in all cases. The DSO will inform the respective LADO and the DSL following an initial investigation. The DSL will in turn inform the Designated Board Member. The DSO has lead responsibility for liaison with other agencies and to support the child/young person and their family throughout the process.
- 8.3 Any child or young person using our services, or the services of anyone acting on our behalf, may complain about any aspect of the service received, through our Complaints procedure, which can be found in the current policies and procedures folder on the shared drive. All complainants have a right of appeal to an independent person/agency if dissatisfied with the way a complaint is handled. The Public Interest Disclosure Act protects whistle-blowers making disclosures in the public interest and allows for action in the event of any unfair dismissal of the whistle-blower. Please refer to St Basils Whistleblowing Policy.
- 8.4 Any allegation against employees must be reported to the DSO. If, however, the allegation relates to the DSO advice and guidance is available from the DSL/LADO.
- 8.5 Any allegation against employees must be reported to the DSL, who will then submit all allegations and findings in a report to the Service Delivery and Development Committee. The Designated Board Member for Safeguarding will receive a copy of the report. If the allegation relates to the Designated Board Member for Safeguarding, it is discussed with the Chair of the Board of Directors. The DSL will liaise with the LADO in these cases.
- 8.6 It may be necessary to inform the police and suspend the employee/ board or committee member from any involvement with children or young people. This action is intended to safeguard the welfare of children and young people and does not assume the guilt of the employee/ board or committee member.
- 8.7 Our employees fully support young people and their children through any process deemed necessary for their health and wellbeing. Support is provided to any employees suspended from duty following an allegation.
- 8.8 We also consider the implications for the welfare of children and young people when a poor standard of support, rather than abuse, is offered. Concerns may be raised about the suitability of employees to support children and young people, and in such cases Children /Social / Adult care services can advise.
- 8.9 We support all those involved, using the good practice guidelines 'Working Together to Safeguard Children' on procedures for managing allegations against people who work with children and young people. St Basils provides a confidential support helpline that all employees can access via the Workplace. We notify the LADO of any instance of an employee being dismissed from duty as a consequence of harming or posing a risk to children and young people.

9. Dealing with specific identified types of abuse

- 9.1 We have a clear commitment to identifying and protecting victims of all types of abuse. In addition, all employees are aware of them. Further guidance on specific types of abuse can be found in the appendices of this document:

Prevent – [Appendix 8](#)

Child Sexual Exploitation – [Appendix 9](#)

Domestic Abuse – [Appendix 10](#)

FGM – [Appendix 11](#)

Self-Neglect – [Appendix 12](#)

County Lines/ Criminal Exploitation – [Appendix 13](#)

Modern Slavery – [Appendix 14](#)

- 9.2 E-Safety - We recognise the internet and other digital technologies provide a vast opportunity for children and young people to learn, socialise and interact with the wider world. However, children and young people need to be made aware of the inappropriate material and abuse of the internet, digital and mobile technologies, that could cause them harm.
- 9.3 All staff working directly with young people are required to ensure they are educated as to the dangers that exist, so that they can take an active part in safeguarding children and young people.
- 9.4 Some instances of abuse will constitute a **criminal offence**. Criminal charges can be brought against the abuser under the Offences against the Person Act 1861. In addition, statutory offences have been created which specifically protect those who may be incapacitated in various ways. Examples of actions, which may constitute criminal offences, are assault, whether physical or psychological, sexual assault and rape, theft, fraud or other forms of financial exploitation, and certain forms of discrimination including racial, sexual, sexual orientation & religious belief. Sending sexual images of under 18s is against the law even if the subject agrees and even if the sender is under 18.
- 9.5 We have procedures in place to manage access to and monitor the safe use of:
- Social networking
 - Computers and the internet
 - Other hand-held devices
 - Cameras and video recorders

by employees, young people, children and any other service users. Please refer to the E-Safety Policy for further guidance.

10. Communication

- 10.1 Consideration of the Safeguarding Policy and Procedures is part of all employees' induction and training, with all employees having access to it. All employees must comply with the policy as indicated by St Basils "Read and Sign" record system.
- 10.2 Young people are informed of this policy during their induction into the service, with a copy being available to them. They are encouraged to discuss this policy with employees if they wish. Further information, including a Safeguarding Leaflet 'Is anyone treating you badly', is included in every service user's 'Welcome Pack'. This leaflet gives guidance on how and to whom, young people can report any concerns they may have regarding Safeguarding.
- 10.3 Young people review this policy and its effectiveness through residents' meetings and St Basils Youth Voice.
- 10.4 Safeguarding is a standard agenda item in SLT meetings, Committee meetings, Youth Service Manager meetings, local service meetings and residents' meetings to ensure Safeguarding is at the forefront of everything we do. This will ensure that voices will be heard but will also influence how we deliver services and any future service developments.
- 10.5 Any safeguarding concerns/issues or missing person logs will be recorded during the local handover process and followed up by the person on shift. All cases of missing person alerts must be responded to in line with St Basils Missing Persons Guidance and reported to the relevant DSO in a timely manner.

11. Compliance with Regulatory Bodies

- 11.1 St Basils are compliant with all the requirements of the regulatory bodies with which we are registered. We ensure that all employees and volunteers, where required, hold and maintain

registration and/or accreditation with the appropriate professional body. All employees know why, when and how to report safeguarding incidents and concerns to regulatory bodies.

Appendix 1

A. NATIONAL SUPPLEMENTARY GUIDANCE:

Department of Health, Home Office (2000), 'No Secrets: Guidance on developing multi-agency policies and procedures to protect vulnerable adults from abuse.'

DfES (2006), 'What to do if you're worried that a child is being abused' www.everychildmatters.gov.uk/socialcare/safeguarding

HM Government 'Working Together to Safeguard Children' 2013

This guidance replaces Working Together to Safeguard Children (2010); The Framework for the Assessment of Children in Need and their Families (2000); and statutory guidance on making arrangements to safeguard and promote the welfare of children under section 11 of the Children Act 2004 (2007). The guidance document can be found at:

<http://www.education.gov.uk/aboutdfe/statutory/q00213160/working-together-to-safeguard-children>

Digital Portal to Strengthen Safeguarding Guidance for Charities

This tool can help charities in England to handle the reporting of safeguarding allegations about behaviour or actions of a person in their charity

https://safeguarding.culture.gov.uk/?mc_cid=6e4986f4ab&mc_eid=5e0e594c5e

B. Local guidance and procedures:

West Midlands **Child** Protection and Safeguarding Procedures Manual <https://westmidlands.procedures.org.uk/>

Within the West Midlands, there are nine local areas that collaborate with regards to child safeguarding procedures. With the introduction of **Working Together to Safeguard Children 2018**, each local area's multi-agency safeguarding arrangements are led by the statutory safeguarding partners/organisations: local authorities, clinical commissioning groups and the police.

West Midlands Regional **Adult** Safeguarding Leads. Birmingham Safeguarding Adults Board's: policy & procedures, good practice guide; information sharing protocol; and **safeguarding adults multi-agency alert** can be found at:

<https://www.safeguardingwarwickshire.co.uk/safeguarding-adults/i-work-with-adults/west-midlands-regional-safeguarding-information-hub>

The policies and procedures have been developed jointly by the fourteen West Midlands Safeguarding Adults Board / Local Authority areas working together to introduce a consistent approach and practice within the adult safeguarding environment. More info at [Information for professionals | Birmingham Safeguarding Adults Board \(bsab.org\)](https://www.bsab.org/)

Right Help, Right Time Delivering effective support for children and families in Birmingham - Guidance for Practitioners

http://www.lscpbirmingham.org.uk/images/BSCP/Professionals/RHRT_Feb_2020/Right_Help_Right_Time_Guidance_Feb_2020.pdf

Solihull's Local Safeguarding Children's Board's manual can be found at:

<http://www.solihull.gov.uk/StaysafeProcedures/>

The Board's website: <http://www.solihull.gov.uk/staysafe/>

Information concerning safeguarding adults in Warwickshire can be found at

www.warwickshire.gov.uk/safeguardingadults

Introduction to the West Midland Multi Agency policy: <http://www.worcestershire.gov.uk/cms/social-care-and-health/safeguarding-adults/policies-and-procedures.aspx>

Safeguarding Advisor Network (January 2009) 'Guidance for safer working practice for Employees who work with children and young people'. Website address:

<http://webarchive.nationalarchives.gov.uk/20100113210150/dcsf.gov.uk/everychildmatters/resources-and-practice/ig00311/>

WCVYS Worcestershire Council for Voluntary and Community Services Safeguarding Guidance

<http://www.wcvys.co.uk/safeguarding>

Safeguarding Adults Multi Agency Policy & Procedures for West Midlands website: Social Care Institute of Excellence (enter report 60) <http://www.scie.org.uk>

DEFINITIONS OF ABUSE/ HARM

Physical	Physical abuse includes assault, hitting, slapping, pushing, kicking, misuse of medication, being locked in a room, inappropriate sanctions or force-feeding, inappropriate methods of restraint, and unlawfully depriving a person of their liberty.
Psychological	<p>Psychological abuse includes 'emotional abuse' and takes the form of threats of harm or abandonment, deprivation of contact, humiliation, rejection, blaming, controlling, intimidation, coercion, indifference, harassment, verbal abuse (including shouting or swearing), cyber bullying, isolation or withdrawal from services or support networks.</p> <p>Psychological abuse is the denial of a person's human and civil rights including choice and opinion, privacy and dignity and being able to follow one's own spiritual and cultural beliefs or sexual orientation.</p> <p>It includes preventing the adult from using services that would otherwise support them and enhance their lives. It also includes the intentional and/or unintentional withholding of information (e.g. information not being available in different formats/languages etc.).</p>
Sexual	<p>Sexual abuse including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.</p> <p>It includes penetration of any sort, incest and situations where the person causing harm touches the abused person's body (e.g. breasts, buttocks, genital area), exposes his or her genitals (possibly encouraging the abused person to touch them) or coerces the abused person into participating in or looking at pornographic videos or photographs. Denial of a sexual life to consenting adults is also considered abusive practice</p> <p>Any sexual relationship that develops between adults where one is in a position of trust, power or authority in relation to the other (e.g. day centre worker/social worker/residential worker/health worker etc.) may also constitute sexual abuse</p>
Domestic	<p>In 2013, the Home Office announced changes to the definition of domestic abuse as below:</p> <ul style="list-style-type: none"> • An incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse... by someone who is or has been an intimate partner or family member regardless of gender or sexuality • Includes psychological, physical, sexual, financial, emotional abuse; so-called 'honour-based' violence; Female Genital Mutilation; forced marriage. • Age range extended down to 16. <p>Many people think that domestic abuse is restricted to abuse between intimate partners, but this is incorrect. It actually extends to other family members as well and a great deal of the safeguarding work that occurs at home is in fact concerned with domestic abuse. This confirms that domestic abuse approaches and legislation can be considered safeguarding responses in appropriate cases.</p>

