



Safeguarding Vulnerable Children and Adults

April 2022

To be reviewed: April 2023

This policy applies to all staff including managers, paid staff, volunteers and anyone working on behalf of Helping Angels.

Designated Safeguarding Leads:

Lyndsey Ellis – Chair of Trustees

Natasha Gratton – CEO

Suzanne Gleeson – Community Lead – Safeguarding lead – The Indi Club

Contact Details:

Role of the Designated Safeguarding Lead's

The Designated Safeguarding Officer are the first point of contact for all staff and volunteers to go to for advice if they are concerned about a child (this may also need to be out of hours so staff and volunteers should always know how to contact them or you can also appoint a Deputy). The Designated Leads are trained to Level 4 safeguarding and have a clear knowledge of the guide to level of need. The DSL will ensure that the safeguarding policy is kept up to date and that staff comply to the best of their ability. The DSL will support staff to assist in information regarding concerns and support decision making about whether staff concerns are sufficient

enough to notify Children's Social Work Services or whether other courses of action are more appropriate, for example the completion of an Early Help Approach. They ensure that concerns are logged and stored securely and attend safeguarding meetings to support the local authority.

Our Responsibilities

Helping Angels Charitable Association supports vulnerable adults and children in Stoke on Trent and North Staffordshire to reach their full potential.

Helping Angels will ensure that it fulfils its responsibilities to work jointly with others to safeguard and promote the welfare of children, young people and vulnerable adults. Helping Angels is committed to working with other agencies to ensure that people in settings that we support are safeguarded. People who use services have a right to live and work in environments free from abuse and neglect. We understand as a company that children and vulnerable adults with additional needs and disabilities face additional safeguarding challenges and so provide the extra care to these families and support where required.

Helping Angels does not investigate issues of concern in relation to vulnerable adults and young people. Local authorities and the police hold the lead responsibility for responding to allegations of abuse in relation to adults, young people, and in coordinating the local interagency framework for safeguarding adults and children.

Helping Angels will bring to the attention of the local authority social services and the police any concerns in relation to safeguarding or allegations of abuse identified through any part of its work.

Helping Angels is committed to ensure all employees are level one safeguarding trained as a minimum and will continue to raise the aspirations and skillset for all employees. This will be re done every three years.

What is the definition of a vulnerable adult?

A vulnerable adult is defined as;

- A person aged 18 years and over " who is or may be in need of community care services by reason of mental or other disability, age or illness"
- Who is or may be unable to take care of him or herself or unable to protect him or herself against significant harm or exploitation (No Secrets, 2000)

A vulnerable adult can be anyone

- over the age of 18
- may not be able to protect themselves from abuse or harm
- receiving social care services or have a personalised budget
- who has physical or sensory impairment, learning disability or mental health problem

The definition of safeguarding – children and young people

In relation to children and young people, Helping Angels adopts the definition used in the Children Act 2004 and the Department for Education (DfE) guidance document: *Working Together to Safeguard Children 2013* (paragraph 2), which define safeguarding and promoting children and young people's welfare as:

- protecting children from maltreatment
- preventing impairment of children's health or development
- ensuring that children are growing up in circumstances consistent with the provision of safe and effective care, and
- taking action to enable all children to have the best outcomes.

The above statutory guidance defines child protection as part of safeguarding and promoting welfare. Child protection is the activity undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.

All employees must maintain a proper focus on safeguarding children, young people and vulnerable adults, and this must be reflected both in individual practice and in our internal policies and guidance. All permanent and contracted staff working with children and young people (including young people who are vulnerable adults) must:

- give highest priority to their safety and welfare
- recognise, identify and respond to signs of abuse, neglect and other safeguarding concerns relating to children and young people
- respond appropriately to disclosure by a child, or young person, of abuse
- respond appropriately to allegations against staff, other adults and against themselves
- understand and implement safe practice in carrying out their duties in inspection
- be alert to the risks which abusers, or potential abusers, may pose and vigorously pursue concerns to ensure that providers are able to demonstrate a similar level of commitment
- be aware of the importance of the role of inspected services in promoting the safety and welfare of children and young people
- contribute, as necessary, to all stages of Ofsted's safeguarding and protection processes.

What is abuse?

