

# OUGHTIBRIDGE CHAPEL SAFEGUARDING POLICY

This document is based upon the Thirtyone:eight Safeguarding Sample Policy and must not be copied without their permission. This policy applies to all activities managed by Oughtibridge Chapel (O.C.), regardless of location. It does not apply to activities managed by other organisations or individuals who use O.C. premises but for whom O.C. is not responsible.

## Section 1

### Details of the place of worship / organisation

Name of Place of Worship / Organisation:

Oughtibridge Chapel (Oughtibridge Wesleyan Reform Chapel)

Address:

Church Street, Oughtibridge, S35 0FU

Tel No:

NA

Email address:

Oughtibridgechapel@gmail.com

Child Safeguarding Coordinator Name:

Pam Smith

Contact Telephone / Email:

07946 242445

glynnngpat@hotmail.co.uk

Adult Safeguarding Coordinator Name:

Angela Howard

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07741 453899

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Deputy Safeguarding Coordinator Name:

Jo Brook

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07703 794195

mattjobrook@gmail.com

Membership of Denomination/Organisation:

The Wesleyan Reform Union

Charity Number:

1132720

Insurance Company:

Congregational

## Our commitment

As a Leadership we aim to follow biblical principles in all we do. We recognise the need to provide a safe and caring environment for children, young people and adults. We acknowledge that children, young people and adults can be the victims of physical, sexual and emotional abuse, and neglect. We accept the UN Universal Declaration of Human Rights and the International Covenant of Human Rights, which states that everyone is entitled to “all the rights and freedoms set forth therein, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status”. We also concur with the Convention on the Rights of the Child which states that children should be able to develop their full potential, free from hunger and want, neglect and abuse. They have a right to be protected from “all forms of physical or mental violence, injury or abuse, neglect or negligent treatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s), or any other person who has care of the child.” As a Leadership we have therefore adopted the procedures set out in this safeguarding policy in accordance with statutory guidance. We are committed to build constructive links with statutory and voluntary agencies involved in safeguarding.

The policy and Oughtibridge Chapel specific good practice guidelines are based on the ten **Safe and Secure** safeguarding standards published by thirtyone:eight.

The Leadership undertakes to:

- endorse and follow all national and local safeguarding legislation and procedures, in addition to the international conventions outlined above.
- provide on-going safeguarding training for all its workers and to ensure that the specific good practise guidelines are regularly reviewed.
- endeavour that the premises meet the requirements of the Equality Act 2010 and all other relevant legislation, and that it is welcoming and inclusive.
- support the Safeguarding Coordinator(s) in their work and in any action they may need to take in order to protect children and adults with care and support needs.

## Section 2 Prevention

### Understanding abuse and neglect

Defining child abuse or abuse against an adult is a difficult and complex issue. A person may abuse by inflicting harm or failing to prevent harm. Children and adults in need of protection may be abused within a family, an institution or a community setting. Very often the abuser is known or in a trusted relationship with the child or adult.

In order to safeguard those in our places of worship and organisations we adhere to the UN Convention on the Rights of the Child and have as our starting point as a definition of abuse, Article 19:

*1. States Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child.*

*2. Such protective measures should, as appropriate, include effective procedures for the establishment of social programmes to provide necessary support for the child and for those who have the care of the child, as well as for other forms of prevention and for identification, reporting, referral, investigation, treatment and follow-up of instances of child maltreatment described heretofore, and, as appropriate, for judicial involvement.*

Also for adults the UN Universal Declaration of Human Rights with particular reference to Article 5: *No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment.*

Detailed definitions, and signs and indicators of abuse ([Appendix 1-4](#)), as well as how to respond to a disclosure of abuse, are included here in our policy.

