**Safeguarding Policy**

|  |
| --- |
| **Author: Magdalen Bartlett** |
| **Revision description:** | **Version** | **Date issued:** | **Date reviewed:** |
| **n/a** | **1** |  |  |
|  |  |  |  |
|  |  |  |  |

 **Purpose**

Afrocats is strongly committed to practices that protect children, young people and vulnerable adults from abuse, neglect or significant harm. This policy ensures staff and trustees recognise, and accept their responsibility to develop the awareness of the risks and issues involved in safeguarding.

**Related policy and procedures:**

* Safer recruitment policy

**Introduction**

For this policy and procedure, children are defined in the children Act of 1989 as a person under the age of 18 years. The Safeguarding Vulnerable Groups Act 2006 defines a ‘vulnerable adult’ as a person aged 18 and over, and:

* Receiving a social care service
* Receiving a health service
* Living in sheltered accommodation
* Detained in custody or under a probation order
* Requiring assistance in the conduct of his/her affairs
* Receiving a service or participating in an activity targeted at older people, people with disabilities or with physical or mental health conditions

**Accountability and Responsibility**

Afrocatshas trained Safeguarding Officers; Magdalen Bartlett and Deputy Reina Yaidoo, both ultimately responsible to the Managing Director and Board of Directors.

**Designated Safeguarding Officer:** Magdalen Bartlett – 07834083437

**Deputy Safeguarding Officer:** Reina Yaidoo

Incidents or concerns are reported to the Safeguarding officer. The Safeguarding team are responsible for monitoring and managing incidents or concerns and liaising with safeguarding agencies. Afrocats’s Trustees are responsible for responding to an annual report on safeguarding within the company.

**Should you have any suspicions or concerns relating to child or adult protection you must contact Designated Safeguarding Officer, Magdalen Bartlett or if unavailable please contact Deputy Safeguarding Officer, Reina Yaidoo.**

**Training**

The company has a duty to promote safeguarding issues and measures to staff and ensure they:

* Analyse their own practice against established good practice, and assess risks to ensure their practice is likely to protect them from false allegations.
* Recognise their responsibilities and report any concerns about suspected poor practice or possible abuse
* Undertake training on safeguarding to raise awareness of current issues and legislation.

**Disclosure & Barring Service (DBS)**

Afrocats has a responsibility to ensure safe recruitment and employment practices. New and existing staff who frequently or intensively works with children, young people and vulnerable adults have to be checked through the DBS. Relevant details will be kept securely and subject to annual checks and audits.

**Statutory Framework**

Afrocats aims to meet legislative requirements and good practice in safeguarding.

The Children’s Act 1989 sets out the legislative framework for safeguarding and promoting the welfare of children and the Children’s Act 2004 sets out duties on local authorities and their partners (such as the police, health service providers and the youth justice system) to co-operate in promoting the wellbeing and welfare of children and young people and to make arrangements to safeguard them.

The Safeguarding Vulnerable Groups Act 2006 created a framework for checking the records of those who wanted to work with vulnerable groups by vetting and barring certain people from working with children and adults who are considered vulnerable because of their age, illness or disability.

The Care Act 2014 identifies statutory duties for adult safeguarding that apply in relation to any person who is aged 18 or over and at risk of abuse or neglect because of their needs for care and support. It defines the aims of adult safeguarding as:

* to prevent harm and reduce the risk of abuse or neglect to adults with care and support needs.
* to safeguard individuals in a way that supports them in making choices and having control in how they choose to live their lives
* to promote an outcomes approach in safeguarding that works for people resulting in the best experience possible
* to raise public awareness so that professionals, other staff and communities play their part in preventing, identifying and responding to abuse and neglect.

The Counter-Terrorism and Security Act 2015 imposes a duty on *specified authorities*, when exercising their functions, to have due regard to the need to prevent people from being drawn into terrorism.

Records of concerns and disclosures of abuse or radicalisation should be given to the designated Safeguarding Officer and must remain strictly confidential.

**Review**

AfrocatsSafeguarding Policy is reviewed annually and its provisions monitored by Senior Management. The review process includes analysis of monitoring data, consultation with and feedback from clients, staff and other stakeholders to determine the impact of the policy and any action required.

**Types of Abuse**

Abuse, maltreatment and neglect can be passive or active; it can consist of a single act or repeated acts. It may be physical, verbal or psychological, or it may occur when a vulnerable person is persuaded to enter a relationship to which he or she has not consented, or cannot consent.

Abuse can vary from treating someone with disrespect in a way that significantly affects the person’s quality of life, to causing actual physical suffering or by failing to prevent harm. It is behaviour towards a person that can be either deliberate or an act of neglect or an omission to act, perhaps as a result of ignorance, or lack of training, knowledge or understanding.

Individuals may be abused in a family or in an institutional or community setting, by those known to them or, more rarely, by a stranger. Anyone can be a perpetrator of abuse; it could be a paid carer, volunteer or a health or social care worker; a relative, friend, neighbour or an occasional visitor; another resident or service user, or someone who is providing a service.

**Children may be abused by an adult or adults, or another child or children. The *Working Together to Safeguard Children* guidance published by the Government defines four categories of abuse as follows:**

**Physical Abuse**

This 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**

This is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child’s emotional development. It may involve conveying to a child that they are worthless, unloved or inadequate. It may involve bullying, causing children to feel frightened or in danger.

**Sexual Abuse**

This type of abuse involves forcing or enticing a child to take part in sexual activities, including prostitution whether or not the child is aware of what is happening. Examples of physical contact include penetrative acts (rape or oral sex) or non-penetrative acts (kissing, fondling, masturbation). It may include non-contact activities involving children in looking at or be involved in sexual online images and or encouraging children to behave in sexually inappropriate ways.

**Neglect**

This is the persistent failure to meet a child’s basic physical and or psychological needs, likely to result in the serious impairment to the child’s health and development. It can include failing to provide adequate food, clothing and shelter, adequate supervision or failing to provide medical help when needed.

**Additional review**

Based on a report issued by the Department for Education (April 2014), *Keeping Children Safe in Education,* further infoon specific safeguarding measures that were not previously included is shown below. The specific safeguarding measures are as follows:

* Child sexual exploitation
* Bullying including cyber bullying
* Domestic violence
* Drugs
* Fabricated or induced illness
* Faith abuse
* Female genital mutilation (FGM)
* Forced marriage
* Gangs and youth violence
* Gender based violence
* Mental health
* Private fostering
* Radicalisation
* Sexting
* Teenage relationship abuse
* Trafficking

**Sexual Exploitation:** is the coercion or manipulation of children and young people into taking part in sexual activities. It involves an exchange of some form of payment, which can include;

* money, mobile phones and other items
* drugs, alcohol
* a place to stay, ‘protection’, affection

The vulnerability of the young person and the grooming process employed renders them powerless to recognise the exploitative nature of relationships and unable to give informed consent. It includes:

* Abuse through prostitution
* Abuse through using children to produce child sexual abuse images and material
* Abuse through grooming whether via direct contact or the use of technologies such as mobile phone or the internet
* Abuse through trafficking for sexual purposes.

**Sexually Harmful Behaviour:** Harmful sexual behaviour involves one or more children or young people engaging in sexual discussions or acts that are inappropriate for their age or stage of development. These can range from using sexually explicit words and phrases to full penetrative sex with other children or adults. Two thirds of contact sexual abuse of children are committed by peers. When this situation is identified or concerns are raised *a referral must be made to social services* so that the needs of both the victim and the child allegedly exhibiting sexually harmful behaviour can be assessed

**Bullying:** is not defined as a separate category by the authorities but the following definition is useful:

**Bullying is deliberately hurtful behaviour, usually repeated over a period of time, where it is difficult for those bullied to defend themselves.**

It can be:

* Physical ~ hitting, kicking, theft
* Verbal ~ racist or homophobic remarks, threats, name calling
* Emotional ~ isolating an individual from the activities and social acceptance of their peer group.
* The inappropriate use of mobile phones and other social media to emotionally harm another.

**Internet and Social Media:** can present risks as well as opportunities. Children, young people and adults may be bullied or abused via social media and other electronic sites. They may also use this medium to abuse or bully others. Risks include:

* Grooming and on-line sexual abuse
* Grooming to meet
* Grooming as part of an established face-to-face relationship
* Involvement in producing sexual or child abuse images
* Exposure to pornography and/or violent content
* Cyber-bullying - receiving unwanted and unpleasant texts, images or other content, or sending them
* Inadvertent criminal behaviour e.g., sexting

If you become concerned about a child’s, young person’s or adult’s use of electronic communication you should share your concerns as soon as possible with the Safeguarding officer.

**Domestic Abuse:** can occur in any family, or couple relationship, including same-sex, elder, teenage or vulnerable adult couples. Domestic abuse includes physical, sexual, psychological or economic harm or suffering, including threats of such acts, coercion or arbitrary deprivation of liberty. Exposure to domestic abuse can have many long term negative effects for children or young people and is recognised as a significant factor in emotional abuse. Domestic abuse can result in death to a partner. Domestic abuse often begins or escalates during pregnancy and the unborn child can be targeted directly. Where you become aware that a child, young person or vulnerable adult is exposed to, or involved in, a domestically abusive relationship, you must share your concerns with the Safeguarding Officer.

**Female Genital Mutilation**

It is illegal in the UK to subject a child to female genital mutilation (FGM) or to take that child abroad or to help someone else to do so for this procedure to take place.

**Trafficking & exploitation of Students**

This applies where a student is coerced or deceived by an adult who brings them into the country. Typically, they are refused their human rights and are forced into domestic servitude, forced marriage, acting as a drug mule, begging etc. Students may appear to submit willingly though fear either for themselves or for their families, who may be accepting bribes for them. Recognition of trafficking and exploitation will usually be from a combination of general signs such as neglect, abuse and issues with immigration status. Typically, they will not hold their own travel documentation, and be excessively frightened of being deported. In some cases, their paperwork may be false, have unexplained gaps, or may be held by an adult who is not their parent.

**Adult abuse**

**Adult abuse can occur in any relationship and it may result in significant harm to, or exploitation of, the person subjected to it. The Department of Health in its *No Secrets* report suggests the following as the main types of abuse:**

**Physical Abuse**

Including hitting, slapping, pushing, kicking, pushing, rough handling, force feeding, misuse of medication, restraint, or inappropriate sanctions (e.g. deprivation of food, clothing, warmth and healthcare).

**Sexual Abuse**

Including rape and sexual assault or sexual acts to which the vulnerable adult has not consented, or could not consent or was pressured into consenting.

**Psychological and Emotional Abuse**

Including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, enforced social isolation or unreasonable withdrawal of services or supportive networks.

**Financial or Material Abuse**

Including theft, fraud, exploitation, coercion in relation to an adult’s financial affairs or arrangements, including wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

**Neglect and Acts of Omission**

Including ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life, such as medication, clothing, adequate nutrition and heating. Failure to give privacy and dignity.

**Discriminatory Abuse**

Hate crime incidents, including racist or sexist abuse and abuse based on a person’s disability, age or sexuality and other forms of harassment, slurs or similar treatment.

**Extremism**

Vulnerable people may be targeted by extremists seeking to radicalise others. Individuals’ views become increasingly extreme regarding another section of society or government policy and the individual becomes increasingly intolerant of more moderate views, becoming withdrawn and focussed on one ideology. The individual may view terrorism related internet sites, chat rooms and forums, express a desire to take part in or support extremist activity, change their appearance and may become isolated from family, friends, peers or social groups.

**Mate crime**

Mate crime a type of hate crime where perpetrators befriend a person with a disability but in fact soon begin to exploit, hurt or harm them. This can include sexual abuse, forced prostitution, financial exploitation, physical abuse, violence and even murder.

**Institutional Abuse**

This can occur in institutions as a result of regimes, routines, practices and behaviours that occur in services that vulnerable adults live in or use and which violate their human rights. This may be part of the culture of a service to which staff are accustomed. Thus, such practices may pass by unremarked upon by staff. They may be subtle, small and apparently insignificant, yet together may amount to a service culture that denies, restricts or curtails the dignity, privacy, choice, independence or fulfilment of vulnerable adults.

Other types of abuse include domestic abuse, honour based violence (perpetrated against someone who is perceived to have brought shame or dishonour on a family or even a community), female genital mutilation, forced marriages and self-neglect.

Abuse can take many forms. It does not have to fit comfortably into any of the above. Abuse can be perpetuated by one adult at risk towards another. This is still abuse and should be dealt with accordingly.

**Safeguarding Reporting Procedure**

**Procedure in the Event of a Disclosure**

It is important that children, young people and vulnerable adults are protected from abuse or from being drawn into extremism. All complaints, allegations or suspicions must be taken seriously, including those received anonymously. This procedure must be followed whenever an allegation of abuse is made or when there is a suspicion of abuse.

**Step 1** – **Make sure the individual is safe.** If the person is in immediate danger, the police or ambulance must be called straight away on 999. Ensure prompt action is taken to minimise the risk of harm from any further abuse, maltreatment, neglect or extremism; this is important if the person remains in or is about to return to the place where the alleged abuse occurred. The alleged abuser is likely to have access to the person or others who might be at risk.

**Step 2** – **Ascertain and establish the basic facts**. Based on evidence of what is seen, heard or smelled and to make careful notes, clearly distinguishing fact from opinion.

**Step 3** – **Report the disclosure.** To the designated Safeguarding Officer immediately or as soon as possible within one working day. In the first instance, this may need to be done verbally.

**Step 4** – **Make a full record.** Of the disclosure, allegation or incident as soon as possible, within one working day.

**In the event of an incident or disclosure**

Abused children and adults at risk are more likely to disclose details of abuse to someone they trust and with who they feel safe. By listening and taking seriously what the child or adult is saying employees, elected members and volunteers are already helping the situation.

The following points are a guide to help employees, elected members and volunteers respond appropriately if anyone discloses abuse. If the child or vulnerable adult has speech or language difficulties ensure they have access to their preferred communication aid or to an interpreter or intermediary completely independent of the concerns.

**Dos and Don’ts**

|  |  |
| --- | --- |
| **Do** | **Don’t** |
| * React calmly so as not to frighten them [do not show shock or disbelief].
* Take what the person says seriously, recognising the difficulties inherent in interpreting what is being said by a person who has for example a speech impairment and / or differences in language
* Avoid asking leading or direct questions other than those seeking to clarify your understanding of what the person has said.
* Reassure the child or adult at risk that they are right to tell
* Explain to them that concerns may have to be shared with someone who is in a position to act
* Make a written record of what has been disclosed at the earliest opportunity
* Make sure the individual is safe.
* Assess whether emergency services are required and if needed call them.
* Listen carefully to what is being said and record it in detail.
* Questions should be kept to the minimum necessary to understand what is being alleged.
* Take all necessary precautions to preserve and protect forensic evidence.
* Offer sympathetic support and reassurance by acknowledging regret and concern for what has happened; that it was not their fault and they were right to tell you.
* Confirm that the information will be treated seriously.
* Explain that you must inform your Manager and that they will contact the Safeguarding Team at the relevant local authority.
* Give the person contact details so that they can report any further issues or ask any questions that may arise.
* Remember the need for ongoing support; signpost the individual who is being abused to appropriate sources of advice and support.
 | * Do not ignore or disbelieve the allegation or dismiss what you see or have been told.
* Panic
* Allow your shock or distaste to show
* Do not ignore or disbelieve the allegation or dismiss what you see or have been told.
* Probe for more information than is offered
* Speculate or make assumptions
* Make negative comments about the alleged abuser
* Make promises or agree to keep secrets
* Ask the child, young person, adult at risk or any witnesses to sign your written information as this may be significantly detrimental to any subsequent police investigation
* Take photographs of any alleged injuries. Any such recording must only be done by an approved medical or other practitioner, following referral.
* Do not be judgmental or voice your own opinion.
* Do not investigate or interview beyond that which is necessary to establish the basic facts.
* Do not press the person for more details.
* But do not stop someone who is freely recalling significant events, as they may not tell anyone again.
* Do not ask leading questions (e.g. suggesting names of who may have perpetrated abuse if the person does not disclose it).
* Do not assume information.
* Do not disturb or destroy possible forensic evidence (e.g. clean a person or area involved).

 * Do not interview or consult others not directly involved with the situation.
* Do not promise to keep secrets; but do explain that the information will only be passed to those who need to know.
* Do not make promises that you cannot keep (such as "this will not happen to you again").
* Do not confront or contact the alleged abuser, or anyone who might be in touch with them.
* Do not elaborate in your notes
 |

**Remember…**

The person who first encounters a case of alleged abuse or radicalisation is not responsible for deciding whether abuse or radicalisation has occurred or for verifying that information is true. This is a task for the professional protection agencies.

That promises of confidentiality should not be given as this may conflict with the need to ensure the safety and welfare of the individual.

It is important that the individual is supported throughout the process.

**Recording Concerns and Disclosures**

It is important to ascertain and establish the basic facts, based on evidence of what is seen, heard or smelled and to make careful notes, clearly distinguishing fact from opinion.

A full record of the disclosure, allegation or incident must be recorded as soon as possible and always on the same day, using the relevant Safeguarding Alert Form, where possible

Write in black ink so that documents can be photocopied if necessary. If you make a mistake, put a line through it - do not use correction fluid. Sign the report, date and time it.

You should:

1. Write up your notes as soon as you possibly can after the disclosure so you remember as much as you can.
2. Write down the name of the person making the disclosure and, where different, the name of the child, young person or vulnerable adult who has allegedly been abused or drawn into extremism.
3. Write down where and when disclosure was made, including date, time and the names of others present.
4. Write down when the alleged abuse or radicalisation took place, including date(s) and time(s)
5. Write down the place where the alleged abuse or radicalisation happened.
6. Write down whether anybody else was present when the alleged abuse or radicalisation took place or was involved in the abuse, including any issues about the mental capacity of those involved in the disclosure at the time of the incident.
7. Write down the account that has been given of the allegation, including known events leading up to it; the nature of, and the impacts of, that abuse or radicalisation.
8. Write down exactly what the person said (e.g. if an individual says, "he touched me down there" write this down, do not write "she said he touched her vagina").
9. Write down what immediate actions were taken to protect the victim, the perpetrator if a vulnerable person and any other vulnerable people.

**Making a record**

The employee, elected member or volunteer must make a record of the concern on the form for Reporting Safeguarding concerns, including:

* The date and time
* The child or adult’s name, address and date of birth
* The nature of the allegation
* A description of any visible injuries
* Observations – e.g. a description of the child or adult’s behaviour and physical and emotional state
* What the child or adult said and what was said in reply. Please record this as accurately as possible, using their own words far as possible
* Any action taken as a result of the concerns being raised e.g. who was spoken to and resulting actions. Include names, addresses and telephone numbers
* Sign and date what has been recorded
* Store the information in accordance with relevant procedures, e.g. Data Protection
* Send the form to the Designated Safeguarding Officer

**Confidentiality and Information Sharing**

Where a disclosure has been made, staff and volunteers should let the person know that they must inform their manager who will contact the Safeguarding Officer. You will consider their wishes and whether they consent to the matter being progressed further. There will be circumstances where an investigation may have to progress even if they do not give their consent.

If a child, young person or adult confides in a member of staff or a volunteer and requests that the information is kept confidential, it is important that the member of staff/volunteer tells the person that they will respect their right to confidentiality as far as they are able to, but that they are not able to keep the matter secret and that they must inform their manager. Within that context, however, the individual should be assured that the matter will be disclosed only to people who need to know about it.

If the victim or any other person requests that a concern is not investigated, it must be made clear that referral to the Safeguarding Officer will always be made to enable them to undertake a risk assessment and to verify whether there is a legal duty to act. The individual should be told that they will be fully consulted about further action at the point of the initial safeguarding visit. Their wishes will be respected unless there are other considerations that override those wishes.

Staff and volunteers must not use a service user’s wish for secrecy to allow a crime to be concealed or the risk of abuse to a vulnerable person.

The person’s involvement in the process of sharing information should be fully considered and their wishes and feelings taken into account. Where possible, consent should be obtained from the individual before sharing personal information with third parties. However, where this is not given, or it is neither possible nor desirable to obtain consent, information will be shared as the safety and welfare of the individual and others is the overriding priority.

Staff, volunteers and trustees have a professional responsibility to share relevant information about the protection of children, young people and vulnerable adults with other professionals, particularly investigative agencies and social services.

All written records and personal information regarding a child, young person or vulnerable adult will be kept confidential and secure by the designated Safeguarding Officer

**Dealing with Allegations made against an Employee or Volunteer**

This can be an extremely difficult issue to deal with. It can be difficult to accept that a colleague may deliberately harm a vulnerable person. It may also be that the behaviour that causes concern is bad practice rather than abuse.

Anyone wishing to make an allegation about a member of staff or a volunteer; either in relation to any suspicion, allegation or incident of abuse, radicalisation or non-adherence to these procedures; should report it to the designated Safeguarding Officer in the first instance. Concerns about the designated Safeguarding Officer should be reported to Chairperson.

It is important that any response is properly co-ordinated and that events are managed in the right order. For this reason, Bassajamba will take no direct action against an employee or volunteer without consulting the investigating agencies (e.g. the Police or Social Services), except where such action is necessary to protect a vulnerable person.

If, following consideration and any consultation, the concern is about bad practice rather than abuse or radicalisation, Bassajamba will take the necessary action to advise, manage or instigate disciplinary action against the employee or volunteer about whom the allegation has been made.

Irrespective of the outcome of any Police or Social Services enquiries, the organisation may limit the activities of the employee or volunteer concerned. It may also consider suspension and/or disciplinary action in accordance with its disciplinary procedure after careful consideration of the circumstances of each individual case, taking into account any advice from other agencies.

Support will be made available to any employee or volunteer who is the subject of an allegation. Every effort will be made to keep the details of the allegation confidential, and guard against publicity, whilst the suspicion, allegation or incident is being investigated.

**Contractors and organisations working with Children and adults at risk**

Where the contractor or organisation will be working with children, young people and/or adults at risk, the contractor or organisation will be required to have approved their own Safeguarding Policy and Procedures, which have been reviewed by the officer responsible for the contract and agreed as fit for purpose. Advice may be sought from the Designated Safeguarding Officer.

Contractors and organisations must also follow safer recruitment selection policies and ensure these are implemented whenever a person is employed or volunteers to work with children, young people or adults at risk. This will also include a requirement that the provider will not sub-contract to any organisation that does not have safe recruitment processes.

These requirements will be included in the terms of any contract drawn up between the Afrocats and contractors or organisations that provide services.

**Partnership working and Grant aided organisations**

Voluntary organisations, private and community sector providers working in partnership with the Afrocats involving children and adults at risk will be made aware of the Safeguarding Policy and Procedure requirements.

**Examples and Signs of Abuse**

The tables below are a guide to help employees identify the types and signs of abuse and to help them decide whether concerns should be raised.

*These lists give examples only and are not by any means exhaustive. If you have concerns about anything not in a list you should still report your concerns to the Designated Person in accordance with the procedures above.*

Please note that the tabled examples and signs detailed below may also be indicators of other medical factors and may not necessarily confirm abuse and neglect.

|  |  |  |
| --- | --- | --- |
| **Type of abuse** | **Examples include**  | **Signs include** |
| **Physical abuse** | * Shaking
* Pinching
* Slapping
* Force-feeding
* Biting
* Burning or scalding
* Causing needless physical discomfort
* Inappropriate restraint
* Locking someone in a room
 | * Unexplained bruising, marks or injuries on any part of the body
* Frequent visits to the GP or A&E
* An injury inconsistent with the explanation offered
* Fear of parents or carers being approached for an explanation
* Aggressive behaviour or severe temper outbursts
* Flinching when approached
* Reluctance to get changed or wearing long sleeves in hot weather
* Depression
* Withdrawn behaviour or other behaviour change
* Running away from home/ residential care
* Distrust of adults, particularly those with whom a close relationship would normally be expected
* Bruising in children or adults who are not independently mobile
* Bruising that is not on the bony parts of the body
* Bruises to the face, back, stomach, arms, buttocks, ears and hands
* Bruises in clusters
* A number of bruises of a regular shape – e.g., fingertip bruising
* Bruises that carry an imprint – of an implement or cord or hand
* Bruising where the explanation seems unlikely
 |
| **Emotional/Psychological abuse**Emotional abuse can be difficult to detect as a child or adult may appear well cared for yet receive little or no love, affection or positive attention and/or be constantly put down or belittled. A child or adult living in an environment of low warmth and high criticism is likely to suffer emotional abuse | * Intimidation and/or threats
* Bullying
* Rejection
* Shouting
* Indifference and the withdrawal of approval
* Denial of choice
* Deprivation of dignity or privacy
* The denial of human and civil rights
* Harassment
* Being made to fear for one’s well being
 | * A failure to thrive or grow
* Sudden speech disorders
* Developmental delay, either in terms of physical or emotional progress
* Behaviour change
* Being unable to play or socialise with others
* Fear of making mistakes
* self-harming behaviour, e.g. severe scratching, cutting etc
* Fear of parent or carer being approached regarding their behaviour
* Confusion
* developmental delay in physical or emotional progress
* nervous behaviour, e.g., rocking, hair twisting
* signs of depression, suicidal ideation
* overly overtly subservient or anxious to please
 |
| **Sexual abuse**Children or vulnerable adults may disclose sexual abuse by directly telling someone about it. They may also disclose less directly, sometimes unintentionally, over a period of time, through a variety of behaviours and actions, including discussions and indirect non-verbal cues. In this respect, disclosure should be seen as a process that occurs over time. | * Rape and other sexual offences
* Sexual activity including sexual contact and non-sexual contact that the child or adult at risk does not want, to which they have not consented, could not consent, or were pressured into consenting to
* For adults, being denied access to a sexual life
* Being encouraged or enticed to touch the abuser
* Coercing the victim into watching or participating in pornographic videos, photographs, or internet images
* Any sexual relationship that develops where one is in a position of trust, power or authority
 | * Pain or itching in the genital/anal areas
* Bruising or bleeding near genital/anal areas
* Sexually transmitted disease
* Vaginal discharge or infection
* Stomach pains
* Discomfort when walking or sitting down
* Pregnancy
* Sudden or unexplained changes in behaviour, e.g. becoming aggressive or withdrawn
* Fear of being left with a specific person or group of people
* Nightmares
* Leaving home
* Sexual knowledge which is beyond their age or development age
* Sexual drawings or language
* Bedwetting
* Saying they have secrets they cannot tell anyone about
* Self-harm or mutilation, sometimes leading to suicide attempts
* Eating problems such as overeating or anorexic
* Disclosure
* Inappropriate sexualised behaviour
* stomach pains or pains when using the toilet
* urinary infections
* bruising or bleeding in the genital area
* referring to a secret they can’t tell anyone about
* nightmares
 |
| **Neglect**Neglect can also be life threatening. Children who are neglected can suffer long term physical and emotional damage. However, it can be difficult to recognise especially where families or individuals are living in poverty. | * Withholding help or support necessary to carry out daily living tasks
* Ignoring medical and physical care needs
* Failing to provide access to health, social or educational support
* The withholding of medication, nutrition and heating
* Keeping someone in isolation.
* Failure to intervene in situations that are dangerous to the person
* Inadequate supervision and guidance – leaving the child to cope alone, abandoning them or leaving them with inappropriate carers and failing to provide appropriate boundaries about behaviours such as under age sex or alcohol.
 | * Constant hunger, sometimes stealing food from others
* Dirty or ‘smelly’
* Loss of weight, or being constantly underweight
* Inappropriate dress for the weather
* Complaining of being tired all the time
* Not requesting medical assistance and/or failing to attend appointments
* Having few friends
* Worsening of health conditions
* Pressure sores
* Mentioning their being left alone or unsupervised
* Sore or extreme nappy rash
* Skin infections
* Lack of response to stimuli or contact
* Poor skin condition(s)
* Frozen watchfulness
* Anxiety
* Distressed
* Child moves away from parent under stress
* Little or no distress when separated from primary carer
* Inappropriate emotional responses
* Language delay
 |
| **Self-neglect (adults)** | * Little or no personal care
* Refusing medication or refusing to stay on medication
* Disorientated or incoherent
* Unsafe living conditions & hoarding
* Inability to manage finances and property
* Isolation
 | * Poor grooming, dirty or ragged clothes, unclean skin and fingernails
* Unwilling to accept medical care
* Unable to focus, carry on normal conversation or answer basic questions about date, place, and time
* Lack of food or basic utilities in the home, unclean living quarters, rodents or other vermin
* Hoarding animals or trash, inability to get rid of unneeded items
* Inability to manage finances and property: not paying bills, repeatedly borrows money, gives money or property away
* Little contact with family or friends, no social support
 |
| **Financial abuse (adults)** | * Being overcharged for services
* Being tricked into receiving goods or services that they do not want or need
* Inappropriate use, exploitation, or misappropriation of property and/or utilities
* Theft
* Deception
* Fraud
* Exploitation or pressure in connection with wills
 | * Inconsistency between standard of living and income
* Reluctance to take up assistance which is needed
* Unusual interest by family and other people in the person’s assets
* Recent changes in deeds
* Power of Attorney obtained when a person lacks capacity to make the decision.
* Individual deprived of access to own money, missing personal items especially jewellery or items of value
* Unexplained disappearance of financial documents, e.g. building society books, and bank statements, payments or order books.
* Signatures on cheques do not resemble the vulnerable adult’s signature or signed when this person cannot write
* Unusual concern by carer that an excessive amount of money is being expended on the care of the vulnerable adult
* Lack of amenities such as TV, appropriate clothing, personal grooming items that the vulnerable adult can well afford.
 |
| **Discriminatory (adults)** | * Use of inappropriate “nick names”
* Use of derogatory language or terminology
* Enforcing rules or procedures which undermine the individual’s well being
* Denial to follow one’s religion
* Lack of appropriate food
* Denial of opportunity to develop relationship
* Denial of health care.
 | * Being treated unequally from other users in terms of the provision of care, treatment or services
* Being isolated
* Derogatory language and attitude by carers
* Dismissive language by staff
* Hate campaigns by neighbours or others
* Deteriorating health
* Indicators of other forms of abuse
 |
| **Organisational abuse (adults)** | * Service users required to ‘fit in’ excessively to the routine of the service
* More than one individual is being neglected
* Everyone is treated in the same way
* Other forms of abuse on an institutional scale
 | * Service users required to ‘fit in’ excessively to the routine of the service
* More than one individual is being neglected
* Everyone is treated in the same way
* Other forms of abuse on an institutional scale
 |

**Indirect Concerns**

You may not have any direct communication from a child, young person or vulnerable adult but may be concerned about physical marks or injuries or the individual’s physical presentation. Similarly, the child’s or adult’s behaviour may give rise to concerns, or things you overhear them say, or allude to.If you become concerned, you must share those concerns with the Safeguarding Officer who will consider your information, seek advice if necessary and decide what action needs to be taken.

**Guidelines on use of images of children and/or adults at risk in publications and on the internet**

Websites and publications provide excellent opportunities to publicise achievements of individuals and provide a showcase for the activities of children and adults at risk. In some cases, however, displaying certain information about children and adults at risk could place them at risk.

The following procedure must be followed to ensure Afrocats publications and information on the internet does not place children or adults at risk.

· Publications or information on a website must never include personal information that could identify the child or adult at risk. Any contact information must be directed to a relevant organisation.

· Before publishing any information about a child or adult at risk, written consent must be obtained from the child or adult’s parent, guardian or carer. If the material is changed from the time of consent, the parents/guardians/carers must be informed and consent provided for the changes.

· The content of photographs or videos must not depict a child or adult at risk in a provocative pose or in a state of partial undress. Children and adults at risk must never be portrayed in a demeaning or tasteless manner.

· For photographs or videos of groups or teams of children or adults at risk only the group or team should be referred to and not individual members. Credit for achievements by an individual child or adult at risk should be restricted to first names only.

· All published events involving children or adults at risk must be reviewed to ensure the information will not put children or adults at risk. Any publications of specific meetings or child/adult at risk events e.g. team coaching sessions, must not be distributed to any individuals other than to those directly concerned.

· Particular care must be taken when publishing photographs, film or videos of children or adults at risk who are considered particularly vulnerable e.g. the subject of a child or adult protection issue or a custody dispute.

Any concerns or enquiries about publications or internet information should be reported to the Safeguarding Officer: Magdalen Bartlett.

**Guidelines on use of photography and filming of children and/or adults at risk (including mobile phone technology)**

There is evidence that some individuals have used public events as an opportunity to take inappropriate photographs or film footage of children. The following best practice is to be adopted to protect children and adults at risk who are being photographed or videoed.

When commissioning professional photographers or inviting the press to cover Afrocats’s services, events and activities organisers must ensure that they make expectations clear in relation to child and adult safeguarding

* Organisers must check the credentials of any photographers and organisations used.
* Where possible, the consent of the parent/guardian for photographing, videoing and / or filming or a child or adult at risk must be obtained prior to the event or activity.
* Where possible anyone wishing to use photographic/film/video equipment at a venue must obtain the approval of the Afrocats.
* An activity or event specific identification badge/sticker must be provided and clearly displayed at all times by the accredited photographers, film and video operators on the day of the activity or event.
* Unsupervised access must not be allowed to children or adults at risk or one to one photographic sessions.
* Do not allow photographic sessions outside of the activities or services, or at a child or adult’s home.

It is recommended that the names of children or adults at risk should not be used in photographs or video footage, unless with the express permission of the child or adults at risk adult’s parent or guardian.

Afrocats reserves the right at all times to prohibit the use of photography, film or video at any event or activity with which it is associated.

The specific details concerning photographic/video and filming equipment should, where possible, be published prominently in event programmes and must be announced over the public address system prior to the start of an event. The recommended wording is,

***“In line with the recommendation in Afrocats’ Safeguarding Policy and Procedure, the promoters of the event request that any person wishing to engage in any video, zoom or close range photography should register their details with staff at the spectators’ entry desk before carrying out any such photography. The promoter reserves the right to decline entry to any person unable to meet or abide by the promoter’s conditions.”***

Any concerns with photographers or film operators are to be reported to Magdalen Bartlett the Safeguarding Officer and where relevant, the police. An example photographic consent form is given at Appendix 3.

 **Parents/carers use of photographic and filming equipment at events**

It is good practice to inform parents/carers of our expectations of them using their own photographic/filming equipment at events organised by Afrocats.

Parents/guardians/ carers and spectators should register with the organiser their intent to use zoom, close range photography or filming equipment at an event.

Children, adults at risk and parents/guardians/carers should be informed that if they have concerns they can report these to the organiser.

Concerns regarding inappropriate or intrusive photography or filming should be reported to the organiser, or senior member of staff present. It is their responsibility to record the incident on the incident report forms and pass on to the Designated Safeguarding Officer to take appropriate action.

An example of wording to be displayed at an event or on publicity material prior to the event should follow the lines of:

**“In line Afrocats’ Safeguarding Policy, any person wishing to engage in zoom, close range photography or filming, should register their intent with the event/activity organiser, prior to carrying out any such photography or filming. The organiser reserves the right to refuse any such photography or filming if there are concerns or complaints about its appropriateness”**

**Guidelines on use of images of children and/or adults at risk in publications and on the internet**

Websites and publications provide excellent opportunities to publicise achievements of individuals and provide a showcase for the activities of children and adults at risk. In some cases, however, displaying certain information about children and adults at risk could place them at risk.

The following procedure must be followed to ensure Afrocats publications and information on the internet does not place children or adults at risk.

Publications or information on a website must never include personal information that could identify the child or adult at risk. Any contact information must be directed to a relevant organisation.

Before publishing any information about a child or adult at risk, written consent must be obtained from the child or adult’s parent, guardian or carer. If the material is changed from the time of consent, the parents/guardians/carers must be informed and consent provided for the changes.

The content of photographs or videos must not depict a child or adult at risk in a provocative pose or in a state of partial undress. Children and adults at risk must never be portrayed in a demeaning or tasteless manner.

For photographs or videos of groups or teams of children or adults at risk only the group or team should be referred to and not individual members. Credit for achievements by an individual child or adult at risk should be restricted to first names only.

All published events involving children or adults at risk must be reviewed to ensure the information will not put children or adults at risk. Any publications of specific meetings or child/adult at risk events e.g. team coaching sessions, must not be distributed to any individuals other than to those directly concerned.

Particular care must be taken when publishing photographs, film or videos of children or adults at risk who are considered particularly vulnerable e.g. the subject of a child or adult protection issue or a custody dispute.

Any concerns or enquiries about publications or internet information should be reported to the Safeguarding Officer: Magdalen Bartlett.

**Appendix

Appendix 1**

|  |
| --- |
| **Form for reporting safeguarding concerns** |
| **Your name and job title** |  |
| **Email** |  |
| **Tel.no** |  |
| **Name of child/adult at risk:** |  |
| **Age and date of birth (if known):** |  |
| **Address of child/ adult at risk** |  |
| **Tel .no** |  |
| **Parent/carer names** |  |
| **Are you reporting your own concerns or those of somebody else? Please give details** |  |
| **Brief description of the nature of your concerns: include dates, times and details of any incidents witnessed, location and any physical and behavioural signs etc** |
|  |
| **Have you spoken to the child/adult at risk? If so, what was said and have you advised them you are reporting your concerns?** |  |
| **Has anybody been alleged to be the perpetrator? If so, give any known details** |  |
| **Have you consulted anybody else? If so, please give details** |  |
| **What have you done with your concern- e.g. passed to Local Support Team, Adult Protection,****(please give names and reference numbers if applicable)** |  |
| **Your signature** |  |
| **Date** |  |
| **Signed by Designated Safeguarding Officer** |  |
| **Date received by Designated Safeguarding Officer** |  |
| **Action taken by Designated Safeguarding Officer** |  |
| **RETURN FORM ‘IN CONFIDENCE’ TO THE DESIGNATED SAFEGUARDING OFFICER****FORM TO BE STORED SECURELY AND CONFIDENTIALLY** |

**Appendix 2**

|  |
| --- |
| **Form for reporting concerns about the behaviour of colleagues in relation to the protection of children or adults at risk** |
| **Name of individual about whom you have concerns:** |   |
| **Their place of work and job role (if known):** |   |
| **Your Name** |   |
| **Email** |   |
| **Tel. no.** |   |
| **Details of your concerns, including any incidents witnessed, dates, times, location, other people involved.** |   |
| **Have you spoken to the individual about your concerns? What was their response/reaction? Did you record it?** |   |
| **Have you taken any other action relating to your concern?** |   |
| **Your signature** |   |
| **Date:** |   |
| **Report received by:** |   |
| **Date:** |   |
| **Details of action taken:** |   |
| **RETURN FORM ‘IN CONFIDENCE’ TO THE DESIGNATED SAFEGUARDING OFFICER****FORM TO BE STORED SECURELY AND CONFIDENTIALLY** |

**Appendix 3**

Afrocats produces a range of print materials and online information. On occasion it takes photographic images (moving and still) for promotional purposes.

Signing this form gives agreement for the individual named to take part in such a photographic/video shoot for Afrocats for the above stated purpose only.

|  |
| --- |
| **I have read and understood this form and give my permission for the child or adult in my care named below to be photographed, filmed or recorded.****You may/may not include their name or other identifying information alongside these images.****OR****The child or adult in my care may NOT be photographed, filmed or recorded.** |
| **Signature and date:** |
| **Name of child/ adult in my care (block capitals):** |
| **Date of birth (if under 18):** |
| **Address:** |
| **Phone number:** |
| **Parent/carer/guardian:** |
| **Address (if different from above):** |
| **Contact telephone details (if different from above):** |
| **Email address (optional)** |