Abuse is a behaviour towards a person that causes him or her harm, distress or threat to life. It can happen to anyone. Abuse can happen anywhere and in any setting. It is important to identify signs of abuse and act where necessary to safeguard an individual from abuse. This requires an understanding of situations that may create a risk of abuse or harm. There also needs to be a balance, in which an individual's choices are fully respected if they have the capacity to make them. The

choices and experiences of the individual involved should always be respected and they should ultimately guide any intervention in an adult abuse situation. If a person lacks capacity then the individual should be supported within the best interest standards set out in the Mental Capacity Act 2005. (see Mental Capacity Act 2005)

Physical Abuse

Physical abuse is abuse involving contact with the intention to cause pain, injury, or other physical suffering or bodily harm. It could include hitting, tripping, kicking, shaking, burning, pulling hair, biting, pushing or using objects to cause pain or injury. It could be rough handling during care giving, for example lifting someone inappropriately instead of using the correct procedures or equipment. A person could be stopped from going out, locked in a room or tied to a chair or bed. In addition, symptoms of depression, emotional distress, and suicidal ideation are also common features of people who have been physically abused.

Possible indicators of physical abuse

- Multiple bruising
- Fractures
- Burns
- Bed sores
- Fear
- Depression
- Unexplained weight loss
- Hair loss

Emotional abuse/ Psychological

Psychological abuse, also referred to as emotional abuse or mental abuse, is a form of abuse characterized by a person subjecting or exposing another to behaviour that may result in psychological trauma, including anxiety, chronic depression, or post-traumatic stress disorder. Such abuse is often associated with situations of power imbalance, such as abusive relationships, bullying, and abuse in the workplace. Honor Based Violence is also a type of emotional abuse where the honour code is set by male relatives and women who do not abide by their rules are punished for bringing shame on the family.

Possible indicators of emotional abuse

- Fear
- Depression
- Confusion
- Loss of sleep
- Unexpected or unexplained change in behaviour
- Deprivation of liberty could be false imprisonment. Aggressive shouting causing fear of violence in a public place may be an offence against Public Order Act 1986, or harassment under the Protection from Harassment Act 1997

Sexual Abuse

Sexual abuse could include a person forcing someone to have sexual intercourse or perform sexual acts that they do not want to do. It could consist of indecent exposure or teasing a person. A person may be forced to watch pornographic, sexual acts or a person could watch someone when they are undertaking personal care activities.

Female Genital Mutilation is a type of sexual abuse

Female genital mutilation (FGM) is the cutting, or partial or total removal, of the external female genitalia for cultural, religious, or other non-medical reasons. It is usually performed on girls between the ages of four and 10. It is also called female circumcision

Sexual Exploitation and grooming are also types of sexual abuse: Child sexual exploitation (CSE) is a type of sexual abuse. Children in exploitative situations and relationships receive something such as gifts, money or affection as a result of performing sexual activities or others performing sexual activities on them. Children or young people may be tricked into believing they're in a loving, consensual relationship. They might be invited to parties and given drugs and alcohol. They may also be groomed and exploited online. Some children and young people are trafficked into or within the UK for the purpose of sexual exploitation. Sexual exploitation can also happen to young people in gangs.

Possible indicators of sexual abuse

- Emotional distress
- Itching, soreness, bruises or lacerations
- Certain types of soiling on clothing
- Mood changes
- Change in usual behaviour
- Expressions of feelings of guilt or shame
- Difficulty in walking or sitting
- Disturbed sleep patterns.
- Unexplained gifts and changes in mood
- Going missing

Neglect/Self Neglect

Neglect is a passive form of abuse in which a person is responsible to provide care for a victim who is unable to care for him or herself, but fails to provide adequate care. Neglect may include the failure to provide sufficient supervision, nourishment, or medical care, or the failure to fulfil other needs for which the victim is helpless to provide for him or herself.

- Malnutrition
- Untreated medical problems
- Bed sores
- Confusion

- Over-sedation
- Deprivation of meals may constitute “wilful neglect”

Institutional abuse/Organisational

Institutional abuse is the maltreatment of a person (often children or older adults) from a system of power. This can range from acts similar to home-based child abuse, such as neglect, physical and sexual abuse, and hunger, to the effects of assistance programs working below acceptable service standards, or relying on harsh or unfair ways to modify behaviour. Possible indicators of institutional abuse:

- Inflexible and non-negotiable systems and routines
- Lack of consideration of dietary requirements
- Name calling; inappropriate ways of addressing people
- Lack of adequate physical care – an unkempt appearance

Financial abuse or material abuse

Financial abuse (or material abuse) is, for example, illegal or unauthorized use of a person’s property, money, pension book or other valuables (including changing the person's will to name the abuser as heir), often fraudulently obtaining power of attorney, followed by deprivation of money or other property, or by eviction from own home.