### Safer recruitment

The Leadership will, through our Safer Recruitment Policy, ensure all workers working in regulated activity will be appointed, trained, supported and supervised in accordance with government guidance on safe recruitment. This includes ensuring that:

- There is a written job description / person specification for the post
- Those applying have completed an application form and a self declaration form
- Those short listed have been interviewed
- Safeguarding has been discussed at interview
- Written references have been sought, and followed up where appropriate

- A disclosure and barring check has been completed where necessary (we will comply with DBS Code of Practice requirements concerning the fair treatment of applicants and the handling of information)
- Qualifications where relevant have been verified
- A suitable training programme is provided for the successful applicant
- The applicant has been given a copy of the organisation's safeguarding policy and knows how to report concerns.

### **Safeguarding training**

The Leadership is committed to on-going safeguarding training and development opportunities for all workers, developing a culture of awareness of safeguarding issues to help protect everyone. All our workers will receive an Induction Sheet and safeguarding training on a regular basis.

The Leadership will also ensure that children and adults with care and support needs are provided with information on where to get help and advice in relation to abuse, discrimination, bullying or any other matter where they raise a concern.

### **Management of Workers – Codes of Conduct**

As a Leadership we are committed to supporting all workers and ensuring they receive support and supervision. All workers, working in regulated activity, have been issued with a code of conduct towards children, young people and adults with care and support needs.

### **Section 3**

#### **Practice Guidelines**

As an organisation / place of worship working with children, young people and adults with care and support needs we wish to operate and promote good working practice. This will enable workers to run activities safely, develop good relationships and minimise the risk of false or unfounded accusation.

As well as a general code of conduct (see Code of Conduct) for workers we also have specific good practice guidelines for every activity we are involved in with children, young people and adults with care and support needs, these are kept in the Safeguarding Folder in the First Aid Cupboard. Please refer to the guidelines for the activity you are involved in. We also have a First Aid Policy and Accident and Incident Forms available.

#### **Working in Partnership**

The diversity of organisations and settings means there can be great variation in practice when it comes to safeguarding children, young people and adults. This can be because of cultural tradition, belief and religious practice or understanding, for example, of what constitutes abuse.

We therefore have clear guidelines in regards to our expectations of those with whom we work in partnership, whether in the UK or not. We will discuss with all partners our safeguarding expectations and have a partnership agreement for safeguarding. It is also our expectation that any organisation using our premises, as part of the letting agreement will have their own policy.

We believe good communication is essential in promoting safeguarding, both to those we wish to protect, to everyone involved in working with children and adults and to all those with whom we work in partnership. This safeguarding policy is just one means of promoting safeguarding.

## Section 4

### Responding to allegations of abuse

#### **If you have concerns about possible abuse (including allegations):**

1. In an emergency, call emergency services 999.
2. If you have concerns always consult with children's or adult care services.
3. Always inform the appropriate Safeguarding Officer.
4. Keep a record of what happened, your concerns and your actions.

#### **If a child, young person or adult wishes to disclose they have been abused:**

- Listen carefully if someone is telling you about abuse – physical, sexual, emotional or neglect
- Don't ask questions – it could prevent them from saying more or you might put things in their mind that were not already there
- Show acceptance of what you are told – even if it seems unlikely or too awful to be true. Reassure the person that they have done the right thing in telling you and you are taking the information seriously
- Don't promise to keep the matter secret but explain that you may have to share what they say with others on a 'need to know' basis only. It will be the named people in your safeguarding policy.
- Explain what you intend to do and don't delay in taking action
- Ensure the immediate safety of the individual
- Write notes stating what the person said, what you said in response, and an explanation of how the conversation took place. Include the date, time and your signature
- Consider medical intervention if required.
- Keep the notes, even if typed up, as they could be used as material evidence in court
- If the concern is about what has been observed, for example bruises, marks, suspicions of neglect or sexually explicit/abusive behaviour, then it is important to write a full account of what was seen. Include:
  - Size, shape, colour, position on the body of any bruises or marks, consider taking a picture unless location of that picture is inappropriate
  - Person's appearance e.g. ragged or dirty clothing, smell, emaciated body, pain or difficulty in moving
  - Description of sexually explicit or abusive behaviour
  - The date and time of your report and your signature.