	Family members are defined as: mother, father, son, daughter, brother, sister and grandparents, whether directly related, in-laws or step-family.
Discriminatory	This includes discrimination on the grounds of race, faith or religion, age, disability, gender, sexual orientation and political views, along with racist, sexist, homophobic or ageist comments or jokes, or comments and jokes based on a person's disability or any other form of harassment, slur or similar treatment. Hate crime can be viewed as a form of discriminatory abuse, although will often involve other types of abuse as well. It also includes not responding to dietary needs and not providing appropriate spiritual support. Excluding a person from activities on the basis they are 'not liked' is also discriminatory abuse.
Financial/Material	This includes theft, fraud, internet scamming, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.
Neglect & Acts of Omission	<p>These include ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, social care or educational services, and the withholding of the necessities of life such as medication, adequate nutrition and heating. Neglect also includes a failure to intervene in situations that are dangerous to the person concerned or to others, particularly when the person lacks the mental capacity to assess risk for themselves.</p> <p>Neglect and poor professional practice may take the form of isolated incidents or pervasive ill treatment and gross misconduct. Neglect of this type may happen within a adult's own home or in an institution. Repeated instances of poor care may be an indication of more serious problems. Neglect can be intentional or unintentional.</p>
Organisational	<p>Including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, or where care is provided within their own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.</p> <p>Organisational abuse is the mistreatment, abuse or neglect of an adult by a regime or individuals in a setting or service where the adult lives or that they use. Such abuse violates the person's dignity and represents a lack of respect for their human rights.</p> <p>Organisational abuse occurs when the routines, systems and regimes of an institution result in poor or inadequate standards of care and poor practice which affect the whole setting and deny, restrict or curtail the dignity, privacy, choice, independence or fulfilment of adults with care and support needs</p> <p>Organisational abuse can occur in any setting providing health or social care. A number of inquiries into care in residential settings have highlighted that organisational abuse is most likely to occur when staff:</p> <ul style="list-style-type: none"> • receive little support from management; • are inadequately trained; • are poorly supervised and poorly supported in their work; • receive inadequate guidance <p>Or where there is:</p> <ul style="list-style-type: none"> • Unnecessary or inappropriate rules and regulations; • Lack of stimulation or the development of individual interests;

	<ul style="list-style-type: none"> • Inappropriate staff behaviour, such as the development of factions, misuse of drugs or alcohol, failure to respond to leadership; • Restriction of external contacts or opportunities to socialise
Self-Neglect	Self-neglect entails neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding. It is also defined as the inability (intentional or unintentional) to maintain a socially and culturally accepted standard of self-care with the potential for serious consequences to the health and wellbeing of the individual and sometimes to their community.
Modern Slavery	<p>Modern slavery encompasses slavery, human trafficking, forced and compulsory 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.</p> <p>A large number of active organised crime groups are involved in modern slavery. But it is also committed by individual opportunistic perpetrators.</p> <p>There are many different characteristics that distinguish slavery from other human rights violations, however only one needs to be present for slavery to exist.</p> <p>Someone is in slavery if they are:</p> <ul style="list-style-type: none"> • forced to work - through mental or physical threat; • owned or controlled by an 'employer', usually through mental or physical abuse or the threat of abuse; • dehumanised, treated as a commodity or bought and sold as 'property'; • physically constrained or has restrictions placed on his/her freedom of movement. <p>Contemporary slavery takes various forms and affects people of all ages, gender and races.</p> <p>Human trafficking involves an act of recruiting, transporting, transferring, harbouring or receiving a person through a use of force, coercion or other means, for the purpose of exploiting them.</p> <p>If an identified victim of human trafficking is also an adult with care and support needs, the response will be co-ordinated under the adult safeguarding process. The police are the lead agency in managing responses to adults who are the victims of human trafficking.</p>
Exploitation	<p>Abuse of adults with care and support needs often occurs within a context of exploitation. Exploitation be seen as an act where someone will use another person for profit, labour, sexual gratification, or some other personal or financial advantage. As such, exploitation can take many forms and result in different forms of harm, such as financial, emotional/psychological or sexual.</p> <p>Criminal Exploitation occurs where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child, young person or an adult (including those with care and support needs) into any criminal activity.</p>
Emotional	Emotional abuse is an attempt to control, in just the same way that physical abuse is an attempt to control another person. The only difference is that the emotional abuser does not use physical hitting, kicking, pinching, grabbing, pushing, or other physical forms of harm. Emotional abuse involves controlling another person by using emotions to criticize, embarrass, shame, blame, or

	<p>otherwise manipulate them. While most common in dating and married relationships, mental or emotional abuse can occur in any relationship—including among friends, family members, and co-workers.</p> <p>In general, a relationship is emotionally abusive when there is a consistent pattern of abusive words and bullying behaviors that wear down a person's self-esteem and undermine their mental health.¹</p> <p>The underlying goal of emotional abuse is to control the other person by discrediting, isolating, and silencing them. It is one of the hardest forms of abuse to recognize as it can be subtle and insidious. But it can also be overt and manipulative.</p>
Online Abuse	<p>Online abuse is any type of abuse that happens on the internet. It can happen across any device that's connected to the web, like computers, tablets and mobile phones. And it can happen anywhere online, including:</p> <ul style="list-style-type: none"> Social media Text messages and messaging apps Emails Online chats Online gaming Live-streaming sites <p>Children and young people can be at risk of online abuse from people they know or from strangers. It might be part of other abuse which is taking place offline, like bullying or grooming. Or the abuse might only happen online.</p>

SIX PRINCIPLES OF SAFEGUARDING²

The safeguarding principles

The Government is committed to improving the quality of health and social care, developing accountability to patients, and strengthening the choice and control they have over their care. The Government has agreed principles for safeguarding adults that can provide a foundation for achieving good outcomes for patients.

- | | |
|--------------------------------------|---|
| Principle 1 – Empowerment | Presumption of person led decisions and consent. Adults should be in control of their care and their consent is needed for decisions and actions designed to protect them. There must be clear justification where action is taken without consent such as lack of capacity or other legal or public interest justification. Where a person is not able to control the decision, they will still be included in decisions to the extent that they are able. Decisions made must respect the person’s age, culture, beliefs and lifestyle. |
| Principle 2 – Protection | Support and representation for those in greatest need There is a duty to support all patients to protect themselves. There is a positive obligation to take additional measures for patients who may be less able to protect themselves. |
| Principle 3 – Prevention | Prevention of harm or abuse is a primary goal. Prevention involves helping the person to reduce risks of harm and abuse that are unacceptable to them. Prevention also involves reducing risks of neglect and abuse occurring within health services |
| Principle 4 – Proportionality | Proportionality and least intrusive response appropriate to the risk presented. Responses to harm and abuse should reflect the nature and seriousness of the concern. Responses must be the least restrictive of the person’s rights and take account of the person’s age, culture, wishes, lifestyle and beliefs. Proportionality also relates to managing concerns in the most effective and efficient way. |
| Principle 5– Partnerships. | Local solutions through services working with their communities. Safeguarding adults will be most effective where citizens, services and communities work collaboratively to prevent, identify and respond to harm and abuse |
| Principle 6 – Accountability. | Accountability and transparency in delivering safeguarding |

Services are accountable to patients, public and to their governing bodies. Working in partnerships also entails being open and transparent with partner agencies about how safeguarding responsibilities are being met.

² Extract from “Department of Health - Safeguarding Adults: The Role of Health Service Practitioners” March 2011 Guidance

SAFEGUARDING ROLES & RESPONSIBILITY

Board of Directors	Accountable for St Basils and therefore all safeguarding within the organisation. Receive regular reports on safeguarding.
Chief executive	Accountable to the Board Of Directors for safeguarding within the organisation Ensures a clear framework for the management accountability for safeguarding
Director of Progression	<p>Act as the DSL For the organisation</p> <p>Accountable to the Chief Executive for safeguarding within departments/projects Give leadership on safeguarding as a corporate issue Ensure that safeguarding is made integral to the St Basils Strategic Plan Safeguarding is given regular consideration at Directorate meetings Agree the safeguarding strategy Commissions specific time limited work to address safeguarding issues Ensure that a range of appropriate safeguarding training and budgets are available to meet the needs of the workforce Circulate safeguarding information and updates Provide annual reports to the Service & Delivery Development Sub Committee Regularly receive and collate information in respect of safeguarding activity to inform a corporate assessment of risk. Review and update our Safeguarding policy and procedures Analyse and report on Safeguarding audits Ensures that effective supervision supports safeguarding at all levels within the department</p>
Youth Service Managers	<p>Act as the DSO For each Local Authority</p> <p>Accountable to the DSL for safeguarding in all projects and services within the Operations Department Line management responsibility for the safe delivery, quality and effectiveness of services Together with HR ensure that safe recruitment practices are fully employed and that staff appointed have the necessary skills and experience in safeguarding appropriate to their role Ensures that effective supervision supports safeguarding at all levels within the department Circulate safeguarding information and updates To offer consultation and advice locally, to staff, together with their line-manager, on safeguarding issues Ensure the development of a safeguarding culture within the context of their services Receives reports from the various safeguarding sub groups Ensure all employees within their services receive an appropriate level of safeguarding training appropriate to their role and responsibilities Ensure that internal systems are established and effective in supporting safeguarding Ensure effective supervision supports safeguarding at all levels within their services and report on the practice and management of safeguarding and respond to safeguarding audits, as required Undertake management reviews when there are concerns about quality and effectiveness in relation to safeguarding and take corrective action where necessary</p>