Possible indicators of financial abuse

- Unexplained withdrawals from the bank
- Unusual activity in the bank accounts
- Unpaid bills
- Unexplained shortage of money
- Reluctance on the part of the person with responsibility for the funds to provide basic food and clothes etc.
- Fraud
- Theft

Discriminatory Abuse

Discriminatory abuse exists when values, beliefs or culture result in a misuse of power that denies opportunity to some groups or individuals.

Signs and indicators of this would be:

- Poor service that does not meet the adults needs
- verbal abuse and disrespect
- exclusion of people from activities/services

Domestic Violence

Domestic Violence is a type of abuse that could be categorised under all or one of the previous categories

Modern Slavery

Modern slavery is considered a 'hidden' crime as it often takes place without people being aware that it is happening. Below are some key indicators to help raise awareness and enable our citizens to recognise the signs that modern slavery may be taking place plus links to more detailed information.

Modern slavery takes many forms including the trafficking of people, forced labour, servitude and slavery. Children (those aged under 18) are considered victims of trafficking, whether or not they have been coerced, deceived or paid to secure their compliance.

Modern slavery is a global problem that transcends age, gender and ethnicity.

Signs and indicators:

- Unable to travel alone
- Physical or psychological abuse
- Malnutrition
- Few or no personal belongings
- Avoid eye contact and appear frightened of strangers

Child Exploitation – CE

Employees may identify customers who are subject to or at risk of CE. However, some children/young people may be at higher risk of this e.g. care leavers, homeless young people. At times, these young people may lead chaotic lives and some engage in risky behaviour. However, no child or young person is ever responsible for the abuse to which they are subjected.

If staff/volunteers become aware of a child/young person who may be at risk of CE, they should report this to their manager in the first instance. Indicators may include:

- a. Missing from home for periods of time
- b. Regularly missing school/education
- c. Appearing with unexplained gifts
- d. Associating with other young people involved in CE
- e. Having older boyfriends/girlfriends

Helping Angels work in partnership with number of local agencies. Employees should refer to this Safeguarding Policy and report concerns immediately to their manager or designated Safeguarding Lead.

Safeguarding and Social Media

Social Media Guidance for staff working with children and young people

What do we mean by Social Media?

'Social media' in this document means any electronic communication that enables people to stay in touch online. This includes apps in which you and others contribute to both shared and private conversations with organisations, communities and individuals.

Background

Social media has become an important part of everyday life. It is an exciting and engaging way of keeping in touch with friends and family, as well as people, groups and brands beyond daily life. Social media at Helping Angels covers both private conversations (e.g. WhatsApp) and public conversations (e.g. Facebook). Although these are obviously very different types of communications, our safeguarding responsibilities apply to both cases. Many of the children and young people in our care expect to use social media as a default method of communication – even more than talking face to face or on the phone. As we have started using social media more regularly, the number of stories about inappropriate use of technology, grooming behaviour and an inability to challenge colleagues has grown, which means that we need clear practice guidance for our workforce around safer working practice in this area.

Individuals who work with children and young people, or adults who are their parents and carers, whether in a voluntary or paid capacity, must always keep their professional role in mind regardless of the method of communication with a child.

All communications with a child, regardless of how they take place, should be considered to carry the same weight. As a professional supporting a child or young person, you should ensure you document online conversations, chats or interventions as well as you would through any other channel, for instance face-to-face or phone conversations. All communications with a child or young person, regardless of channel, must be recorded in their care record.

What happens if a Helping Angels person abuses their access to social media?

This guidance refers to best, safe and poor practice regarding the use Social Media. Helping Angels Safeguarding Code of Conduct outlines the behaviour expected of all staff, workers and volunteers, and treats any breach the same whether it is online or offline.

Inappropriate use of social media may breach Helping Angels Safeguarding Code of Practice, IT Code of Practice and Data Protection Policy and could put the lives or livelihoods of children at risk. Failure to use social media appropriately may result in disciplinary action being taken, up to, and including dismissal, or result in the

termination of an individual's working agreement or involvement as a volunteer with Helping Angels as appropriate.

In certain circumstances breaches may also result in reports to Regulatory bodies, relevant Local Authorities and/or the police, as appropriate.

Make sure you are confident in your use of social media before you begin, and never feel pressured to communicate with children, customers, families or other professionals through any channel that you are not personally comfortable with.

Code of conduct for Staff and Volunteers

It is important that all adults working with children and vulnerable adults understand that the nature of their work and the responsibilities related to it and as such, places them in a position of trust.

