



Safeguarding Policy And Procedures

Version 18 – updated August 2025

Next Policy review date December 2026

This document is based on a Model Safeguarding Policy supplied by the Thirtyone:eight.

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1 Safeguarding Policy

1.1 Details of the Place of Worship

Name : Emmanuel Christian Centre (hereafter ECC)
Address : Mill Street, Ulverston, Cumbria, LA12 7EB
Tel No : 01229 586136
Email address : admin@emmanuelcc.org.uk

Denomination : Member of Churches in Communities International (CiC)
Charity Number : 1052196
Insurance Company : Congregational & General
Insurance Type : Employers' and Public Liability and Legal Cover

The following is a brief description of our place of worship and the type of activities we undertake with children/vulnerable adults:

The objects of the church are for the benefit of the public:

- (A) To advance the Christian faith in accordance with the statement in such ways and in such parts of the United Kingdom or the world as the Church Council (CC) from time to time may think fit;
- (B) To relieve sickness and financial hardship and to promote and preserve good health by the provision of funds, goods or services of any kind including through the provision of counselling and support in such parts of the United Kingdom or the world as the CC from time to time may think fit; and
- (C) To advance education in such ways and in such parts of the United Kingdom or the world as the CC from time to time may think fit.

What

- General charitable purposes
- Education/training
- Relief of poverty
- Overseas aid/famine relief
- Religious activities
- Other charitable purpose

Who

- Children/young people
- Elderly/old people
- People of a particular ethnic/racial origin
- Other charities/voluntary bodies
- General public/mankind

How

- Makes grants to individuals
- Makes grants to organisations
- Provides other finance
- Provides buildings/facilities/open space
- Provides services
- Other charitable activities

1.2 Our Commitment

As the Church Council (CC) we recognise the need to provide a safe and caring environment for children, young people and vulnerable adults. We acknowledge that children, young people and vulnerable 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 the CC 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 attached practice guidelines are based on the 10 Safeguarding Standards published by Thirtyone:eight.

The CC undertakes to:

- endorse and follow all national and local safeguarding legislation and procedures, in addition to the international conventions outlined above.
- provide safeguarding training for all its workers and will regularly review the operational guidelines attached.
- ensure 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 in their work and in any action needed in order to protect children and adults with care and support needs.

The CC agrees not to allow the document to be copied by other organisations.

2 Safeguarding Awareness Training

The CC is committed to 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 safeguarding training and refresher training.

The CC will also ensure that children and adults with care and support needs are provided with information, via a poster on the notice boards, on where to get help and advice in relation to abuse, discrimination, bullying or any other matter where they have a concern.

3 Safe Recruitment

The CC will ensure all workers will be appointed, trained, supported and supervised in accordance with government guidance on safe recruitment. This includes ensuring:

- Those applying have completed an application form and self-declaration form
- Those short listed have been interviewed
- Safeguarding has been discussed at the interview
- Written references have been obtained and followed up where appropriate
- A disclosure and barring check have been completed where necessary (we will comply with Code of Practice requirements concerning the fair treatment of applicants and the handling of information)
- Qualifications where relevant have been verified
- Suitable training programme is provided for the successful applicant as detailed in Section 2 – Safeguarding Awareness
- The applicant has completed a probationary period
- The applicant has access to a copy of the organisation's safeguarding policy and knows how to report concerns

4 Management of Workers

The following guidelines for standards of behaviour towards children, young people and vulnerable adults has been drawn which all workers agree to follow. This is achieved by:

- Making workers aware of the expected standards of behaviour and allowing them to feel supported in areas of safeguarding.
- The organisation allowing all workers to raise concerns or issues that are either work related or personal.
- The CC meeting regularly to discuss all relevant matters regarding the organisation.

5 Working Safely

The following code of conduct towards children, young people and vulnerable adults has been drawn which all workers agree to follow. The CC realise it is important there is a culture of dignity and respect towards those being cared for. This is achieved by the following:

- Working in agreement with respect to zero tolerance to bullying, harassment or abuse.
- Working to acceptable adult to child ratios (Appendix. 10) for any activity.
- Maintaining, for all activities aimed at children and vulnerable adults, registers and records which are stored in a safe, locked cupboard, box or similar locked and secure storage
- Appropriately qualified first aiders are listed on notice boards and all accidents are recorded in a logbook where incidents are reported to parents/carers.

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- Ensuring any peer led activities are run according to acceptable safeguarding standards
 - Ensuring that drop-in centres, if operated, are run to best working practice
 - Ensuring all outings are run to best practice and health and safety guidelines where parents/carers complete and sign a consent form for the activity.
 - Anybody transporting children, young people and vulnerable adults on behalf of the charity are (DBS) checked. Transportation consent is included in the General Information and Consent Form
 - In respect of filming and taking photographs of people and the activities, permission is sought through the General Information and Consent Form.
 - The CC support workers in dealing with disruptive children and young people.
 - The CC operate a policy of zero tolerance on illegal substances on the premises or during any Church-related activities.

6 Communicating Effectively

The safeguarding message is communicated and implemented via the following actions and training where applicable:

- The organisation lets people know they have a fundamental right to be protected from abuse.
- A safeguarding poster with names and contact details of the Safeguarding Coordinator, Deputy and CC Chairman will be displayed on the notice boards
- An appropriate Childline poster is displayed on every notice board.
- All workers have been trained to actively listen to those in their care.
- All workers know how to safely communicate using Information Communications Technologies.
- All workers know how to listen appropriately to a disclosure of abuse and then to take the appropriate action.
- The organisation ensures relevant information and resources are readily available.

7 Responding to Concerns

This section outlines how to respond to a child/vulnerable adult who wishes to disclose abuse. If an incident occurs or a worker has a concern, then a Workers Action Sheet should be completed (Appendix 6). Please also refer to Appendix 5 on Effective Listening.

Once the Workers Action Sheet has been completed the procedure is as follows:

NOTE 1: Under no circumstances should a worker carry out their own investigation into an allegation or suspicion of abuse.

NOTE 2: There are specific procedures that **MUST** be followed in the event there is a concern about a child or an adult in need of protection.

7.1 Understanding Abuse and Neglect

Defining child abuse or abuse against a vulnerable 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, institution or community setting. Very often the abuser is known or in a trusted relationship with the child or vulnerable adult.

In order to safeguard those in our organisations we adhere to the UN Convention on the Rights of the Child and quote Article 19 which states:

1. 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 which states: *No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment.*

Detailed definitions, and signs/symptoms of abuse are included in our policy as follows:

Appendix 1: Definitions of abuse for children,

Appendix 2: Definitions of abuse for adults,

Appendix 3: Signs of Possible Abuse (children & young people),

Appendix 4: Signs of Possible Abuse (vulnerable adults)

7.2 Responding to Allegations of Abuse

- The person in receipt of allegations or suspicions of abuse should report concerns as soon as possible to:

Colin Thornhill – Safeguarding Coordinator on 01229 584363

who is nominated by the CC to act on their behalf in dealing with the allegation or suspicion of neglect or abuse, including referring the matter to the statutory authorities.

- In the absence of the Safeguarding Coordinator or, if the suspicions in any way involve the Safeguarding Coordinator, then the report should be made to:

Tracey Murphy – Deputy Safeguarding Coordinator on 07875 278635

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

Thirtyone:eight, PO Box 133, Swanley, Kent, BR8 7UQ on 0303 003 1111 Option 2

- Alternatively contact Social Services or the Police:

**Children's Services, Westmorland and Furness Safeguarding Hub
0300 373 2724**

**Local Adult Social Services, Westmorland and Furness
Office hours 0300 373 3301- out of hours 01228 526690**

Police: 999 for emergency; 101 for non-emergency

- The Safeguarding Co-ordinator should inform others depending on the circumstances and/or nature of the concern:
 - CC Chairman 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 Workers Action Sheet (Appendix 6) and a Safeguarding Coordinator's Action Sheet (Appendix 7) of the concerns should be made in accordance with these procedures and kept in the office safe.
- Whilst allegations or suspicions of abuse will normally be reported to the Safeguarding Coordinator, the absence of the Safeguarding Coordinator or Deputy should not delay referral to Social Services, the Police or taking advice from Thirtyone:eight.

- The CC will support the Safeguarding Coordinator/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 the right of any individual to make a direct referral to the safeguarding agencies or seek advice from Thirtyone:eight; particularly if the individual with the concern feels that the Safeguarding Coordinator/Deputy has not responded appropriately, or where they have a disagreement with the Safeguarding Coordinator(s) as to the appropriateness of a referral.

The role of the Safeguarding Coordinator/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.

7.2.1 Detailed procedures where there is a concern about a child:

7.2.1.1 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 Coordinator/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/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, (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.

7.2.1.2 Allegations of Sexual Abuse

In the event of allegations or suspicions of sexual abuse, the Safeguarding Coordinator/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 if required.

7.2.2 The following procedure will be followed where there is a concern that an adult is in need of protection:

Suspensions or Allegations of abuse or harm including; physical, sexual, organisational, financial, discriminatory, neglect, self-neglect, forced marriage, modern slavery, domestic abuse.

If there is concern about any of the above, 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 ie 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.

7.2.3 Allegations of abuse made against a person who works with children/young person

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 the Multi Agency Safeguarding Hub (MASH) procedures will:

- Liaise with Children's Social Services in regard to the suspension of the worker.
- Make a referral to 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.

7.2.4 Allegations of abuse made 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. Adult Social Services will decide the outcome which may result in a range of options including:

- action against the person or organisation causing the harm
- increasing the support for the carers
- no further action if the 'victim' chooses for no further action and they have the capacity to communicate their decision.

8 Pastoral Care

8.1 Supporting those affected by abuse

The CC is committed to offering pastoral care, working with statutory agencies as appropriate, and offering support to all connected to ECC who have been affected by abuse.

8.2 Working with offenders and those who may pose a risk

When someone attending the place of worship is known to have abused children, is under investigation, or is known to be a risk to adults with care and support needs; the CC 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.

9 Managing those who pose a risk

The CC, Safeguarding Coordinator and Deputy are committed to:

- Understanding the issues surrounding sexual/violent offenders.
- Understanding the issues surrounding 'grooming'.

Understand the principles of sharing information in relation to those who pose a risk.

- Knowing how to manage people who pose a risk.

Knowing how to draw up and manage a written contract with people who pose a risk.

- Knowing how to carry out a risk assessment and implement strategies to manage those who pose a risk.
- Managing both the alleged perpetrator and the victim where they are involved in the same organisation.

Managing an alleged perpetrator where there is some acceptance of responsibility.

- Know who to contact in relation to the treatment of offenders.
- Providing support for all who are affected when there is an allegation against someone who may pose a risk.

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- Managing the response of members of the organisation where there has been an allegation against someone who may pose a risk.

10 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 vulnerable 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 regarding expectations of those with whom we work in partnership, whether in the UK or overseas. We will discuss with all partners our safeguarding expectations. Any organisation using our premises, should provide us with a copy of their safeguarding policy.

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

Adoption of the policy

This policy was agreed by the leadership and will be reviewed regularly.

Signed by:

Position:

Signed by:

Position

Date:

HISTORY

Version 7	Policy updated in line with CCPAS edition 10
Version 8	Policy updated to include vulnerable adults
Version 9	Policy updated where all sections were renumbered and sections 4, 5, 6, 8, 9 & 10 were updated.
Version 10	Policy updated to change Elders and Trustees (E&T) to Church Council (CC); the denomination from Assemblies of God to Churches in Communities International (CiC); Criminal Records Check to Disclosure and Barring Check and name and telephone no of Deputy
Version 11	Policy reviewed, and Church Council signatory updated
Version 12	Replaced CCPAS with Thirtyone:eight and revised policy in line with ECC current practice and Thirtyone:eight online policy edition
Version 13	Policy reviewed and revised in line with ECC current practice and Thirtyone:eight updates.
Version 14	Policy reviewed and revised in line with ECC current practice and Thirtyone:eight updates.
Version 15	Policy reviewed in line with ECC current practice and policy.
Version 16	Policy reviewed in line with ECC current practice and policy and Thirtyone:eight updates. Updates include: • Change to Safeguarding Co-ordinator, Deputy Safeguarding Co-ordinator and Social Services details (Section 7.2) • Working Together to Safeguard Children (2023) previously 2018 (Appendix 1 & 6).
Version 17	Policy reviewed in line with ECC current practice and policy with no changes to text.
Version 18	Policy reviewed in line with ECC current practice and policy and Thirtyone:eight updates. Updates include: • Change to Deputy Safeguarding Co-ordinator (Section 7.2)

Appendix 1: Definitions of Abuse for Children

The four definitions (and a few additional categories) of abuse below operate in England based on the government guidance 'Working Together to Safeguard Children (2023)'.

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:

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- 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 for Adults

The following definition of abuse is laid down in **‘No Secrets: Guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse (Department of Health 2000)’**:

Abuse is a violation of an individual’s human and civil rights by any other person or persons. In giving substance to that statement, however, consideration needs to be given to a number of factors:

Abuse may consist of a single act or repeated acts. It may be physical, verbal or psychological, it may be an act of neglect or an omission to act, or it may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which he or she has not consented, or cannot consent. Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it’.

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, spiritual 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 Possible Abuse (children & young people)

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

Appendix 4: Signs of Possible Abuse (Adults)

Physical abuse

- History of unexplained falls, fractures, bruises, burns, minor injuries
- Signs of under/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 eg 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

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- 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 (eg no heating or lighting)
- Depression

Appendix 5: Effective Listening

Ensure the physical environment is welcoming, giving opportunity for the child or vulnerable adult to talk in private but making sure others are aware the conversation is taking place.

It is especially important to allow time and space for the person to talk.

Above everything else listen without interrupting.

Be attentive and look at them whilst they are speaking.

Show acceptance of what they say (however unlikely the story may sound) by reflecting back words or short phrases they have used.

Try to remain calm, even if on the inside you are feeling something different.

Be honest and don't make promises you can't keep regarding confidentiality.

If they decide not to tell you after all, accept their decision but let them know that you are always ready to listen.

Use language that is age appropriate and, for those with disabilities, ensure there is someone available who understands sign language, Braille etc.

HELPFUL RESPONSES

- You have done the right thing in telling.
- I am glad you have told me.
- I will try to help you.

DON'T SAY

- Why didn't you tell anyone before?
- I can't believe it!
- Are you sure this is true?
- Why? How? When? Who? Where?
- I am shocked, don't tell anyone else.

Appendix 6: Workers Action Sheet

Part 1: Record of concern about a child/adult's safety and welfare

(for use by any staff/volunteers – This form can be filled in electronically. If the form is handwritten care should be taken to ensure that the form is legible)^{1, 2, 3}

Child/Adult's name (subject of concern):	Date of birth/age: Child/Adult:	Address:
Date & time of incident:	Date & time (of writing):	
Your Name (print): Role/Job title:..... Signature:		
Other members of the household ⁴ :		
Record the following factually: Nature of concern, eg disclosure, change in behaviour, demeanour, appearance, injury, witnesses etc. <i>(please include as much detail in this section as possible. Remember – the quality of your information will inform the level of intervention initiated. Attach additional sheets if necessary.)</i>		
How did the concern come to light?		
What is the child/adult saying about what has happened ⁴ ?		
Any other relevant information. Previous concerns etc.		
Date and time of discussion with Safeguarding Coordinator ⁵ : _____		

Check to make sure your report is clear to someone else reading it

Please pass this form to your Safeguarding Coordinator without delay

Guidance notes for Workers Action Sheet (volunteers/staff only):

Following are some helpful pointers in completing the above form:

1. As a registered body the church/charitable organisation is required to ensure that its duty of care towards its beneficiaries is carried out in line with the principles enshrined within the Working together to safeguard children and young people, 2023 and the Care Act, 2014. (Refer to your own church's/organisation's safeguarding policy at this point too).
2. Essential principles of recording the information received/disclosed/observed:
 - a. Remember: do not investigate or ask any leading questions
 - b. make notes within the first one hour of receiving the disclosure or observing the incident
 - c. be clear and factual in your recording of the incident or disclosure
 - d. avoid giving your opinion or feelings on the matter
 - e. aim to record using the 4 W's and 1 H: When, where, what, why and how
 - f. do not share this information with anyone else except your safeguarding co-ordinator in the first instance and they will advise on who else will need to be informed, how and when.
 - g. make use of the additional information section to add any other relevant information regarding the child/adult/ family that you may be aware of. This can include any historic concerns or observations.
3. ***What constitutes a safeguarding concern?*** – any incident that has caused or likely to cause significant harm to a child can be classed as a safeguarding concern. Abuse is classified under four different categories (with regards to children) as already stated within the safeguarding policy (physical, sexual, emotional, neglect). With regards to adults there are 6 further categorisations. Whilst it may be helpful to record a specific category in the above form, if possible, this may not always be the case. Therefore, it is important to seek advice from your safeguarding co-ordinator or Thirtyone:eight at this stage.
4. ***Why do you need information regarding 'other household members'?*** – It has been demonstrated as important to include information about significant adults in the household especially when concerns relate to children as this has been a recurrent risk factor in several serious case reviews.
5. ***Why is the view of the child/adult significant?*** It is important to give whatever detail is available of the child or adult's explanation (or verbatim) of the matter to help ascertain if it is plausible and to help offer a context to the concern identified.
6. ***Passing information to the Safeguarding co-ordinator*** – Your safeguarding co-ordinator holds ultimate responsibility in responding to any safeguarding concerns within the church/organisation and therefore it is important that they have oversight of the actions being taken and make relevant and appropriate contact with statutory agencies if required. They will remain the most appropriate link between the organisation and external agencies.

Parent/carer informed?	Y	Who spoken to:	Date:	Time:	By whom:
	N	Detail reason:			
Any other relevant information					
Name of Safeguarding Coordinator:			Signature:		

OVERVIEW OF ACTIONS³:

S.No.	Date	Outcome (if known)	Service currently involved	Ongoing support offered by church (this can include monitoring)- include dates

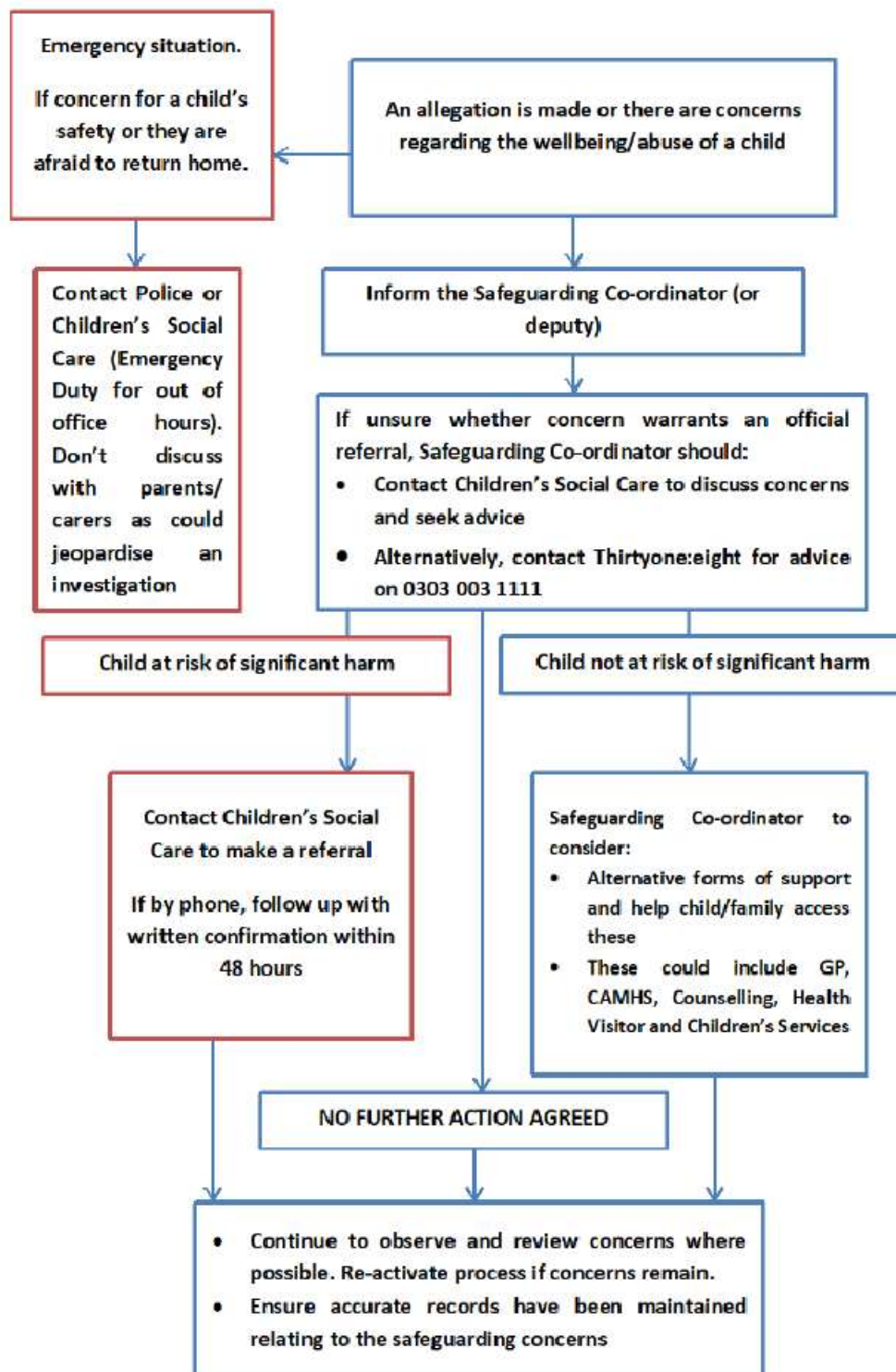
Guidance notes for Safeguarding Coordinator's Action Sheet

Following are some helpful pointers in completing the above form(s)

1. ***Importance of consent from parents/carers or adults (in the light of mental capacity)*** – With regards to children, consent of the parents is considered important before a referral is made to external agencies, unless of course doing so will place the child(ren) at greater risk of harm. With regards to adults, it is important to be aware that their consent is crucial before reporting concerns onto statutory agencies. The individual's mental capacity will also be a significant factor to consider at this stage. You can always seek the advice of local authority social services.
2. ***Initial assessment-*** Based on the advice you may have received from relevant individuals/agencies (i.e. this could be school/Thirtyone:eight/CEOP etc), what are the concerns categorised as?
3. ***Overview of actions -*** Includes a summary of the actions taken so far and who holds responsibility for it. You can use this section to add on information gathered when monitoring the situation or offering pastoral care over a defined period of time.

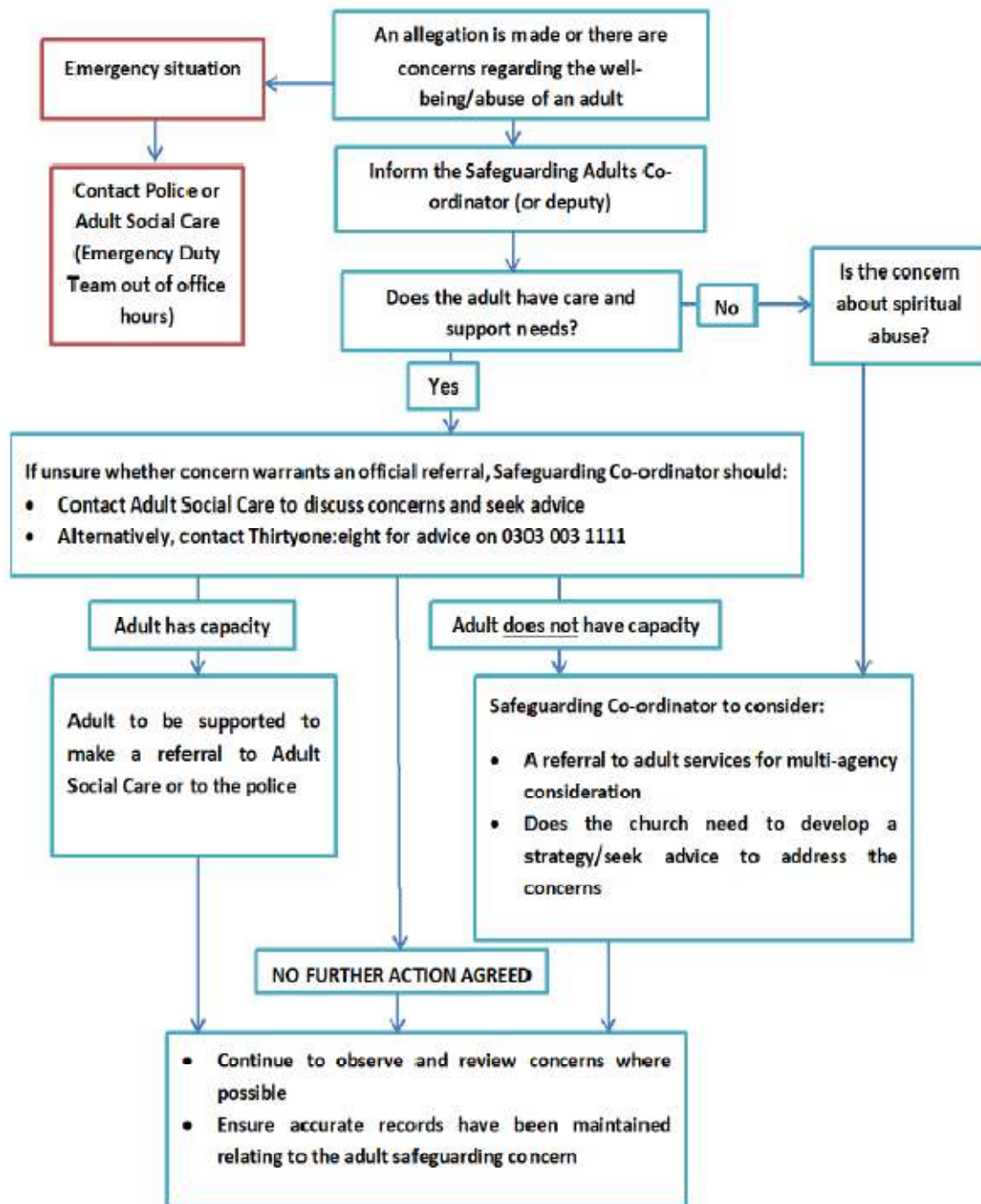
Appendix 8: Flowchart for action for children

This flow chart provides an overview of action to be taken when concerned about the welfare of a child. It is to be used in conjunction with written procedures.



Appendix 9: Flowchart for action for adults

This flow chart provides an overview of action to be taken when concerned about the welfare of an adult at risk. It is to be used in conjunction with written procedures.



Appendix 10: Adult to Child Ratios

Supervision levels will vary depending on the children's age, gender, behaviour and the abilities within your group.

They will also vary depending on:

-
- the nature and duration of activities
 - the competence and experience of staff involved
 - the requirements of location, accommodation or organisation
 - any special medical needs
 - any specialist equipment needed.

Carry out a risk assessment of the activities you are planning, taking these issues into consideration. This will help you make decisions about how many adults you need and what skills and experience they should have.

Parents who attend activities with their children should not be used to supervise other children unless they have been recruited into the role, undergone the necessary checks and had the relevant safeguarding training.

There is no specific guidance about supervision ratios for organisations that are not in the education or early years sectors. The following is based on best practice guidance to help organisations work out how many adults are needed to supervise children safely.

It is recommended having at least two adults present when working with or supervising children and young people. The following adult to child ratios are recommended as the minimum numbers to help keep children safe:

- Age 0 - 2 years - one adult to three children
- Age 2 - 3 years - one adult to four children
- Age 4 - 8 years - one adult to six children
- Age 9 - 12 years - one adult to eight children
- Age 13 - 18 years - one adult to ten children

When travelling with children and young people the recommended adult to child ratio can vary depending on:

- size of the group
- age of the children, their behaviours and needs
- size of the vehicle that you are travelling in.

If you are travelling in a vehicle, it is recommended that there is one adult driving and one adult supervising the children. Larger groups and vehicles will require more adults to ensure adequate supervision. Think about having one adult driving and at least one adult supervising the children, depending on the size of the group.

<https://learning.nspcc.org.uk/research-resources/briefings/recommended-adult-child-ratios-working-with-children>