Under no circumstances should a volunteer or worker carry out their own investigation into an allegation or suspicion of abuse.

Follow procedures as below:

- Document the concern using the Cause For Concern Form
- The person in receipt of allegations or suspicions of abuse should report concerns as soon as possible to The Adult/Child Safeguarding Co-ordinator. (See Policy Front page for details)

The Safeguarding Co-ordinators are nominated by the Leadership Team to act on their behalf in dealing with the allegation or suspicion of neglect or abuse, including referring the matter on to the statutory authorities.

- In the absence of the Safeguarding Co-ordinator or, if the suspicions in any way involve the Safeguarding Co-ordinator, then the report should be made to The Safeguarding Deputy. (See Policy Front page for details)

If the suspicions implicate both the Safeguarding Co-ordinator and the Deputy, then the report should be made in the first instance to:

Children : Sheffield Children Safeguarding Partnership 0114 2734855  
Outside office hours calls will be responded to by the Emergency Duty Service.  
LADO 0114 273 4850 or mobile 07814 382 424

Adults : Sheffield Adult Safeguarding Partnership  
0114 273 4908 0114 273 6870

**In emergencies contact the police if a child or an adult with care or support needs is in immediate danger.**

- The Safeguarding Co-ordinator should contact the appropriate agency or they may first ring the thirtyone:eight helpline for advice. They should then contact social services in the area the child or adult lives.

Children : Sheffield Children Safeguarding Partnership 0114 2734855  
Outside office hours calls will be responded to by the Emergency Duty Service.  
LADO 0114 273 4850 or mobile 07814 382 424

Adults : Sheffield Adult Safeguarding Partnership  
0114 273 4908 0114 273 6870

- The Safeguarding Co-ordinator may need to inform others depending on the circumstances and/or nature of the concern
  - Chair or trustee responsible for safeguarding who may need to liaise with the insurance company or the charity commission to report a serious incident.
  - Designated officer or LADO (Local Authority Designated Officer) if the allegation concerns a worker or volunteer working with someone under 18.

- Suspicions must not be discussed with anyone other than those nominated above. A written record of the concerns should be made in accordance with these procedures and kept in a secure place. (see Cause for Concern Form)
- Whilst allegations or suspicions of abuse will normally be reported to the Safeguarding Co-ordinator, the absence of the Safeguarding Co-ordinator or Deputy should not delay referral to Social Services, the Police or taking advice from thirtyone:eight.
- The Leadership will support the Safeguarding Co-ordinator/Deputy in their role and accept that any information they may have in their possession will be shared in a strictly limited way on a need to know basis.
- It is, of course, the right of any individual as a citizen to make a direct referral to the safeguarding agencies or seek advice from thirtyone:eight, although the Leadership hope that members of the place of worship / organisation will use this procedure. If, however, the individual with the concern feels that the Safeguarding Co-ordinator/Deputy has not responded appropriately, or where they have a disagreement with the Safeguarding Co-ordinator(s) as to the appropriateness of a referral they are free to contact an outside agency direct. We hope by making this statement that the Leadership demonstrate its commitment to effective safeguarding and the protection of all those who are vulnerable.

The role of the safeguarding co-ordinator/ deputy is to collate and clarify the precise details of the allegation or suspicion and pass this information on to statutory agencies who have a legal duty to investigate.

#### **Detailed procedures where there is a concern about a child:**

##### **Allegations of physical injury, neglect or emotional abuse.**

If a child has a physical injury, a symptom of neglect or where there are concerns about emotional abuse, the Safeguarding Co-ordinator/Deputy will:

- Contact Children's Social Services (or thirtyone:eight) for advice in cases of deliberate injury, if concerned about a child's safety or if a child is afraid to return home.
- Not tell the parents or carers unless advised to do so, having contacted Children's Social Services.
- Seek medical help if needed urgently, informing the doctor of any suspicions.
- For lesser concerns, (e.g. poor parenting), encourage parent/carer to seek help, but not if this places the child at risk of significant harm.



- Where the parent/carer is unwilling to seek help, offer to accompany them. In cases of real concern, if they still fail to act, contact Children's Social Services direct for advice.
- Seek and follow advice given by thirtyone:eight (who will confirm their advice in writing) if unsure whether or not to refer a case to Children's Social Services.

### **Allegations of sexual abuse**

In the event of allegations or suspicions of sexual abuse, the Safeguarding Co-ordinator/Deputy will:

- Contact the Children's Social Services Department Duty Social Worker for children and families or Police Child Protection Team direct. They will NOT speak to the parent/carer or anyone else.
- Seek and follow the advice given by thirtyone:eight if for any reason they are unsure whether or not to contact Children's Social Services/Police. Thirtyone:eight will confirm its advice in writing for future reference.

### **Detailed procedures where there is a concern that an adult is in need of protection**

If there is concern about: Suspicions or allegations of abuse or harm including; physical, sexual, organisational, financial, discriminatory, neglect, self-neglect, forced marriage, modern slavery, domestic abuse, emotional and psychological, the Safeguarding Co-ordinator/Deputy will:

- Contact the Adult Social Care Team who have responsibility under the Care Act 2014 to investigate allegations of abuse. Alternatively thirtyone:eight can be contacted for advice.
- If the adult is in immediate danger or has sustained a serious injury contact the Emergency Services, informing them of any suspicions.

If there is a concern regarding spiritual abuse, Safeguarding Co-ordinator will:

- Identify support services for the victim i.e. counselling or other pastoral support
- Contact thirtyone:eight and in discussion with them will consider appropriate action with regards to the scale of the concern.

## **Allegations of abuse against a person who works with children/young people**

If an accusation is made against a worker (whether a volunteer or paid member of staff) whilst following the procedure outlined above, the Safeguarding Co-ordinator, in accordance with Local Safeguarding Children Board (LSCB) procedures will:

- Liaise with Children's Social Services in regards to the suspension of the worker
- Make a referral to a designated officer formerly called a Local Authority Designated Officer (LADO) whose function is to handle all allegations against adults who work with children and young people whether in a paid or voluntary capacity.
- Make a referral to Disclosure and Barring Service for consideration of the person being placed on the barred list for working with children or adults with additional care and support needs. This decision should be informed by the LADO if they are involved.

## **Allegations of abuse against a person who works with adults with care and support needs**

The safeguarding co-ordinator will:

- Liaise with Adult Social Services in regards the suspension of the worker
- Make a referral to the DBS following the advice of Adult Social Services

The Care Act places the duty upon Adult Services to investigate situations of harm to adults with care and support needs. This may result in a range of options including action against the person or organisation causing the harm, increasing the support for the carers or no further action if the 'victim' chooses for no further action and they have the capacity to communicate their decision. However, this is a decision for Adult Services to decide not the church.

## **Section 5**

### **Pastoral Care**

#### **Supporting those affected by abuse**

The Leadership is committed to offering pastoral care, working with statutory agencies as appropriate, and support to all those who have been affected by abuse who have contact with or are part of the place of worship/organisation.

#### **Working with offenders and those who may pose a risk**

When someone attending the place of worship / organisation is known to have abused children, is under investigation, or is known to be a risk to adults with care and support needs, the Leadership will supervise the individual concerned and offer pastoral care, but in its safeguarding commitment to the protection of children and adults with care and support needs, set boundaries for that person, which they will be expected to keep. These boundaries will be based on an appropriate risk assessment and through consultation with appropriate parties.

## Adoption of the policy

This policy was agreed by the leadership and will be reviewed annually on:

Signed by: \_\_\_\_\_ Position: \_\_\_\_\_

Signed by: \_\_\_\_\_ Position \_\_\_\_\_

Date: \_\_\_\_\_

### Related Documents:

- Inclusion of people with disabilities policy
- Safer Recruitment Policy
- Induction Sheet
- Code of Conduct
- First Aid Policy
- Anti Bullying Policy
- Cause for Concern Form
- Accident and Incident Form
- Flowcharts for action - Adult and Child
- Activity specific:
  - Good practice Guidelines
  - Risk Assessments

### Appendix (All taken directly from thirtyone:eight):

1. Definitions of abuse – children
2. Definitions of abuse – adult
3. Signs of abuse – children
4. Signs of abuse- adult

## Appendix 1

### Statutory Definitions of Abuse (Children)

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm.

Children may be abused in a family or in an institutional or community setting; by those known to them or, more rarely, by a stranger. They may be abused by an adult or adults or another child or children. Child protection legislation throughout the UK is based on the United Nations Convention on the Rights of the Child. Each nation within the UK has incorporated the convention within its legislation and guidance.

#### England

The four definitions (and a few additional categories) of abuse below operate in England based on the government guidance 'Working Together to Safeguard Children (2018)'.

#### What is abuse and neglect?

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting, by those known to them or, more rarely, by a stranger for example, via the internet. They may be abused by an adult or adults, or another child or children.

**Physical abuse** 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 children 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 the 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 cyberbullying), 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 (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

**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:

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

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

**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

**Extremism** goes beyond terrorism and includes people who target the vulnerable – including the young – by seeking to sow division between communities on the basis of race, faith or denomination; justify discrimination towards women and girls; persuade others that minorities are inferior; or argue against the primacy of democracy and the rule of law in our society.

## Appendix 2

### Definitions of Abuse - Adults

The following information relates to the Safeguarding of Adults as defined in the Care Act 2014, Chapter 14. Safeguarding, this replaces the previous guidelines produced in 'No Secrets' (Department of Health 2000)

The legislation is relevant across England and Wales but on occasions applies only to local authorities in England.

The Safeguarding duties apply to an adult who;

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

Organisations should always promote the adult's wellbeing in their safeguarding arrangements. People have complex lives and being safe is only one of the things they want for themselves. Professionals should work with the adult to establish what being safe means to them and how that can be best achieved. Professional and other staff should not be advocating 'safety' measures that do not take account of individual well-being, as defined in Section 1 of the Care Act.

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

**Link:** Care and Support Statutory Guidance under the Care Act 2014  
<https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance>

This section considers the different types and patterns of abuse and neglect and the different circumstances in which they may take place. This is not intended to be an exhaustive list but an illustrative guide as to the sort of behaviour which could give rise to a safeguarding concern.

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

**Domestic violence** – including psychological, physical, sexual, financial, emotional abuse; so called 'honour' based violence.

**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.

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

**Financial or material abuse** – including 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.

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

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

**Organisational abuse** – including neglect and poor care practice within an Institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's 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.

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

**Self-neglect** – this covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding. Incidents of abuse may be one-off or multiple, and affect one person or more.



## Appendix 3

### Signs of Abuse (Children)

The following signs could be indicators that abuse has taken place but should be considered in context of the child's whole life.

#### Physical

- Injuries not consistent with the explanation given for them
- Injuries that occur in places not normally exposed to falls, rough games, etc
- Injuries that have not received medical attention
- Reluctance to change for, or participate in, games or swimming
- Repeated urinary infections or unexplained tummy pains
- Bruises on babies, bites, burns, fractures etc which do not have an accidental explanation\*
- Cuts/scratches/substance abuse\*

#### Sexual

- Any allegations made concerning sexual abuse
- Excessive preoccupation with sexual matters and detailed knowledge of adult sexual behaviour
- Age-inappropriate sexual activity through words, play or drawing

Child who is sexually provocative or seductive with adults

- Inappropriate bed-sharing arrangements at home
- Severe sleep disturbances with fears, phobias, vivid dreams or nightmares, sometimes with overt or veiled sexual connotations
- Eating disorders - anorexia, bulimia\*

#### Emotional

- Changes or regression in mood or behaviour, particularly where a child withdraws or becomes clinging.
- Depression, aggression, extreme anxiety.
- Nervousness, frozen watchfulness
- Obsessions or phobias
- Sudden under-achievement or lack of concentration
- Inappropriate relationships with peers and/or adults
- Attention-seeking behaviour
- Persistent tiredness
- Running away/stealing/lying

#### Neglect

- Under nourishment, failure to grow, constant hunger, stealing or gorging food, Untreated illnesses, Inadequate care, etc

\*These indicate the possibility that a child or young person is self-harming. Approximately 20,000 are treated in accident and emergency departments in the UK each year.