Working to the code of conduct is essential practice for Helping Angels and its employees, the following code conduct compliment our existing code of conduct policies.

1. Always remember that while you are caring for other people's children you are in a position of trust and your responsibilities to them and the organisation must be uppermost in your mind at all times.
2. Never use any kind of physical punishment or chastisement such as smacking or hitting.
3. Do not smoke in front of any child or young person.
4. Do not use unprescribed drugs or be under the influence of alcohol.
5. Never behave in a way that frightens or demeans any child or young person.
6. Do not use any racist, sexist, discriminatory or offensive language.
7. Do not give your personal contact details / personal website details to children, parents and carers.
8. Do not use internet or web-based communication channels to send personal messages to/ befriend children.
9. The use of mobile phones or any other devices to take images of children must be carefully managed. You should always check if photographic consent has been authorised and recorded. Do not take images on your own mobile phones.
10. Generally you should not give children presents or personal items. The exceptions to this would be a custom such as buying children a small birthday token or leaving present or help to a family in need such as equipment to enable them to participate in an activity. Similarly do not accept gifts yourself other than small tokens for appropriate celebrations, which you should report within the gift reporting book.
11. You should not invite a child to your home or arrange to see them outside the set activity times. Should the need arise to invite a child into your home then a

discussion with a senior manager must be conducted in order to ensure this is the most appropriate action.

12. You should not engage in any sexual activity (this would include using sexualised language) with a child you meet through your duties or start a personal relationship with them, this would be an abuse of trust.
13. Exercise caution about being alone with a child. In situations where this may be needed (for example where a child wants to speak in private) think about ways of making this seem less secret for example by telling another worker or volunteer what you are doing and where you are, leaving a door ajar, being in earshot of others and lastly note the conversation in the daily log.
14. Physical contact should be open and initiated by the child's needs, e.g. for a hug when upset or help with toileting. Always prompt children to carry out personal care themselves and if they cannot manage ask if they would like help.
15. Do talk explicitly to children about their right to be kept safe from harm.
16. Do listen to children and take every opportunity to raise their self-esteem.
17. Do work as a team with your co-workers/volunteers. Agree with them what behaviour you expect from children and be consistent in enforcing it.
18. If you have to speak to a child about their behaviour remember you are challenging 'what they did' not 'who they are'.
19. Do make sure you have read the Safeguarding children procedure and that you feel confident that you know how to recognise when a child may be suffering harm, how to handle any disclosure and how to report any concerns.
20. Do seek advice and support from your colleagues, activity leaders or supervisors and your Designated Safeguarding Lead (DSL).
21. Do seek opportunities for training such as that available through your team leader or highlighting your training needs during supervisions.

Prevent Policy

1. Radicalisation is comparable to other forms of exploitation and is therefore considered a safeguarding issue that all staff must be aware of. The process for escalating concerns and procedures regarding how to make a referral to the relevant authorities on this specific matter follow below.

2. The emphasis is upon supporting vulnerable children, young people, and adults. There is no expectation that Helping Angels will take on a surveillance or enforcement role as a result of fulfilling our Prevent duty. The Prevent Concern promotes a multiagency approach, Helping Angels will continue to work alongside Local Safeguarding Children Boards and partner agencies.

3. A **Prevent Concern** does not have to be proven beyond reasonable doubt; it should be based on something that raises concerns, which is assessed by using professional judgement.

4. **Extremism** is defined in the Prevent Strategy 2011 as vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty, and mutual respect and tolerance of different faiths and beliefs.

5. **The Terrorism Act 2000 defines terrorism** as an act that endangers or causes serious violence to a person/people and/or damage to property; or seriously interferes with or disrupts an electronic system.

6. **Radicalisation** is defined as the process by which people come to support terrorism and violent extremism and, in some cases, to then participate in terrorist groups.

Radicalisation should be considered as an 'additional vulnerability' under Chapter 11 of the Working Together to Safeguard Children Guidance (2010). There is no obvious profile of a person likely to become involved in extremism or a single indicator of when a person might move to adopt violence in support of extremist ideas.

Indicators for vulnerability to radicalisation can be similar to those for other forms of abuse and may particularly include:

- Distance from cultural heritage
- Experience of migration
- Experience of racism and discrimination
 - Family members or friends associated with extremist groups
 - Family tensions
- Sense of isolation and feelings of failure

It is important to note that not all individuals at risk of radicalisation and acts of terrorism are susceptible or vulnerable and they may be acting out of choice.