<p>Line Managers/Co-ordinators</p>	<p>Line management responsibility for the safe delivery, quality and effectiveness of services provided by their projects/services Responsibility to establish and maintain effective relationships with other agencies locally in relation to safeguarding and to challenge when appropriate Ensure that safeguarding is integral to all St Basils processes for the assessment, analysis, planning and reviewing of outcomes, in their work with service users Ensure all their staff receive safeguarding training and support commensurate with their need Ensure that all files clearly identify where there are concerns for the welfare of a child and that files comply with organisational standards Ensure that supervision is provided to staff in line with St Basils Performance & Development Scheme or appropriate supervision sessions, taking into account any safeguarding issues, the complexity of the work and experience of the staff member Ensure that supervision sessions record reflective practice and any decisions made are transferred to the case file – all records are signed and dated Ensure that the risk assessment framework for each case is regularly reviewed and an escalation process, implemented as necessary Ensure that safeguarding practice is regularly discussed in supervision to identify any training needs and is included within the staff appraisal process Ensure that Safeguarding is a standing item on team meeting agendas Ensure that support managers regularly read case files and counter sign them Undertake periodic file audits Make child protection referrals to Children’s Services, as necessary in consultation with the designated Safeguarding Officer.</p>
<p>Front line staff, administrators, students, trainees and volunteers</p>	<p>Accountable to their line manager for safeguarding within their work Responsibility for the safe delivery, quality and effectiveness of the services they provide Are alert to safeguarding issues in all aspects of their work Keep accurate and timely records which are signed and dated and comply with St Basils procedures in relation to file format and management Remember that the welfare of the child is paramount and draw to the attention of line management any concerns they may have for the welfare of a child or young person Make referrals to Children’s Services as necessary in consultation with their line manager Use supervision and appraisal to reflect on practice in relation to safeguarding. Undertake safeguarding training as necessary</p>
<p>All organisations</p>	<p>It is essential that organisations collaborate, work together and share information to tackle modern slavery.</p> <p>In England and Wales, public authorities specified in section 52 of the Modern Slavery Act 2015, have a statutory Duty to Notify the Home Office when they come across potential victims of modern slavery. This duty is discharged by either referring a potential victim into the National Referral Mechanism (NRM) where they are a child or consenting adult, or by notifying the Home Office where an adult does not consent to enter the NRM. The NRM is the UK’s framework for identifying victims of modern slavery. These public authorities are referred to as First Responder Organisations.</p> <p>A number of organisations that, are <u>not</u> public authorities, are also First Responder Organisations in England and Wales. These are:</p> <ul style="list-style-type: none"> • Barnardo’s • BAWSO • Kalayaan

	<ul style="list-style-type: none">• Medaille Trust• Migrant Help• New Pathways• NSPCC• Refugee Council• The Salvation Army• Unseen UK <p>Non-First Responder organisations involved in tackling modern slavery i.e. St Basils, do not have a Duty to Notify the Home Office when encountering a potential victim of modern slavery. However, they still have the role of;</p> <ul style="list-style-type: none">• Working with First Responder Organisations to make referrals where potential victims of modern slavery are identified.• Being proactive in multi-agency information sharing, utilising their locally agreed Anti-Slavery partnership strategies.• Identifying potential victims and raising awareness of this crime amongst staff and service users.• Meeting the immediate safety needs of potential victims• Ensuring their processes and systems consider the specific needs of victims of modern slavery.
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SAFEGUARDING CONTACTS

Our Designated Safeguarding Lead (DSL) is:	<p>Marsha Blake – Director of Progression Contact details: 0121 772 2483 marsha.blake@stbasils.org.uk</p> <p>In the absence of the Director of Progression the DSL duties will be performed by: Liam Preston – Director of Housing - 0121 772 2483 liam.preston@stbasils.org.uk or; Lisa Parsons – Youth Service Manager - 01527 592 404 Lisa.parsons@stbasils.org.uk Louise Bourne – Registered Service Manager for any concerns involving Looked After Children (LAC) – 07469 118 470 louise.bourne@stbasils.org.uk</p>
Our Designated Board Member for Safeguarding (DBMS) is:	<p>Vicki Stott – Board member Contact details: 0121 772 2483</p>

Within the West Midlands, there are nine local areas that collaborate with regards to child safeguarding procedures. With the introduction of **Working Together to Safeguard Children 2018**, each local area's multi-agency safeguarding arrangements are led by the statutory safeguarding partners/organisations: local authorities, clinical commissioning groups and the police.

West Midlands **Child** Protection and Safeguarding Procedures Manual
<https://westmidlands.procedures.org.uk/>

St Basils currently operates in the following areas:

Local Authority	Birmingham City Council
St Basils DSO	<p>Lea Jackson – lea.jackson@stbasils.org.uk Chantel Edwards – chantel.edwards@stbasils.org.uk Paul Richards – paul.richards@stbasils.org.uk Bernadette Allen – bernadette.allen@stbasils.org.uk Beverley Thomas – beverley.thomas@stbasils.org.uk Carlene Lawrence – carlene.lawrence@stbasils.org.uk Denise Smyth – denise.smyth@stbasils.org.uk Emma Gardner – emma.gardner@stbasils.org.uk</p>
Birmingham LADO	ladoteam@birminghamchildrenstrust.co.uk
Local Safeguarding Contacts	Multi-Agency Safeguarding Hub (Children) Tel: 0121 303 1888 mash@birmingham.gov.uk
	Adult and Communities Access Point (ACAP) 0121 303 1234 ACAP@birmingham.gov.uk
	Emergency Duty Team (Out of Hours) 0121 675 4806. The Emergency Duty Team is available at the following times: 5.15pm to 8.45am (Monday to Thursday) or 4.15pm to 8.45am (Friday to Monday). Available all Bank Holidays.
	Positions of Trust Team 0121 675 1669
Local resource links	Right Help, Right Time Delivering effective support for children and families in Birmingham - Guidance for Practitioners

	http://www.lscpbirmingham.org.uk/images/BSCP/Professionals/RHRT_Feb_2020/Right_Help_Right_Time_Guidance_Feb_2020.pdf Guidance/reporting for children's safeguarding: Home - Birmingham Safeguarding Children Partnership (lscpbirmingham.org.uk) Guidance/reporting for adult's safeguarding: The BSAB website Homepage
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Local Authority	Solihull Metropolitan Borough Council
St Basils DSO	Jula Brady Jula.Brady@stbasils.org.uk
Solihull LADO	Telephone: 0121 788 4310
Local Safeguarding Contacts	To report a child or young person at risk call 0121 788 4300 (Monday to Thursday 8.45am - 5.20pm, Friday 8.45am - 4.30pm).
	Solihull Safeguarding Adults Board – to report abuse call 0121 704 8007 or email ccadults@solihull.gov.uk For out of hours emergencies call 0121 605 6060 (EDT)
	Emergency Duty Team (Out of Hours) If you are calling out of working hours (Evenings, weekends or bank holidays) please call 0121 605 6060.
	Positions of Trust Team – via LADO on 0121 788 4310
Local resource links	Guidance/reporting for children's safeguarding: Protecting adults with care and support needs solihull.gov.uk Report Abuse - Solihull Safeguarding Adults Board (ssab.org.uk) Guidance/reporting for adult's safeguarding: Practitioner & Volunteers - Solihull LSCP Report Abuse - Solihull LSCP

Local Authority	Worcestershire County Council
St Basils DSO	Lisa Parsons Lisa.Parsons@stbasils.org.uk
Worcestershire LADO	Telephone: 01905 846221 or email lado@worcschildrenfirst.org.uk LADO leaflet A guide for professionals volunteers who work with children updated 030321 checked.pdf
Local Safeguarding Contacts	Family Front Door (0 – 18 years) Tel: 01905 822666 or Out of Hours EDT 01905 768020
	Adult Safeguarding – for advice call the Adult Safeguarding Team on 01905 843189 or to report a concern 01905 768053
	Online portal link for Safeguarding referrals (children and adults) Report it - Worcestershire Safeguarding Boards (safeguardingworcestershire.org.uk)
	Positions of Trust Team Guidance-if-you-are-concerned-about-a-person-who-is-working-volunteering-with-adults-who-have-support-needs.pdf (safeguardingworcestershire.org.uk)
Local resource links	Guidance/reporting for children's safeguarding: WSCP - Worcestershire Safeguarding Boards (safeguardingworcestershire.org.uk) Safeguarding children Worcestershire County Council Guidance/reporting for adult's safeguarding: WSAB - Worcestershire Safeguarding Boards (safeguardingworcestershire.org.uk)

Local Authority	Warwickshire County Council
St Basils DSO	Louise Bourne louise.bourne@stbasils.org.uk
Warwickshire LADO	01926 410410 or lado@warwickshire.gov.uk
Local Safeguarding Contacts	Multi-Agency Safeguarding Hub (Children) Tel: 01926 414144 or email mash@warwickshire.gov.uk – online form for completion for

	referrals available at Child safeguarding procedures - for professionals – Warwickshire County Council
	Adult Social Care – reporting an adult safeguarding concern 01926 412080
	Out of Hours EDT 01926 886922
	Positions of Trust via lado@warwickshire.gov.uk
Local resource links	Guidance/reporting for children’s safeguarding: I work with Children & Young People (safeguardingwarwickshire.co.uk) Child safeguarding procedures - for professionals – Warwickshire County Council Guidance/reporting for adult’s safeguarding: I work with Adults (safeguardingwarwickshire.co.uk)

Local Authority	Coventry City Council
St Basils DSO	Brenda Melhado Brenda.Melhado@stbasils.org.uk
Coventry LADO	024 7697 5483 or lado@coventry.gov.uk
Local Safeguarding Contacts	Multi-Agency Safeguarding Hub (Children) Tel: 024 7678 8555 to report a concern or 024 7697 5483 to discuss an existing case
	Adult Safeguarding Concerns – Adult Social Care on 024 7683 3003 or ascdirect@coventry.gov.uk
	Emergency Duty Team (Out of Hours) 024 7683 2222. The Emergency Duty Team is available at the following times: 5.15pm to 8.45am (Monday to Thursday) or 4.15pm to 8.45am (Friday to Monday). Available all Bank Holidays.
	Positions of Trust – online referral to LADO (or 024 7697 5483) Allegations against people who work in positions of trust with children referral - Referral criteria - Coventry City Council
Local resource links	Guidance/reporting for children’s safeguarding: Coventry's Multi Agency Safeguarding Hub Coventry's Multi Agency Safeguarding Hub (MASH) Coventry City Council Guidance/reporting for adult’s safeguarding: Safeguarding adults Coventry City Council

Local Authority	Sandwell Metropolitan Borough Council
St Basils DSO	Brenda Melhado Brenda.melhado@stbasils.org.uk
Sandwell LADO	0121 569 4770
Local Safeguarding Contacts	Multi-Agency Safeguarding Hub (Children) Tel: 0121 569 3100 (Available 24/7) or email access_team@sandwellchildrenstrust.org
	Safeguarding Adults Team on 0121 569 2266 or email sandwell_enquiry@sandwell.gov.uk
	Emergency Duty Team (Out of Hours) 0121 569 2355 Monday to Friday 17:00 – 09:00, weekends and bank holidays.
	Positions of Trust Team via LADO on 0121 569 4770
Local resource links	Guidance/reporting for children’s safeguarding: Home - Sandwell CSP Guidance/reporting for adult’s safeguarding: Safeguarding adults Sandwell Council

Supported Lodgings Service	
Local Authority	All contracted Local Authorities
St Basils DSO	Jonathan Crust – Jonathan.crust@stbasils.org.uk
Area LADO	As stated in above areas
Local Safeguarding Contacts	As stated in above areas

CHILD ABUSE – SIGNS AND SYMPTOMS

Although these signs do not necessarily indicate that a child has been abused, nor does the absence of them mean that sexual abuse has not taken place, they may help adults recognise that something is wrong. The possibility of abuse should be investigated if a child shows a number of these symptoms, or any of them to a marked degree:

Sexual Abuse

Being overly affectionate or knowledgeable in a sexual way inappropriate to the child's age	Medical problems such as chronic itching, pain in the genitals, venereal diseases
Other extreme reactions, such as depression, self-mutilation, suicide attempts, running away, overdoses, anorexia	Personality changes such as becoming insecure or clinging
Regressing to younger behaviour patterns such as thumb sucking or bringing out discarded cuddly toys	Sudden loss of appetite or compulsive eating
Being isolated or withdrawn	Inability to concentrate
Lack of trust or fear of someone they know well, such as not wanting to be alone with a babysitter or child minder	Starting to wet again, day or night/nightmares
Become worried about clothing being removed.	Suddenly drawing sexually explicit picture.
Trying to be 'ultra-good' or perfect; overreacting to criticism	

Emotional Abuse

Physical, mental and emotional development lags	Sudden speech disorders	Continual self-depreciation ('I'm stupid, ugly, worthless etc')
Overreaction to mistakes	Extreme fear of any new situation	Inappropriate response to pain ('I deserve this')
neurotic behaviour (rocking, hair twisting, self-mutilation)	Extremes of passivity or aggression.	

Neglect

Constant hunger	Poor personal hygiene	Constant tiredness	Poor state of clothing
Emaciation	Untreated medical problems	No social relationships	Compulsive scavenging
Destructive tendencies			

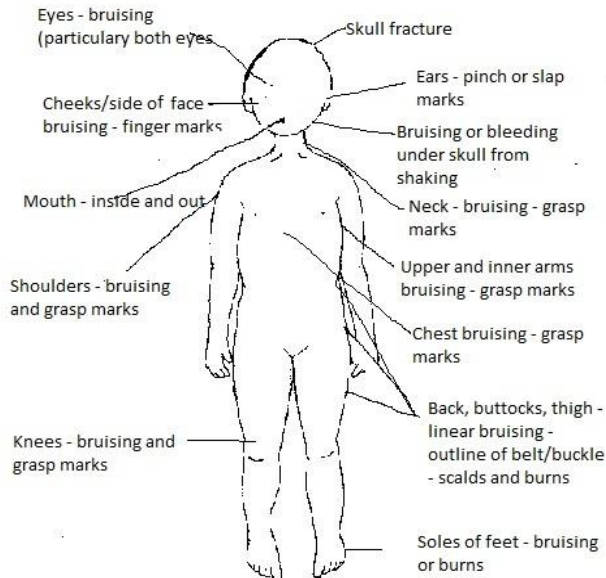
Note: A child may be subjected to a combination of different kinds of abuse. It is also possible that a child may show no outward signs and hide what is happening from everyone.

Physical Abuse – see diagram below

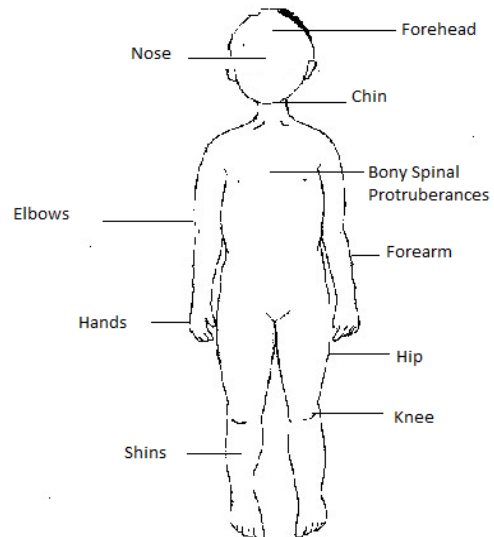
Unexplained recurrent injuries or burns	Improbable excuses or refusal to explain injuries	Wearing clothes to cover injuries, even in hot weather
Refusal to undress for gym	Bald patches	Chronic running away
Fear of medical help or examination	Self-destructive tendencies	Aggression towards others
Fear of physical contact – shrinking back if touched	Fear of suspected abuser being contacted	Admitting that they are punished, but the punishment is excessive

DIAGRAMME INDICATING SITES OF PHYSICAL ABUSE

Common Sites for Non-accidental Injuries



Common Sites for Accidental Injury



Non-Accidental Injuries

Bruising to be:

- Frequent
- In unusual position (see chart)
- Patterned e.g. finger and thumb marks
- Old and new in same place (note colour)

Consider:

- Developmental level of the child and their activities
- May be more difficult to see on darker skins

Burns and scalds likely to have:

- clear outline
- Splash marks around burn area
- Unusual position e.g. back of hand
- Indicative shapes e.g. cigarette burns – bar of electric

Injuries suspicious if:

- bite marks or finger marks
- large deep scratches
- incisions e. g. from razor blade

Fractures likely to be:

- numerous – healed at different times

Consider:

- age of child, always suspicious in babies under two years
- delay in seeking treatment

Sexual Abuse may result in:

- unexplained soreness, bleeding or injury in genital or anal area
- sexually transmitted diseases e. g. warts gonorrhoea

Accidental Injuries

Bruises likely to be:

- few but scattered
- no pattern
- same colour and age

Consider:

- age and activity of the child e.g. learning to walk
- may be confused with birth marks or other skins conditions

Burns and scalds likely to be:

- treated
- easily explained
- may be confused with other skin conditions e.g. impetigo

Injuries likely to be

- minor
- treated
- easily explained

Fractures likely to be:

- of arm and legs
- seldom serious except for road traffic accidents
- may rarely be due to brittle bone syndrome
- rare in very young children

Genital area

- injury may be accidental (seek expert opinion)
- Soreness may be nappy rash or irritation e.g. from baby bath products
- anal soreness may be due to constipation or threadworm infestation

GUIDANCE ON RESPONDING TO DIFFERENT CHILD PROTECTION SITUATIONS

If a child (young person) makes a direct allegation Staff must never promise to keep the allegation a secret. The staff member should let the child (young person) speak freely and not question them unless it is to clarify facts about what the child has told them. The conversation should then be recorded (in writing) by the staff member ensuring they record the child's (young person's) own words and phrases rather than trying to summarise what they believe to have been said. If, at any time, it becomes clear that the child is not alleging abuse has taken place, you should re-assess the situation as it may not be appropriate to follow this procedure.

If the child (young person) is clearly alleging abuse, or describing events that may mean abuse is happening, the police must be informed and a referral must be made to Children Services who will interview the child (young person) and any further action must be left to them. This does not mean that you should tell the child (young person) to say nothing more until the authorities arrive. Allow the child (young person) to speak for as long as they want to.

Staff should always take the child or young person's concerns, allegations seriously, but this does not necessarily mean accepting everything that is said as fact. If the child makes a clear allegation about a specific person, do not try to question that person yourself. Staff should never discuss any allegation of sexual abuse with any other child/young person or member of that family, until the matter has been referred to Children's Services and agreement for this obtained. If an allegation is made about a member of staff, board or committee member refer to section 10 of this policy. All matters should be dealt with using extreme sensitivity and urgency.

If a child/young persons comments seem to suggest abuse/concerns

If the child (young person) seems to be suggesting abuse/inappropriate behaviour, but it is not clear, staff should quickly try to find a suitable time and place to talk to them, which will allow them to talk freely. The staff member should listen carefully, remembering that a child (young person) may not have the vocabulary to explain clearly what it is that distresses them. The staff member should let the child speak and should ask questions only if they are necessary to clarify whether or not the child (young person) is trying to say they have been abused/subject to inappropriate behaviour.

If it is clear that the child is alleging abuse, avoid asking any further questions. As soon as it becomes clear that the child is alleging abuse all further questions must be left to the interview by Children Services or the Police. This does not mean that you should tell the child (young person) to say nothing more until the authorities arrive. Allow the child (young person) to speak for as long as they want to. If, as a result of what the child (young person) has said, you are suspicious about a particular person, do not try to question that person about this yourself. All further questions must be left to the interview by Children Services or the Police.

If a bruise or mark, or the child's (young person's) behaviour, causes suspicion There are a number of things that may raise questions in the mind of a member of staff; they may observe that a child has bruises, other marks, or may notice something unusual in the child's behaviour. Often these observations could have several different explanations and you may be unsure whether you should be concerned or not. It may be helpful to use the chart (Appendix 2) for clarification. Staff are not expected to be experts in identifying child abuse, but they should document and report any concerns they have about a child (young person) and discuss the case with their line manager immediately as there may be urgent and immediate risks that may need to be managed. A referral to Children's Services should be made.

If a staff member is concerned, they should try to be clear in their own mind exactly what is disturbing them. If a staff member has a suspicion regarding non-accidental injury, it may be appropriate to ask the resident parent about the mark or unusual behaviour. Suspicion may be aroused more by an evasive or unconvincing answer than by the mark or behaviour itself. If a staff member becomes suspicious, they should note the names of anyone else who saw the mark, behaviour, etc which caused the concern and discuss with their line manager.

SAFEGUARDING RECORD KEEPING GUIDANCE

General Principles

Good, up to date record keeping of concerns and action taken is essential for two key reasons:

- It assists the organisation to identify causes for concern at an early stage; it is conceivable that only when a number of minor issues are taken as a whole, that a safeguarding or child protection concern may become apparent.
- It helps us monitor and manage its safeguarding practices, and to demonstrate to regulators and contracting authorities that there is a robust and effective safeguarding policy in practice.

A record of a concern, suspicion or allegation should be made at the time or as soon as possible after an event to promote accuracy, and should include notes of what has been done with the information – e.g. who has been informed.

Any handwritten / contemporaneous notes made immediately after an event, for example a disclosure, can serve as evidence of a record having been made at the time. Therefore, these should not be destroyed even when the details are recorded more formally at a later time in an incident report, instead they must be kept securely.

Records must be factual, using the child/young person's own words in cases where a disclosure is made. Professional opinion can be given (provided it is clearly distinguishable), but needs to be supported by stating the facts and observations upon which the opinions are based. All notes and records must be dated and traceable back to the author.

All recorded safeguarding concerns must be passed to the line manager as soon as possible.

The Data Protection Act requires that records should be accurate, relevant, kept up to date and securely – this law must be followed, additionally, staff must work in accordance with the terms set out in our Data Protection, Security or Information Policies, and Recording Standards.

Staff should record safeguarding concerns in such a way that a person who is unfamiliar with our operation can understand what happened. This includes avoiding use of acronyms or specialist terminology. Ideally, records of incidents should be typed. Handwritten notes should be clearly legible and written in ink.

Maintaining and Storing Safeguarding Records

All records of safeguarding concerns, disclosures or allegations are to be treated as sensitive information and should be kept confidential and secure. The information should be shared with all those who need to have it, whether to enable them to take appropriate steps to safeguard the child/young person, or to enable them to carry out their own duties.

All notes and records of Safeguarding concerns should include the following information:

- A record of the child/young person's details: name and date of birth
- Date and time of the event / concern
- The nature of the concern raised
- Action taken and any future planned actions e.g monitor and review
- A note of any other people involved e.g witnesses
- The name and position of the person making the record
- Any other agencies informed

In the case of a disclosure, the record should also include:

- As full an account as possible of what the child/young person said
- Time and place of disclosure
- An account of any questions put to the child/young person
- Who was present at the time of disclosure

Where there is a Safeguarding concern about a child/young person, a file should be created in addition to, and separate from their general file, and be organized in chronological order. This should include

- Any concerns recorded by staff
- Any safeguarding information received from other agencies
- Copies of any referrals by the Designated Safeguarding Officer to Children's Services
- Where a case is ongoing, keep a record of any actions and discussions etc. which will form a chronology for future reference.

If any information is removed from a file for any reason, a dated note must be placed in the file indicating who has taken it, why and when.

Records relating to Safeguarding should be kept indefinitely in accordance with our Recording Standards Policy (and in accord with Childrens' Service retention of records policy).

Access to Records

Access to and sharing of information should be on a need to know basis decided on a case-by-case basis. Consideration must also be given to what needs to be shared. Generally speaking, the closer the contact with the child/young person, the greater the need for knowledge of the case.

Anyone who is the subject of a child protection record has a right to access their personal record, unless to do so would affect their health or well-being, or that of another person, or would be likely to prejudice an ongoing criminal investigation.

Where there is a legitimate and justifiable reason, information regarding a safeguarding concern may be shared with other partner organisations on a need-to-know basis, in accordance with our Client Confidentiality Waiver Form, contained within the Data Protection Policy.

References by name to children/young people other than the individual who is the subject of the record should be removed when disclosing records, unless consent is obtained from the individual/s concerned.

If the record to be disclosed contains information about an adult professional, that information can be disclosed if it relates to that person performing the duties of their role. However, if the reference refers to that individual's private life, it should be removed (unless this relates to a safeguarding matter which is relevant to the record to be disclosed).

Transfer of records

If a young person transfers to another provider, any safeguarding record relating to them should be securely forwarded to the new provider without delay, separately from their general record.

A copy of any safeguarding records forwarded relating to the young person must be retained according to St Basils retention procedures.

We should only transfer information which originated within the organisation and should not transfer third party information such as health assessments or social work reports. Any such information should only be transferred by the authors of the information. All transfers of information must be undertaken in accord with Data Protection and GDPR requirements.

SUPPORTING INDIVIDUALS VULNERABLE TO VIOLENT EXTREMISM

Main purpose

1. The purpose of this document is to provide guidance and advice on how to manage and respond to concerns of children and young people being vulnerable to violent radicalisation or being affected by the radicalisation of others through the safeguarding mechanisms already in place within the Local Safeguarding Children Partnerships (LSCPs) and associated arrangements.

Introduction

2. This guidance applies to all those with responsibilities for safeguarding children and young people. It has four aims, which form the following sections of this document:

- A. Signpost the reader to the most relevant national guidance and strategies;
- B. Provide guidance on establishing appropriate local referral and intervention processes which involve all relevant agencies;
- C. Provide guidance on the management arrangements to be put in place to support those who work within Children's Services, the police and other partner organisations;
- D. Provide advice on understanding and recognising risks and vulnerabilities of radicalisation and appropriate, proportionate responses and interventions.**

3. The guidance in this document recognises that effective implementation will require a multi-agency and partnership approach, (these key components are common to both Safeguarding and the Prevent agenda,) with the joint responsibility for leading and monitoring being with the local Children's Services department and the police. The LSCP and local Area Partnership Board for Prevent provide existing arrangements for this.

4. The guidance also acknowledges that awareness and understanding of how to recognise and respond to the increasing threat of children and young people being radicalised is at a relatively early stage. Three main areas of concern have been identified for initial attention in developing the process:

- Increasing understanding of radicalisation and the various forms it might potentially take, and hence skills and abilities to recognise signs and indicators amongst all staff working with children and young people;
- Identifying a range of interventions – universal, targeted and specialist - and the expertise to apply these proportionately and appropriately. This will require multi-agency approaches to provide the necessary specialist expertise, and the incorporation of existing projects and interventions (e.g. Channel);
- Taking appropriate measures to safeguard the wellbeing of children living with or in direct contact with known extremists.

A. National Guidance and Strategies

5. Prevent is one of the four main strands of the government's counter terrorist strategy, CONTEST. Prevent has five main objectives, objective 3 of which is "Supporting vulnerable individuals who are being targeted and recruited to the cause of violent extremism." The lead responsibility for implementing the Prevent strategy has been with the police, but as the programme has developed responsibility for leading different aspects has been shared increasingly with other public services and agencies. The expectation is that within all local authority areas a Prevent multi- agency partnership board is established to plan and manage responses.

6. "Channel: Supporting individuals vulnerable to recruitment by violent extremists. A guide for local partnerships" was published by HM Government in March 2010. The Channel programme is an initiative led by the police, which operates in areas identified as having higher levels of risk, to provide support to people at risk of being drawn into violent extremism. The Channel Guidance identifies as good practice the importance of having:

- A clear referral process incorporating a multi-agency panel
- An identified co-ordinator or location of expertise for advice, guidance and support;
- Information sharing protocols.

SAFEGUARDING CHILDREN AND YOUNG PEOPLE FROM SEXUAL EXPLOITATION

This section sets out –

- Particular matters to be considered in the strategy meeting;
- Issues to consider in addressing the young person’s needs;
- The need for an action plan that can be sustained over an extended period; and
- Guidance on disrupting perpetrator behaviour and prosecuting offenders.

The Appendix also includes

- A definition of child sexual exploitation
- Some key principles in work to tackle child sexual exploitation; and
- A list of risk indicators

1. GUIDANCE

Working Together to Safeguard Children [2018] Chapter 6, Paragraphs 6.2 – 6.4; 6.54 – 6.66.

Safeguarding Children and Young People from Sexual Exploitation: Supplementary Guidance to Working Together to Safeguard Children [DCSF 2009]. This is available on the following website

[basw_112154-2_0.pdf](#)

IDENTIFICATION

- 2.1 Anyone who has regular contact with children and young people is in a good position to notice changes in behaviour and physical signs which may indicate involvement in sexual exploitation. Practitioners and their managers should:
- Be aware of the signs that suggest a child or young person is being sexually exploited or groomed for sexual exploitation
 - Know how to monitor online spaces and be prepared to request access reports if they suspect that a child may be being groomed online
 - Be aware of the local areas which perpetrators use to target potential victims.
- 2.2 The identification of concern that a child or young person may be involved in sexual exploitation, or at risk of being drawn into sexual exploitation, must always trigger a strategy discussion.
- 2.3 It is very difficult to produce a high level of evidence of sexual exploitation. Practitioners should not wait to receive absolute proof before referring on their concerns or convening a meeting to discuss them.
- 2.4 Professionals should give careful consideration to whether the relationships described by teenagers are consensual, or whether they are being sexually exploited, especially when there is a large age gap or power imbalance between the individuals involved. A young person’s competence to consent to a sexual relationship should not distract attention away from exploitation in their current relationship: if it appears that the young person is being exploited, then a referral must be made to children’s social care.
- 2.5 *Concerns about possible sexual exploitation should be taken particularly seriously In the case of young people under the age of 16 [See Section 28 of these procedures – “Concerns about Children and Young People Involved in Underage Sexual Activity”]. Any such***

concerns about a young person under the age of 14 must be referred to children's social care and the police.

- 2.6 The fact that a young person is 16 or 17 years old and has reached the legal age to consent to sex should not be taken as a sign that they are no longer at risk of sexual exploitation. These young people are still legally children and their right to protection should not be ignored or de-prioritised because they are over the age of 16 or are no longer in mainstream education.

3. RESPONDING TO CONCERNS

Practitioners

- 3.1 Any practitioner who is concerned about possible sexual exploitation of a child or young person should clarify their concerns by consulting the list of risk indicators in the Appendix to this Section and record their concerns. If they remain unsure about the possible risk, consult their senior manager or DSO.

Agencies

- 3.2 If any agency receives information which suggests that a young person under 18 is being sexually exploited, or is at risk of sexual exploitation, this must be dealt with as a child protection matter. The agency must immediately refer the issue to children's social care, who will convene a strategy meeting.
- 3.3 The police must be involved as early as possible to ensure that any evidence that is necessary for prosecution is not lost, and so that a disruption plan for the perpetrator can be put in place. Notifying the police must not be delayed until the young person has made a formal complaint – in many cases the young person will not recognise the exploitative nature of the relationship for a considerable period.

Disabled young people

- 3.4 At all stages it is important to be aware of the vulnerability of young people with a disability or a mental health issue, and to involve the Adults and Communities Directorate in planning. This will include inviting representation at the strategy meeting and at any child protection conferences, and including appropriate adult services when identifying resources to meet the young person's needs.

4. The young persons needs

- 4.1 Children's social care will ensure that a multi-agency support plan is maintained to address the young person's long term needs and that this identifies the lead agency for action under the plan. This plan must be reviewed at least every six months but in many cases reviews will be needed more frequently. It may be appropriate to arrange for the provision of specific resources such as: safe accommodation. In making decisions about the young person's accommodation it is important not to under-estimate the power of perpetrators to find the young person.
- Counselling and information
 - Health information and advice
 - General health, sexual health, smoking, alcohol and drugs
 - Education
 - Therapeutic counselling
 - Information on choices available to the young person.
- 4.2 At any stage, information may come to light which relates to the needs of another young person. This should be the subject of a separate enquiry.

DOMESTIC ABUSE:

Domestic abuse, also called "domestic violence" or "intimate partner violence", can be defined as a pattern of behaviour in any relationship that is used to gain or maintain power and control over an intimate partner. Abuse is physical, sexual, emotional, economic, or psychological actions or threats of actions that influence another person. This includes any behaviours that frighten, intimidate, terrorize, manipulate, hurt, humiliate, blame, injure, or wound someone. Domestic abuse can happen to anyone of any race, age, sexual orientation, religion, or gender. It can occur within a range of relationships including couples who are married, living together or dating. Domestic violence affects people of all socioeconomic backgrounds and education levels.

Anyone can be a victim of domestic violence, regardless of age, race, gender, sexual orientation, faith or class.

Victims of domestic abuse may also include a child or other relative, or any other household member. Domestic abuse is typically manifested as a pattern of abusive behaviour toward an intimate partner in a dating or family relationship, where the abuser exerts power and control over the victim. Domestic abuse can be mental, physical, economic, or sexual in nature. Incidents are rarely isolated, and usually escalate in frequency and severity. Domestic abuse may culminate in serious physical injury or death.

Good Practice Guidelines**Be understanding**

Explain that there are many people in similar situations. Acknowledge that it takes strength to trust someone enough to talk about the abuse. Allow someone time to talk and do not push him or her to give too much detail if they do not want to.

Be Supportive

- Say that no one deserves to be threatened, intimidated, or physically assaulted, despite what the abuser may have said. Be a good listener and encourage them to express their hurt and anger.
- Let them make their own decisions even if this means they are not ready to leave the relationship, this is their decision.
- Keep accurate written records of any conversations you have with the young person who discloses abuse.
- Take personal responsibility when referring the person elsewhere.
- Keep in touch with the young person wherever possible.
- Don't ignore your intuition, if you suspect a young person is being abused, discuss it with colleagues.
- Don't pressure a young person to disclose information they may not be ready to share.
- Don't ask the young person what they did to provoke the attack.
- Don't make choices for them, give information and support them whatever they choose to do.
- Provide information as far as you can on the help available. Every project should have a list of refuges, help-lines numbers and solicitors if the young person is ready to take this step.
- Have posters, phone numbers etc. in communal areas so that young people do not have to contact staff in order to access help.
- Remember that their ability to access support may be hampered by racist reactions, language and cultural barriers or other negative reactions to age, disability or sexuality.
- Staff should not put themselves at risk whilst supporting someone else, for example do not offer to talk to the abuser, go to the young person's flat to remove belongings etc without a police escort, or let yourself be seen by the abuser as a threat to the relationship.

For more information refer to St Basils Domestic Abuse Policy

FEMALE GENITAL MUTILATION (FGM)

Definition

Female genital mutilation (FGM) is a collective term for procedures which include the removal of part / all external female genitalia for cultural or other non-therapeutic reasons. The practice is not required by any major religion and is medically unnecessary, painful and has serious health consequences at the time it is carried out and in later life.

The World Health Organisation (WHO) defines FGM as:

“All procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons”

Law

Female Genital Mutilation Act 2003 as amended by the Serious Crime Act 2015

Female circumcision, excision or infibulation (female genital mutilation) is illegal in this country by the Female Genital Mutilation Act 2003, except on specific physical and mental health grounds. More information can be found on the Home Office website.

It is an offence to:

Undertake the operation (except in specific physical or mental health grounds)

Assist a girl to mutilate her own genitalia

Assist a non-UK person to undertake FGM of a UK national outside UK (except in specific physical or mental health grounds)

Assist a UK national or permanent UK resident to undertake FGM of a UK national outside the UK (except in specific physical or mental health grounds)

Mandatory reporting of female genital mutilation

Procedural information (Home Office, 2016)

Sets out the mandatory duty for health and social care professionals, teachers and to make a report to the police if:

- they are informed by a girl under the age of 18 that she has undergone an act of female genital mutilation (FGM)

or

- they observe physical signs that an act of FGM may have been carried out on a girl under the age of 18.

When to make a report

The duty does not apply where a woman over the age of 18 discloses she had FGM when she was under 18.

The duty only applies in cases where the victim discloses. If someone else, such as a parent or guardian, discloses that a girl under 18 has had FGM, a report to the police is not mandatory. However, in these circumstances disclosures should still be handled in line with wider safeguarding responsibilities.

Recognition

St Basils staff should be aware of the following indicators and report any suspicions to the Safeguarding Officer:

Spotting the risks - A girl or woman who has had FGM may:

- have difficulty walking, sitting or standing;
- spend longer than normal in the bathroom or toilet;
- have unusual behaviour after an absence from school or college;

- be particularly reluctant to undergo normal medical examinations; and
- ask for help, but may not be explicit about the problem

Indications that FGM may have already occurred include:

- Prolonged absence with noticeable behaviour change on return
- Bladder and menstrual problems
- Reluctance to receive medical attention or participate in practical activities

A girl at immediate risk of FGM may not know what's going to happen, but she might talk about:

- being taken 'home' to visit family;
- a special occasion to 'become a woman'; and
- an older female relative visiting the UK.

Response Procedure:

If any member of staff has a suspicion of intended or actual FGM they must refer it to the safeguarding Officer.

Female genital mutilation is a one-off event of physical abuse (albeit one that may have grave permanent sexual, physical, and emotional consequences). As FGM is a form of child abuse, it will be dealt with in according with St Basils existing Child Protection & Safeguarding Policy.

Further Advice:

Useful contacts are:

Birmingham Against Female Genital Mutilation (BAFGM)
Birmingham & Solihull Women's Aid

Contact Details

- Contact Name: Community Development Worker
- Address: Bswaid, Birmingham, B5 7AA
- Telephone: 0121 685 8687
- Website: <http://www.bswaid.org>
- Email: info@bswaid.org

SELF NEGLECT – (SOLIHULL LOCAL PRACTICE GUIDANCE No 2)

2.1 Introduction The guidance has been developed so practitioners and partners know how to respond to incidents of Self Neglect and when a Safeguarding Adults referral is required. There is no consistent definition of self-neglect, however basic needs and individual health and safety are at the core of many definitions. Below are two useful definitions:

Self Neglect is defined as the inability (intentional or non-intentional) to maintain a socially and culturally accepted standard of self-care with the potential for serious consequences to the health and well-being of the individual and sometimes to their community. It is the result of an adult's inability, due to physical and or/mental impairment or diminished capacity, to perform essential self-care tasks, including providing essential food, clothing, shelter and medical care; obtaining goods and services necessary to maintain physical health, mental health, emotional well-being and general safety; and/or managing financial affairs.

Indicators of self-neglect may be.

living in very unclean, sometimes verminous, circumstances	poor nutrition	poor healing/sores
poor self-care leading to a decline in personal hygiene	poorly maintained clothing	long toenails
portraying eccentric behavior/lifestyles	isolation	failure to take medication.
hoarding large numbers of pets		neglecting household maintenance

Self-neglect is not included in the “No Secrets” definition of abuse, but this guidance will apply where there is deemed to be significant risk to life.

2.3 Possible responses and consequences of Self Neglect There are a number of triggers which may indicate a person is self-neglecting. For each of these triggers there will be a consequence if action is not taken. The consequence will range from minor and trivial to major and catastrophic depending on the risks and duration of the neglect. When working with people who self-neglect there are six key issues to continually consider:

- i. **Mental Capacity** – Does the individual have Mental Capacity? Remember Mental Capacity is decision specific and can fluctuate and change.
- Relationship and trust** – Research has shown building trust and a relationship with someone who is self-neglecting is important. If possible identify the person who has an established or the best relationship with the adult at risk and seek their support to improve the adult at risks situation. Remember – building relationships and gaining trust often takes time – be patient.
- ii. **History**
- iii. **Information sharing**
- iv. **Multi agency working.**
- v. **Safeguarding**

The following table should be used to guide interaction, support from other agencies and identification of possible consequences

SELF NEGLECT - Triggers – consequences and possible responses

TRIGGERS	MENTAL CAPACITY SAFEGUARDING	CONSEQUENCE	INFORMATION SHARING MULTI AGENCY WORKING	POSSIBLE RESPONSES
Deterioration in personal hygiene <i>What and why?</i>		Social isolation Barriers to working and building relationships Discrimination Depression		Referral to: Health or social care
Deterioration in physical care needs <i>What and why?</i>		Sores and infections Pain Falls Immobility Death		Referral to: General Practitioner District Nurse Hospital admission Adult Social Care Assessment Domiciliary care service
Deterioration in Mental Health <i>Why?</i>		Isolation Hospital admission/Sectioned Self-harm Suicide		Referral to: Mental health Community Psychiatric Nurse Counselling / therapies
Neighbour complains <i>Why is the neighbour complaining now?</i>		Support withdrawn Anti-Social Behaviour		Referral to: Adult Social Care Assessment - does the person meet FACS? Advocacy support from Voluntary Organisation Harm Reduction Forum Anti-Social Behaviour Case Conference
Deterioration in property <i>What?</i>		Risk of falls Open to the elements Service providers refuse to go in		Referral to: Landlord Environmental health Adult Social Care
Children at risk <i>What and why?</i>		Family break up Child in care Lack of child development		Referral to: Children's services Child protection Maybe adult social care

TRIGGERS	MENTAL CAPACITY SAFEGUARDING	CONSEQUENCE	INFORMATION SHARING MULTI AGENCY WORKING	POSSIBLE RESPONSES
Vermin and infestation <i>What and why?</i>		Bites and infection Neighbour complaints Anti-Social Behaviour Service providers refuse to go in Eviction		Referral to: Social Care Environmental services Voluntary organisation such as Age UK Health – GP, DN Harm Reduction Forum Anti-Social Behaviour Case Conference
Excess cold <i>Why?</i>		Hypothermia Death		Report to: Landlord Environmental health Voluntary organisation Age UK – winter warmth
Utilities disconnected <i>Why?</i>		Poor diet – malnutrition Excess cold – hypothermia Fire risk – candles Death		Referral to: Adult social care Voluntary organisation Age UK – winter warmth Debt advice service
Hoarding		Falls Fire risk Anti-Social Behaviour Eviction		Referral to: Fire Service Landlord Adult social care - does the person meet FACS? Environmental health Harm Reduction Forum
Animal welfare <i>What and how many?</i>	Health risks Anti-Social complaints Smell/noise Behaviour	Referral to: Environmental health RSPCA Harm Reduction Forum Anti-Social Behaviour Case Conference		

COUNTY LINES/ CRIMINAL EXPLOITATION (*extract taken from NSPCC.org.uk*)

County lines is a form of criminal exploitation where urban gangs persuade, coerce or force children and young people to store drugs and money and/or transport them to suburban areas, market towns and coastal towns (Home Office, 2018). It can happen in any part of the UK and is against the law and a form of child abuse.

Children and young people may be criminally exploited in multiple ways. Other forms of criminal exploitation include child sexual exploitation, trafficking, gang and knife crime.

County lines gangs are highly organised criminal networks that use sophisticated, frequently evolving techniques to groom young people and evade capture by the police.

Perpetrators use children and young people to maximise profits and distance themselves from the criminal act of physically dealing drugs (National Crime agency, 2019). Young people do the majority of the work and take the most risk.

Dedicated mobile phone lines or “deal lines” are used to help facilitate county lines drug deals. Phones are usually cheap, disposable and old fashioned, because they are changed frequently to avoid detection by the police.

Gangs use the phones to receive orders and contact young people to instruct them where to deliver drugs. This may be to a local dealer or drug user, or a dealer or drug user in another county.

Phrases that young people may use to refer to county lines include:

- ‘running a line’,
- ‘going OT/out there’
- ‘going country’
- ‘going cunch’.

These all refer to going out of town to deliver drugs or money (Thurrock Council, 2020).

We’ve put together some information to help anyone who works or volunteers with children and young people to recognise the signs that a child might be being exploited by a county lines gang and understand what action to take to help keep children safe.

This includes:

- the risks associated with county lines
- recognising and responding to concerns about county lines
- how professionals can work to prevent county lines
- a summary of the relevant legislation and guidance.

Risks

County lines is a cross-cutting issue that often overlaps with other forms of abuse and criminal exploitation. It can lead to serious physical and emotional harm to young people (Home Office, 2020a).

Criminalisation

If adults who work with children don’t understand that county lines is a form of abuse, they may see children involved in county lines activity as criminals rather than as victims of criminal exploitation (Children’s Society, 2019).

This can lead to children not getting the safeguarding support and protection they need.

Drugs

Perpetrators may use drugs and alcohol to entice young people into the gang lifestyle.

In some cases gangs trick young people into incurring drug debts that they then have to pay off through county lines activity. This is often referred to as 'debt bondage'.

Physical violence

There is a strong link between county lines activity and:

- serious violence such as knife and gun crime
- the use of substances such as acid as a weapon
- homicide

(Home Office, 2018).

Conflict between rival gangs that are in dispute over who controls an area can lead to serious injury or death for young people who get caught in the wrong place.

The fear of serious physical violence as revenge for disrespecting, 'snitching' or 'grassing' is one of the things that prevents young people from leaving gangs or seeking help from the police and other agencies.

Sexual abuse and exploitation

As well as being used to transport drugs, county lines gangs may sexually abuse and exploit children of any gender (National Crime Agency, 2019).

This can happen through:

- young people being forced into sexual activity with gang members or for the gang's financial gain
- vulnerable children being made to work off drug debts through sexual exploitation as 'payment' (this might happen after the child has been coerced into becoming dependent on drugs by the gang)
- children being groomed into what they believe is a romantic relationship with a gang member which then leads to exploitation

(National Crime Agency, 2019).

Some children are forced to transport drugs in ways that are invasive and harmful to their bodies. Young people may be forced to swallow bags of drugs to transport them, which could potentially be life threatening.

The practice of 'plugging' is also common, whereby drugs are inserted into a child's rectum or vagina. This is a form of sexual abuse and in some cases it can cause a child's death (Ofsted et al, 2018).

Trafficking and missing children

Young people can be trafficked to locations far away from where they live for long periods of time by a county lines gang. They may end up staying in unsuitable accommodation in an area that is unknown to them. This might include short term holiday lets or budget hotels.

Cuckooing

Cuckooing happens when a county lines gang takes over the home of a vulnerable adult by coercion or force, and use it as a base to deal drugs from. The vulnerable adult may have issues with substance

misuse or mental health problems, be elderly or disabled or be in debt to the gang. These factors can make it easier for the gang to exploit and control them.

Children can be forced or coerced to stay at cuckooed addresses for long periods of time to deal drugs. A cuckooed address is sometimes referred to as a 'bando' or a 'spot' by county lines gangs (Thurrock Council, 2020).

Financial exploitation and abuse

Gangs are known to launder money from drug sales through children's bank accounts, either by using an existing account or forcing or persuading the child to open a new one (Children's Society, 2019).

County lines gangs might refer to 'squares' - meaning cash cards, and 'deets' - meaning bank details (Safe4Me, 2019).

[> Find out more about protecting children from trafficking and modern slavery](#)

Recognising

Grooming

The grooming process involves the gang:

- seeking out a child to exploit
- observing the child for vulnerabilities
- finding out what the child's needs and wants are
- manipulating the child into believing that being in the gang can fulfil these needs.

Once they have identified a child, the gang will make some form of contact and the grooming process will begin. This could be in person or via mobile phone. Social media profiles may also be used to glamourise gang life and entice young people.

Some children are groomed through family members, for instance if they have a sibling or relative who is already involved with a county lines gang.

County lines gangs offer money and status to attract young people. Children may also be attracted to joining a gang by the prospect of belonging to a 'family' that will protect them if their own family feels unstable or unsafe.

The following have been identified as key places where county lines gangs target and approach vulnerable young people:

- schools and further and higher educational institutions
- special educational needs schools
- places for alternative provision outside of mainstream education
- foster homes
- homeless shelters.

Once a child is part of a county lines gang their loyalty and commitment will be tested. The gang will begin to trap the child by making them feel powerless to leave. This might include threats of violence if they leave, making the child feel like they are betraying their new 'family', or telling the child they will get in trouble if they seek help because they have committed a criminal offence (Children's Society, 2019).

[> Find out more about grooming](#)

Who is vulnerable to county lines exploitation?

Any child could potentially be at risk of criminal exploitation by a county lines gang.

Factors that make a county lines gang more likely to target, groom and exploit a child include:

- the child having experienced neglect, physical and/or sexual abuse in the past
- social isolation or social difficulties
- poverty
- homelessness or insecure accommodation status
- connections with other people involved in gangs
- having a learning disability
- having mental health problems
- having substance misuse issues
- being in care or having a history of being in care
- being excluded from mainstream education

(Home Office, 2020a).

Permanent exclusion from mainstream education has been identified as a critical event that can lead to young people becoming vulnerable to criminal exploitation (Child Safeguarding Practice Review Panel, 2020).

County lines gangs can take advantage of the lack of structure, loss of a sense of belonging and feeling of rejection that exclusion can elicit in a young person.

The average age of young people who are exploited through county lines activity is 15-16 years old, but children as young as 12 have also been reported to have been involved (Home Office, 2020a).

Signs that a young person may be involved in criminal exploitation

The following signs may indicate that a child is being exploited by a county lines gang:

- frequently going missing from school, home or care
- travelling to locations, or being found in areas they have no obvious connections with, including seaside or market towns
- unwillingness to explain their whereabouts
- acquiring money, clothes, accessories or mobile phones which they seem unable to account for
- receiving excessive texts or phone calls at all hours of the day
- having multiple mobile phone handsets or sim cards
- withdrawing or having sudden changes in personality, behaviour or the language they use
- having relationships with controlling or older individuals and groups
- unexplained injuries
- carrying weapons
- significant decline in school results or performance
- being isolated from peers or social networks
- associating with or being interested in gang culture
- self-harming or having significant changes in mental health

(Ministry of Justice, 2019).

Responding to concerns about county lines exploitation

If you're worried that a child or young person might be or is at risk of being exploited by a county lines gang, you must share your concerns.

Reporting

If you think a child is in immediate danger, contact the police on **999**. If you're worried about a child but they are not in immediate danger, you should share your concerns.

- **Follow your organisational child protection procedures.** Organisations that work with children and families must have [safeguarding policies and procedures](#) in place.
- **Contact the NSPCC Helpline** on [0808 800 5000](tel:08088005000) or by emailing help@nspcc.org.uk. Our trained professionals will talk through your concerns with you and give you expert advice.
- **Contact the local child protection services.** Their contact details can be found on the website for the relevant local authority. The local authority the child comes from is responsible for the child's welfare. But it is also good practice to contact the local authority in the area the child is found, as they may need to be a part of the multi-agency response and there may be other children or vulnerable adults at risk.
- **Contact the police.**

National referral mechanism (NRM)

As part of county lines, young people are trafficked to different locations.

You should refer children who have been trafficked to the National Referral Mechanism (NRM). Evidence of a referral can be used in a young person's defence in criminal and legal proceedings (Youth Justice Legal Centre, 2018).

[> Find out more about what action to take if a child has been exploited through trafficking and modern slavery](#)

Multi-agency working

A multi-agency response is needed to tackle county lines and protect any children involved from further exploitation. This should include participation from local authority children's social care, the local authority community safety team, schools, police and youth offending teams.

The local authority the child comes from (if known) is responsible for the child's welfare (Ministry of Justice, 2019). They may need to liaise with child protection agencies in the area the child was found, in order to keep the child safe.

Collaborative working and information sharing is essential in protecting the welfare of the child.

Across the UK, Independent Child Trafficking Guardians (ICTGs) can act as sources of advice for children without a figure of parental responsibility in the UK who have been victims of trafficking and modern slavery (Home Office, 2020b).

ICTG regional practice co-ordinators take on a more strategic role supporting children who do have a figure of parental responsibility, working with professionals to encourage them to take a co-ordinated and multi-agency approach to child trafficking, modern slavery and county lines (Home Office, 2020b).

[> Find out more about multi-agency working in child protection and safeguarding](#)

Supporting the young person who has been exploited

Adults who work or volunteer with children and young people are in a good position to build trusting relationships with them. This will help young people feel able to discuss issues that are affecting their lives and speak out if they need support about any issue, including county lines (Child Safeguarding Practice Review Panel, 2020).

Those who work with children need to be clear that county lines is not a lifestyle choice and that the young person is not to blame for being exploited by a gang.

Young people who are involved with a county lines gang may push back when help is offered. They may not see themselves as being exploited or they may be scared of recriminations if they 'snitch' or 'grass' on gang leaders.

Gangs convince young people that there is no way out for them, in order to trap and control them. This means it's important for adults to reassure young people that there is a way out of gang life and that help is available when they are ready to leave.

Young people may finally reach out for help in the event of a major incident or emergency. This might include a serious injury or the threat of serious injury to themselves or someone they know, or if someone they know was killed. If professionals do not act quickly and effectively to intervene at this point, the child may be 're-groomed' or pressured back into the gang (Canterbury Community Safety Partnership, 2020).

Childline

If a child or young person needs confidential help and advice about gangs or anything else that's worrying them, you can always direct them to [Childline](#). Calls to 0800 1111 are free and children can also contact Childline online.

[Childline](#) provides information and advice for young people affected by [gang activity](#), [drugs](#) or any other form of abuse.

You can also download or order [Childline posters and wallet cards](#).

Training

To help identify and support children who have experienced county lines, professionals need training which covers:

- signs and indicators of county lines exploitation
- the legislative framework around criminal exploitation
- the NRM referral process
- understanding the trauma experienced by young people

(Children's Society, 2019).

Prevention

Schools and education

Schools and colleges can help raise awareness of county lines. This can be done through whole-school assemblies, class discussions or smaller group work.

As well as discussing what county lines is and how children might be targeted by gangs, schools should ensure children know who they can talk to if they have any concerns.

Schools are also well-placed to identify any children who may be at risk of county lines and form part of the multi-agency response.

> [Find out more about having difficult conversations with children](#)

> [Find out more about promoting healthy relationships](#)

Exclusion from school

If a child is at risk of being excluded from education, schools should always consider what immediate wrap around support can be put in place to protect them from county lines.

This should include exploring what support is available from children's social care, and voluntary and community organisations.

Working with parents and carers

Engaging with parents and carers can help protect children and young people who are at risk of criminal exploitation. Parents and carers need support to manage any risk to their child.

It's important for services working with children at risk of county lines to understand what barriers might be in place for parents and carers. These might include fears around:

- having their other children 'taken away' from them
- their child being excluded from school
- criminalising their child
- recriminations from the county lines gang

(Canterbury Community Safety Partnership, 2020; Child Safeguarding Practice Review Panel, 2020).

Legislation and guidance

Statutory guidance across the UK highlights the responsibility of those in the education, community and care sectors to safeguard children from all forms of abuse including county lines and other criminal exploitation.

- [Child protection in England](#)
- [See also Key guidance for schools in the UK](#)

County lines may involve child trafficking and modern slavery.

> [Find out more about the legislation relating to child trafficking and modern slavery across the UK](#)

Guidance

The Home Office has provided key guidance for all four UK nations on [how to recognise and respond to concerns about county lines](#) (Home Office, 2020a).

In **England** and **Wales**, the Ministry of Justice has provided [guidance for frontline practitioners](#) on referral pathways for responding to and safeguarding children involved in county lines (Ministry of Justice, 2019).

Public Health England (PHE) (2021) has published [guidance on county lines exploitation](#) to help health professionals prevent child exploitation and protect vulnerable children that have been manipulated and coerced into crime.

MODERN SLAVERY (Extracts taken from *'The Passage to Ending Homelessness – Modern Slavery Handbook'*)

Definition

Modern slavery encompasses sexual exploitation, forced labour, child slavery, forced criminality, domestic servitude, forced marriage, organ harvesting and human trafficking. It can affect men, women and children, from abroad or from the UK. Victims are forced to work against their will on farms and building sites, in factories, restaurants, nail bars, car washes, brothels, massage parlours and private homes. Traffickers and exploiters use coercion and deception to keep control over their victims. Human trafficking is a specific crime, under which people are moved for the purpose of exploitation. In addition to moving people between regions of a country, it can involve international organised crime, where victims are recruited and trafficked between countries.

Law

In 2015, the Modern Slavery Act – a ground-breaking piece of legislation in the fight against trafficking and modern slavery – received Royal Assent in England and Wales.

- The Modern Slavery Act puts the onus on statutory bodies to act on slavery wherever they find it – if you work for the police, a local authority or the NHS, you must report slavery if you suspect it.
- The Act requires businesses to ensure that there is no slavery in their supply chains, even those that extend outside the UK. All businesses with a turnover of more than £36 million must produce an annual Modern Slavery Statement and display it on their websites.
- The Act clarifies offences for those who engage in trafficking and exploitation.
- It also created an Independent Anti-Slavery Commissioner to oversee anti-slavery work in the UK and beyond.
- The Modern Slavery Act introduced special measures for the protection of victims, including civil legal aid in relation to: immigration and employment; independent child advocates; the obligation to refer minors, even without their consent; and, in order to receive immediate assistance, the obligation to consider a minor of uncertain age to be a child.

Following The Passage report, modern slavery was included in the Homelessness Reduction Act 2017 (chapter 25), and the Rough Sleeping Strategy 2018 (section 107). Exploitation, is illegal under UK and international law.

Homeless people and rough sleepers are particularly vulnerable to grooming, psychological manipulation, physical abuse and exploitation as a result of substance addictions, mental health issues, trauma, loneliness and instability. Victims who have fled from their traffickers may be destitute, without ID documents, and become rough sleepers who have no recourse to public funds. After leaving the support services provided by the government, through the National Referral Mechanism (NRM), gaps in services and the availability of longer-term support can lead to adult victims of modern slavery becoming vulnerable and homeless. Perpetrators and traffickers have been seen trying to recruit homeless people in day centres, night shelters and at soup runs.

The Victim

Victims of modern slavery are likely to suffer from mental health problems, depression and anxiety, to have physical injuries, to be addicted to alcohol or drugs, and have a higher risk of HIV/ AIDS or sexually transmitted diseases. The trafficking experience destroys a person's belief that they can have control over their own actions or decisions.

Victims:

- Have often been promised a better life, easy cash, or a better job.
- Think their life is better than it was before.
- Are too scared to talk (immigration status, criminal activities).
- Might have been given a prepared story by their exploiters.
- Have difficulties in recalling their experiences.
- Feel loyalty and gratitude to their exploiters/traffickers.
- Don't see themselves as victims, but think their situation is the result of a poor decision.

- Believe their situation is temporary (to pay a debt, support their families).

The Perpetrator

Traffickers are clever and use a range of tactics to get what they want. They may frequently change their approach to targeting victims. It is important for front-line agencies to be alert and, by identifying and reacting to these changes quickly, make it as difficult as possible for traffickers to continue to operate.

Sexual Exploitation

Sexual exploitation is any abuse of vulnerability for sexual purposes. Grooming is often used to gain a vulnerable person's trust. Exploiters become their victims' "best friend", "best lover", "best manager", "best drug dealer". The victim believes the love is genuine. A person can be physically and/or psychologically forced into sexual activity, but they can also be sex workers who are exploited and forced to pay high sums to landlords and "managers"

Forced Labour

Forced labour refers to situations in which a person is coerced to work through the use of violence and/or psychological intimidation, such as accumulated debt, retention of ID, or threats of denunciation to the immigration authorities. Forced labour occurs throughout the UK, often in low-skilled, low-wage jobs where labour standards and workers are unregulated, unlicensed or unenforced. Typical sectors: agriculture, food processing and packaging, construction, warehousing and logistics, hotels, cleaning services, manufacturing (sweatshops)

Child Slavery

Child slavery involves a person under the age of 18 being exploited. Children are particularly vulnerable to exploitation because they can be easily controlled by adults. They can be boys or girls, British, or foreign nationals. In the UK, children have been found to be victims of all forms of slavery, including sexual exploitation, forced labour and criminality, domestic servitude and organ harvesting. All children working in the sex trade are victims of child abuse and sexual exploitation – there is no such thing as legal child prostitution.

Forced Criminality

Forced criminality is where a person is forced into criminal activity for another's gain. Common forms in the UK are cannabis cultivation, drug dealing, benefit fraud, theft, begging, and the selling of counterfeit goods. People forced into criminality are often afraid to go to the authorities for fear that they will end up in trouble or even in prison.

Domestic Servitude

Domestic servitude is a form of modern slavery where domestic workers – often maids, housekeepers, cleaners, nannies, or those caring for the elderly, ill and infirm – are forced to work for little or no pay, with restricted freedom and often with an element of sexual abuse. Three-quarters of domestic servitude victims are children. Because domestic servitude occurs in private houses, it is one of the most invisible forms of modern slavery

Forced Marriage

Forced marriage is where one or both people do not consent to a marriage, and when pressure and/or abuse is used. The pressure put on victims can be physical (including threats, physical violence and sexual violence), emotional or psychological (for example, bringing shame to the family), and financial (taking away wages or allowances).

Organ Harvesting

Organ harvesting is a form of modern slavery that is on the increase across the world, with some cases being reported in the UK. It involves the illegal removal of internal organs for transplant with or without the donor's consent. Victims may be manipulated or coerced into giving up an organ, such as a kidney or an eye; may be lured to sell an organ without full medical information or may be persuaded that they need an operation and the organ is removed without their knowledge. The victim/donor may initially be trafficked or smuggled to another country under the false pretence of a job, which commonly fails to materialise. The recruiter will then suggest the sale of an organ as the only means for the victim to repay travel and accommodation costs. The victim may be coerced or forced to go through with the transplant quickly, in case they change their mind. Their "handler" will make sure the victim has the surgery by driving them to the clinic, by making up cover

stories for medics, and by providing fraudulent signed consents and declarations. The victim is generally put on a flight home within days of the surgery. Payment is often not made until the surgery has been completed and, even then, the promised amount is not paid. In addition, there is the likelihood of medical complications as a result of proper transplant procedures not being followed.

Human Trafficking

The essence of human trafficking is that the victim is coerced or deceived into a situation where they are exploited. Article 4(a) of the Council of European Convention on Action against Trafficking in Human Beings defines 'human trafficking' as:

“the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs.”

Slavery, Servitude and Forced or Compulsory Labour

Slavery, servitude and forced or compulsory labour may also be present in trafficking cases. However, not every person who is exploited through forced labour has been trafficked. For example, in some cases, a person may have been seriously exploited, but there was no action (element of movement), which means they do not meet the definition of a trafficking victim.

UN Convention No. 29 concerning forced or compulsory labour defines 'forced or compulsory labour' as 'all work or service which is exacted from any person under the menace of any penalty and for which the said person has not offered himself voluntarily'.

Components of Adult/Child Trafficking

- **Action** - recruitment, transportation, transfer, harbouring or receipt, which includes an element of movement whether national or cross-border; which is achieved by a...
- **Means** - threat or use of force, coercion, abduction, fraud, deception, abuse of power or vulnerability; for the purpose of...
- **Exploitation** - for example, sexual exploitation, forced labour or domestic servitude, slavery, financial exploitation, removal of organs

All three components must be present in an adult trafficking case. However, in a child trafficking case the 'means' component is not required as they are not able to give informed consent to engage in criminal or other exploitative activity, and they cannot give consent to be abused or trafficked.

Child human trafficking will therefore consist of two basic components: 'action' and 'purpose of exploitation'.

- **Action** - recruitment, transportation, transfer, harbouring or receipt, of child which includes an element of movement whether national or cross-border
- **Exploitation** For example, sexual exploitation, forced labour or domestic servitude, slavery, financial exploitation, removal of organs of child

Modern Slavery Helplines

If you have suspicions about modern slavery in your community, call one of the numbers below.

Your information could be the vital piece of the jigsaw that results in a victim being freed or a perpetrator being prosecuted. Silence is how slavery thrives; speaking out will help to end it.

If you're in a situation you can't get out of and you need help, these helplines can support you.

Emergency 999

Police 101

Modern Slavery Helpline 08000 121 700

The Salvation Army 0300 303 8151

Crimestoppers 0800 555 111

GLAA 0800 432 0804

NSPCC 0808 800 5000