## **Appendix 4**

### **Signs of Abuse (Adults)**

#### **Physical abuse**

History of unexplained falls, fractures, bruises, burns, minor injuries.

Signs of under or over use of medication and/or medical problems left unattended.

Any injuries not consistent with the explanation given for them

Bruising and discolouration - particularly if there is a lot of bruising of different ages and in places not normally exposed to falls, rough games etc.

Recurring injuries without plausible explanation

Loss of hair, loss of weight and change of appetite

Person flinches at physical contact &/or keeps fully covered, even in hot weather;

Person appears frightened or subdued in the presence of a particular person or people

#### **Domestic violence**

Unexplained injuries or 'excuses' for marks or scars

Controlling and/or threatening relationship including psychological, physical, sexual, financial, emotional abuse; so called 'honour' based violence and Female Genital Mutilation.

Age range extended to 16 yrs

#### **Sexual abuse**

Pregnancy in a woman who lacks mental capacity or is unable to consent to sexual intercourse

Unexplained change in behaviour or sexually explicit behaviour

Torn, stained or bloody underwear and/or unusual difficulty in walking or sitting

Infections or sexually transmitted diseases

Full or partial disclosures or hints of sexual abuse:

Self-harming

Emotional distress

Mood changes

Disturbed sleep patterns

Psychological abuse

Alteration in psychological state e.g. withdrawn, agitated, anxious, tearful

Intimidated or subdued in the presence of a carer

Fearful, flinching or frightened of making choices or expressing wishes

Unexplained paranoia

Changes in mood, attitude and behaviour, excessive fear or anxiety

Changes in sleep pattern or persistent tiredness

Loss of appetite

Helplessness or passivity

Confusion or disorientation

Implausible stories and attention seeking behaviour

Low self-esteem

### **Financial or material abuse**

Disparity between assets and living conditions  
Unexplained withdrawals from accounts or disappearance of financial documents or loss of money  
Sudden inability to pay bills, getting into debt  
Carers or professionals fail to account for expenses incurred on a person's behalf  
Recent changes of deeds or title to property  
Missing personal belongings  
Inappropriate granting and / or use of Power of Attorney

### **Modern slavery**

Physical appearance; unkempt, inappropriate clothing, malnourished  
Movement monitored, rarely alone, travel early or late at night to facilitate working hours.  
Few personal possessions or ID documents.  
Fear of seeking help or trusting people.

### **Discriminatory abuse**

Inappropriate remarks, comments or lack of respect  
Poor quality or avoidance care  
Low self-esteem  
Withdrawn  
Anger  
Person puts themselves down in terms of their gender or sexuality  
Abuse may be observed in conversations or reports by the person of how they perceive themselves

### **Institutional Abuse**

Low self-esteem  
Withdrawn  
Anger  
Person puts themselves down in terms of their gender or sexuality  
Abuse may be observed in conversations or reports by the person of how they perceive themselves  
No confidence in complaints procedures for staff or service users.  
Neglectful or poor professional practice.

### **Neglect and acts of omission**

Deteriorating despite apparent care  
Poor home conditions, clothing or care and support.  
Lack of medication or medical intervention

### **Self-neglect**

Hoarding inside or outside a property  
Neglecting personal hygiene or medical needs  
Person looking unkempt or dirty and has poor personal hygiene  
Person is malnourished, has sudden or continuous weight loss and is dehydrated – constant hunger, stealing or gorging on food  
Person is dressed inappropriately for the weather conditions  
Dirt, urine or faecal smells in a person's environment  
Home environment does not meet basic needs (for example not heating or lighting)  
Depression