Risk Assessments: The level of risk will vary across different parts of the UK. Local Safeguarding Children Boards, Children's Services, Early Years Centres, and Employment Training and Skills practitioners should ensure they are informed of the particular risks in their areas and work with other agencies in assessing risks where appropriate.

Training will be provided proportionately for all relevant staff dependent upon their role and links to front line service delivery. The approach to training will be to adopt a 'Train the Trainer' model to ensure staff and volunteer's knowledge and changes in practices within and across the organisation.

Making a Report

Action: An employee/volunteer may have concerns as a result of:

- A direct disclosure
- An observation
- An expression of concern or complaint made by another person

If you suspect that a child/adult at risk is at immediate risk or actually engaged in the planning or implementing of an act of terrorism, take the following course of action immediately: a) Contact your line manager or Designated Safeguarding Lead.

Action: Line Manager/DSL Ensure any reported Prevent Concerns are managed in accordance with these procedures and where necessary escalated to the relevant authorities.

Dealing with Disclosures

Children and vulnerable adults rarely disclose a secret if they have decided not to. Therefore, if a child or vulnerable adult has revealed to you that they have been or are being abused, it is a sign they trust you and speaking to you will be helpful.

Children and vulnerable adults can disclose abuse at any time. It may be the abuse happened and ended years ago or that the abuse continues to happen. Many children and vulnerable adults do not disclose abuse at all during childhood.

Disclosures can be stressful for the child and vulnerable adult and for you as a professional; however there are points to remember:

Give them your full attention - They may not always choose the best location to disclose abuse so think about moving to a quieter place so you can hear them. Let them know you want to give them your full attention. Respect their wishes about the best place as some places may trigger memories (i.e. Being alone with an adult in an isolated area)

Maintain a calm appearance - A disclosure can be overwhelming and distressing to hear but it is important to stay calm and patient.

Don't be afraid of saying the wrong thing - Try not be distracted by needing to know the 'right' thing to say. As long as you listen to the child they will benefit from talking to you.

Reassure - Give reassurance to the child that they have done the right thing.

Let the child use their own words – it is important NOT to make assumptions. Just listen to what they are telling you and do not interrupt a child who is recalling.

Don't examine marks or injuries and DO NOT take photographs – leave this to the police

Explain what you will do next – it is important they understand. Advise the child that for them to be safe they will need to talk to another person about their experience but that you will be there to support them.

Do not ask them to write anything down – you need to take notes AFTER the meeting and not during but do not ask a child to sign anything

Remember, you are not expected to investigate what the child has told you, this is the role of a Social Worker and Police Officer – you must report what the child has told you, to the Helping Angels Designated Safeguarding Officer

How to report a concern

If a client discloses to you/ shows you an injury you should always follow the TED questioning approach.

Tell me

Explain

Describe

For example:

- Tell me what you mean

- Explain how this happened

- Describe how they did this

If a Concern is reported to you follow our safeguarding flow chart shown in Appendix 1. Along with the following the flow chart you are expected to fill in the concern form shown in Appendix 2. This concern form should be filled in with any concern in writing and given to your manager that day or at least within 24 hours but should be reported by phone immediately as stated in the flow chart. All staff will have these forms available in their staff packs if not these are available from the office.

If your concern is about a member of staff this should immediately be taken to the Registered care manager who will discuss this with HR or the Local Authority Designated officer.

Private fostering

There is a mandatory duty to inform the local authority of children in private fostering arrangements.

Restrictive Practice

This is referring to physical restraint, devices (harnesses/wheelchairs/leg restraint) medication or seclusion (time out).

Restrictive practice must always be legally and ethically justified. It must be necessary to prevent serious harm. We would only use Restrictive practice if this was mentioned in an adults or children's care plans. For more information about this please refer to our Challenging behaviour policy.

Safe Recruitment

See our Safer Recruitment policy for how we make sure that all staff are safe to work with children. We follow all guidelines stated in the Protection of Freedoms Act and DBS all employees every three years.

Other Related acts that go in conjunction with this policy:

Children and Social Work 2017

The Care Act 2014

Children Act 1989 and 2004

Safeguarding Vulnerable groups act 2006

Protection of Freedoms Act 2014

Children and Families Act 2014 – This introduced the EHC.

Adoption and Children Act 2012 & 2006

Female Genital Mutilation Act 2003

Children and Young person's 2008

Working Together to safeguard children

Mental Capacity Policy and Deprivation of Liberty Safeguards (DoLS)

The Care Quality Commission (CQC)

The Human Rights Act 1998

The Mental Health Act 2005

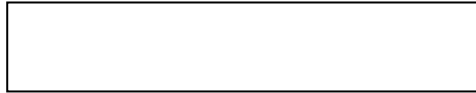
The Data Protection Act

The Equality Act 2010

Protection of Freedom Act

**IF YOU ARE UNSURE REPORT IT, SEEK ADVICE AND GUIDANCE
IMMEDIATELY**

Appendix 1



**Designated
Safeguarding Lead:**

Lyndsey Ellis

Natasha Gratton

Concerns should be reported immediately to your lead member of staff and followed up with a written report within 24 hours. This written report should always be passed onto the designated lead to store confidentially.

If a Child/Adult is in immediate danger ring 999



The lead worker will ring the concern through to the designated lead if further action is required.



Decision made to monitor concern

Decision made to discuss the concern informally with the parents/carers



Clients main Pa's asked to monitor the child/adult and feedback to Designated safeguarding Lead within an agreed timescale

Once discussed with parent Designated Safeguarding Lead decides to discuss with parents, monitor or refer to social care



Designated safeguarding Lead keeps concern form in secure, confidential safeguarding file.



In exceptional circumstances, anyone may report concerns directly to social care:

Adult Social Care Stoke – 08005610015

Adult social care Staffordshire 03456042719 – Emergency 03456042886

Stoke Children's care 01782 235100

Staffordshire childrens care- 08001313126

Emergency 03456042886

Nspcc Whistleblowing helpline: 08000280285

Police 101

Nature of concern/disclosure

Please include where you were when the child made a disclosure, what you saw, who else was there, what did the child say or do and what you said.

Time & date of incident:

Was there an injury? Yes / No

Did you see it? Yes / No

Describe the injury:

Have you filled in a body map to show where the injury is and its approximate size?
Yes / No

Was anyone else with you? Who?

Has this happened before?

Did you report the previous incident?

Who are you passing this information to?

Name:

Position:

Your signature:

Time form completed:

Date:

Time and Date form received by DSL:

Action taken by DSL:

Action Taken time and date:

Action Taken time and date:

Parents informed? Yes / No (If No, state reason)

Feedback given to...?

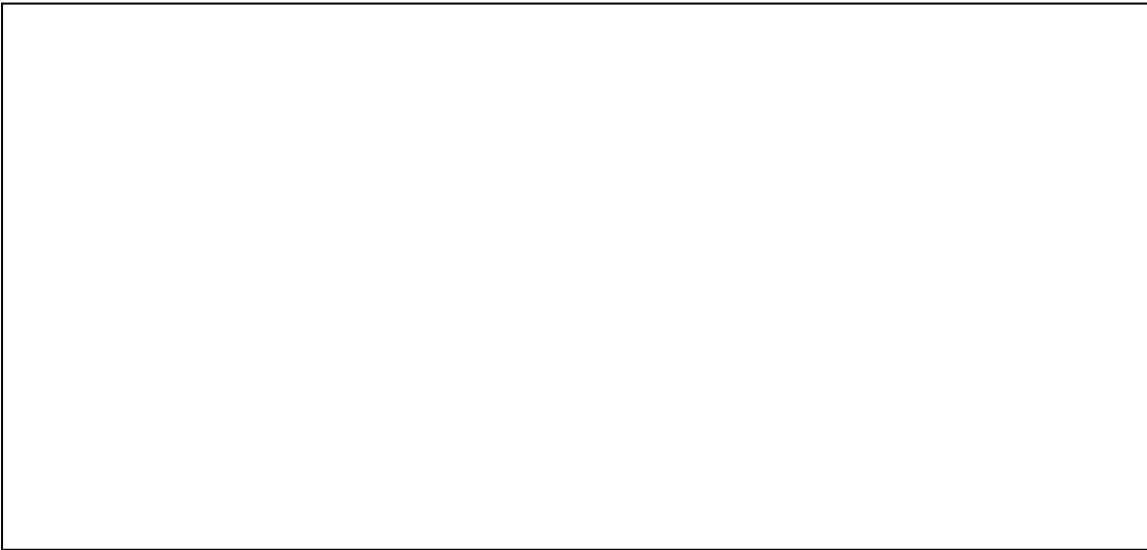
Carer disclosure

Designated Lead

Member/Volunteer

Person who recorded

Further Action Agreed:



Full name:
DSL Signature:
Date:

Any other information:

