

## **- YMCA Doncaster - Safeguarding Children, Young People and Vulnerable Adults Policy & Procedure**

### **1. Purpose**

- 1.1 This policy sets out YMCA Doncaster's commitment to ensuring that Children, Young People and Vulnerable Adults (CYPVA) who use our services are protected and provides all staff with the overarching principles that guide our approach to safeguarding.
- 1.2 This document includes procedures for recognising, responding to and referring any concerns, allegations or disclosures of harm or abuse.

### **2. General Principles**

- 2.1 All CYPVA have the right to be protected from abuse regardless of their age, gender, disability, culture, language, racial origin, religious beliefs, sexual identity, personality or lifestyle.
- 2.2 YMCA Doncaster recognises the importance of its work with CYPVA and its responsibility to protect and safeguard their welfare.
- 2.3 It is the responsibility of everyone covered under the scope of this policy to protect and safeguard CYPVA and to report any concerns, allegations or disclosures of abuse in accordance with this procedure.
- 2.4 YMCA Doncaster recognises its responsibility to implement and review appropriate and comprehensive policies and procedures for safeguarding.
- 2.5 We are committed to supporting, resourcing and training those who work with CYPVA and to providing ongoing support and supervision, including support in reporting any concerns, allegations or disclosure of abuse.
- 2.6 We are committed to checking the suitability of all those who work with CYPVA.
- 2.7 We are committed to maintaining good links with the statutory safeguarding authorities.

### **3. Our Commitment**

- 3.1 YMCA Doncaster seeks to keep CYPVA safe by:
- 3.1(a) Valuing, listening to, respecting them and taking steps to ensure they understand how to raise a concern.
  - 3.1(b) Providing and reviewing a comprehensive Safeguarding Policy and Procedure.
  - 3.1(c) Appointing a Designated Safeguarding Officer (DSO).
  - 3.1(d) Operating safe recruitment procedures. All applicants for paid positions are required to provide details of referees covering three years of employment. References are taken up before employment is confirmed and commences.
  - 3.1(e) Ensuring that staff and volunteers with direct contact with CYPVA, and people responsible for the management of those staff and volunteers, including all trustees,

complete disclosure applications with the Disclosure and Barring Service at the highest level available, with a satisfactory disclosure being in place before confirmation in post.

3.1(f) Ensure that disclosure applications are repeated every three years, or where an individual takes on a new role with a different level of responsibility with regard to CYPVA.

3.1(g) Ensuring that matters arising from disclosure are dealt with on a case-by-case basis to assess the risk with that particular individual in that particular position.

3.1(h) Ensuring that policies and systems are in place for the recording and storing of information professionally and securely.

3.1(i) Ensuring that there is a consistent and effective response to any concerns, allegations or disclosures of abuse.

3.1(j) Providing our clients with a Complaints Policy and Procedure.

3.1(k) Providing effective management for staff and volunteers through induction, supervision and support.

3.1(l) Providing training in safeguarding and identifying and responding to evidence or suspicions of abuse. This training is included in the induction process for all staff and is then supplemented by further training for those working directly with CYPVA. Ongoing safeguarding training will be provided throughout employment as appropriate to the role.

3.1(m) Supporting staff in reporting and investigating any concerns, allegations or disclosures of abuse.

3.1(n) Ensuring all staff have a knowledge and understanding about CYPVA protection and that they receive appropriate training on adhering to YMCA Doncaster's policies and procedures.

3.1(o) Ensuring that we provide a safe physical environment for our children, young people, staff and volunteers, by applying health and safety measures in accordance with the law and regulatory guidance.

#### **4. Responsibilities**

4.1 YMCA Doncaster's Deputy Chief Executive is the Association's DSO, contactable via email at [olivia@ymcadoncaster.org.uk](mailto:olivia@ymcadoncaster.org.uk).

4.2 In the absence of the Deputy Chief Executive, the Accommodation Manager will assume the responsibilities of the DSO.

4.3 In the absence of both of the above, the Duty Manager will assume responsibilities of the DSO.

4.4 The DSO is responsible for reviewing the policy at least annually for formal approval by the Board of Governors.

4.5 Staff co-ordinating organisational inductions are responsible for ensuring that staff are aware of, and are able to comply with, the Safeguarding Policy and Procedure and that they receive training appropriate to their role.

4.6 It is the responsibility of all staff to be familiar with the Safeguarding Policy and Procedure and to reread it at least annually.

4.7 It is the responsibility of all staff who receive an allegation or disclosure of abuse from any source, or who suspect abuse to report their concerns to the DSO using the Referral Form at Appendix 2. In the situation where an allegation or suspicion of abuse involves or implicates the DSO, they should inform the DSO's Line Manager.

4.8 The DSO has freedom to act when dealing with suspected abuse cases. This includes the power to suspend any staff member, after consultation with YMCA Doncaster's designated HR advisor wherever possible. Any suspension should be notified immediately to the relevant staff member's Line Manager, or to a more senior person within the Association.

4.9 The DSO receiving allegations are responsible for referring the concerns to the appropriate bodies and maintaining confidential records.

4.10 In the case of allegations relating to staff, it is the responsibility of the DSO to refer this to the Local Authority Designated Officer (LADO).

4.11 It is the responsibility of the DSO to make any required referrals to the Disclosure and Barring Service (DBS).

## **5. External User Groups**

5.1 YMCA Doncaster lets rooms to a range of external user groups. YMCA Doncaster's Room Hire Agreement stipulates that the hirer must acknowledge their responsibility for devising and adhering to appropriate safeguarding arrangements for its clients, should they include CYPVA.

5.2 External user groups are informed about the mixed range of people using the building.

5.3 Staff are required to remain alert to all young people using YMCA Doncaster. Where a situation of abuse is disclosed, suspected or discovered relating to children or young people from another user group, YMCA Doncaster would follow its own procedures and would inform the statutory authorities if necessary.

## **6. Disclosure, Suspicion or Discovery of Abuse**

6.1 Types and indicators of abuse are set out in Appendix 1.

6.2 Where a CYPVA discloses a situation of abuse, or where abuse is suspected or discovered, staff must follow the procedure set out on the flow chart at the end of this document.

6.2 Staff must find an appropriate and early opportunity to explain that it is likely the information will be shared with others. Do not promise to keep secrets even if the CYPVA says that they will 'only tell' if it is a secret. If the CYPVA decides not to tell you further information in case you tell others, you must record that they wanted to make a disclosure so that the DSO can follow up as necessary (which may include notifying the relevant agencies that an individual may be at risk).

6.3 Staff must record exactly what is said. Do not attempt to 'interview' a child or vulnerable adult as this is a highly sensitive and specialised area and you may inadvertently do more harm than good.

6.4 Ask if the person is injured in case immediate medical treatment is required. If emergency medical treatment is required, call an ambulance and while you are waiting for it to arrive, get help from the first aider. If the CYPVA is in immediate danger, remain with him/her and call the police, or if the CPVYA is elsewhere, contact the police and explain the situation.

6.5 Every allegation must be recorded using the Referral Form - Appendix 2 (these can be accessed through the Staff Hub). This form should be emailed to the DSO, whether or not the staff member/volunteer hearing the allegation believes it is well founded.

6.6 If the victim has injuries or requires medical attention, they should be supported in gaining access to emergency treatment. The clinical staff should be informed of the nature of the suspicions and about the source of the injury so that they can take steps to ensure that potential evidence is not destroyed or compromised.

6.7 The DSO will document the full details of the situation and make further enquiries if necessary to ensure that the child, young person or vulnerable adult is protected from any further harm while the appropriate authorities are informed. Where risk of harm is suspected, the DSO will take steps to protect that CYPVA from further harm.

6.8 Where appropriate, the DSO will decide who should inform the CYPVA's family or care provider and when they should be informed. If there is not an immediate explanation, the suspicion that abuse has occurred must be referred by the DSO to the local authority within one working day of being advised of the concern.

6.9 If the DSO decides, after investigation, that a referral is not required (for example, not meeting the threshold for a CYPVA) the incident must still be fully documented.

6.10 If any concerns or allegations relate to a staff member, the DSO and CEO must be informed immediately; they will consult the police before the staff member is informed. This is to ensure that CYPVA protection processes and any criminal investigations are not compromised.

## **7. Historic Abuse**

7.1 It is not unusual for people to disclose experiences of physical, sexual and/or emotional abuse and/or neglect only when they reach adulthood. Our response to allegations by an adult of abuse experienced as a child must be of as high a standard as a response to current abuse.

7.2 There is a significant likelihood that a person who abused a CYPVA in the past will have continued and may still be doing so. Criminal prosecution may be possible if sufficient evidence can be carefully collated.

7.3 When a CYPVA discloses historical abuse, the staff member receiving the information should record the discussion in detail. If possible, the staff member should establish if the adult has any knowledge of the alleged abuser's recent or current whereabouts and contact with children. All allegations of historic abuse should be referred to the DSO.

## **8. Domestic Abuse**

8.1 The categories of abuse highlighted in Appendix One can form part of domestic abuse. Domestic abuse most commonly takes place in intimate partner relationships, including same sex relationships. Intimate relationships can take different forms, partners do not need to be married or in a civil partnership and abuse can occur between non-cohabiting intimate partners. As with all forms of abuse, abuse in intimate relationships can vary in severity and frequency, ranging from a one-off occurrence to a continued pattern of behaviour.

8.2 Young people can experience domestic abuse within their relationships. Teenagers may not self-identify as victims. They may perceive their relationships to be 'casual', for example engaging in multiple romantic and sexual partners through dating apps. Those who engage in abusive behaviour may seek to minimise or deny the abuse by stating that they were not in a relationship.

8.3 Abusive behaviours within relationships between young people can include similar incidents or patterns of behaviours as adult relationships. For teenagers in particular, abuse to harass or control victims can occur through using technology, this includes social media, or location-based tracking apps, such as Find My Friends. Young people's lives are often heavily online-based and perpetrators of abuse may exploit this, demanding access to passwords and monitoring online activity. Young people may also experience intimate image abuse within their relationships, including threats to expose intimate images.

8.4 Teenage victims may find it difficult to identify abusive behaviour, for instance, controlling or jealous behaviour may be misconstrued as love. Domestic abuse in teenage relationships can be just as severe and has the potential to be as life threatening as abuse in adult relationships. Young people who experience domestic abuse do so at a particularly vulnerable point in their lives. They may experience a complex transition from childhood to adulthood which impacts on behaviour and decision making. It may impact on the way that they respond to abuse or if and how they engage with services.

8.5. Perpetrators may manipulate victims and/or those around them to hide or normalise abusive behaviours. Domestic abuse perpetrators can be particularly adept at manipulating professionals, agencies and systems and may use a range of tactics to perpetuate contact with, and exert control over, the victim. Perpetrators may seek to minimise allegations, normalise the behaviour and discredit reports of abuse.

8.6 Given the insidious and often hidden nature of domestic abuse, it is critical that staff employ professional curiosity to recognise patterns of behaviour over time. Staff should understand the stigma and fear that victims may have when disclosing domestic abuse. All front-line staff are allocated training on recognising the signs of domestic abuse.

8.8 Where staff have concerns relating to someone being a victim of domestic abuse, they must report these concerns by raising an alert to the DSO.

## **9. Good Practice with Children, Young People & Vulnerable Adults**

9.1 Appropriate relationships must be adhered to. All staff should follow the Professional Boundaries Policy.

9.2 Staff must not plan to be alone with a CYPVA in an environment where activities cannot be observed by others. This may mean leaving a door open or staying in a public area. All staff must adhere to the Lone Workers Policy and Procedures.

9.3 Ratios of staff to children/young people will be adhered to for the appropriate age range, gender and/or specific need.

9.4 Unsupervised routes to and from premises must be appropriate for the safety of children and young people.

9.5 A register of attendees must be kept for each activity delivered.

9.6 Staff/volunteers must not use their own cars to transport children or young people except for individual journeys pre-approved by the Deputy Chief Executive.

9.7 Children between the ages of 11 and 16 cannot be allowed to leave activities without an adult with their passworded permission, unless with authority from the child's parent at the time of registration.

9.8 Children under the age of 11 can only be allowed to leave activities with an adult with their passworded permission.

## **10. Safe Touch**

10.1 Staff should operate a 'safe touch' policy.

10.2 For the purpose of this policy, 'safe touch' is defined as physical contact that, if otherwise avoided, would be inhumane, unkind and potentially emotionally or physically damaging for the CYPVA.

10.3 YMCA Doncaster understands that the following examples are instances of safe touch which may occur between staff and participants:

- Comforting an upset or distressed participant.
- Congratulating or praising a participant.
- Holding the hand of a participant to guide them, such as when crossing a road or walking to a session (age appropriate).
- Giving first aid to a child or vulnerable adult.
- Demonstrating exercises or techniques during sessions (drama, dance, sports).

10.4 Staff should ensure that safe touch does not indicate favour towards particular individuals.

10.5 CYPVA's should never be touched in a way that could be misinterpreted as anything other than appropriate adult-child/vulnerable adult support.

10.6 Participants should not be touched between the waist and mid-thigh, or on/near the chest (unless specifically required during a First Aid procedure).

10.7 YMCA Doncaster recognises that certain types of physical contact between staff and participants are inappropriate. Staff must not put their arms around a child. If a child needs reassurance staff are able to place a hand on their shoulder.

10.8 Lap-sitting is inappropriate and is prohibited.

10.9 YMCA Doncaster understands that children and vulnerable adults are not always aware of the boundaries between staff and clients and thus may try to engage in physical contact such as lap-sitting or hugging.

10.10 Should a CYPVA try to engage in any inappropriate physical contact, the member of staff must explain to them that this contact is not appropriate.

10.11 Any physical contact should be in response to the CYPVA's needs at the time, of limited duration and appropriate to their age, stage of development, gender, ethnicity and background. Adults should therefore, use their professional judgement at all times.

10.12 If a participant attempts to engage in any inappropriate touch, the member of staff involved should report this immediately to the DSO in order to prevent any allegations of inappropriate physical contact.

10.13 If another member of staff suspects or witnesses inappropriate physical contact, whereby the member of staff is willingly involved, they must report this to the DSO. The DSO will investigate and keep a written record of all instances of reported inappropriate touch. Any allegations against staff will be dealt with as a matter of urgency.

## **11. Prevent**

11.1 Prevent sits alongside safeguarding duties. As in Section 29 of the Counter-Terrorism and Security act, the aim of Prevent is to stop people from becoming terrorists or supporting

terrorism. The Prevent duty is designed to ensure that people who are susceptible to radicalisation are as supported as they would be under safeguarding processes.

11.2 If staff have concerns relating to someone becoming involved in terrorism, they must report these concerns by raising an alert to the DSO.

## **12. Training**

12.1 All staff and volunteers are required to complete assigned training at level 1.

12.2 Level 2 and 3 training is available and is assigned / required according to an assessment of the nature and regularity of unsupervised contact with relevant groups.

12.3 Training will be repeated annually in order to ensure up-to-date knowledge.

12.4 DSOs are required to complete specific DSO training.

12.5 All frontline staff are required to complete assigned Prevent training.

## **13. Monitoring and Reviews**

13.1 Copies of all Referral Forms will be retained securely and in compliance with the Data Protection Act 2018. Safeguarding activity will be reviewed quarterly by the DSO to check the policy is being followed correctly, to identify any areas of practice improvement and/or training needs for staff, and to monitor the outcomes of concerns raised.

13.2 The DSO is responsible for conducting an annual review of the Safeguarding Policy and Procedure. The findings and recommendations will be reported to the Board of Governors.

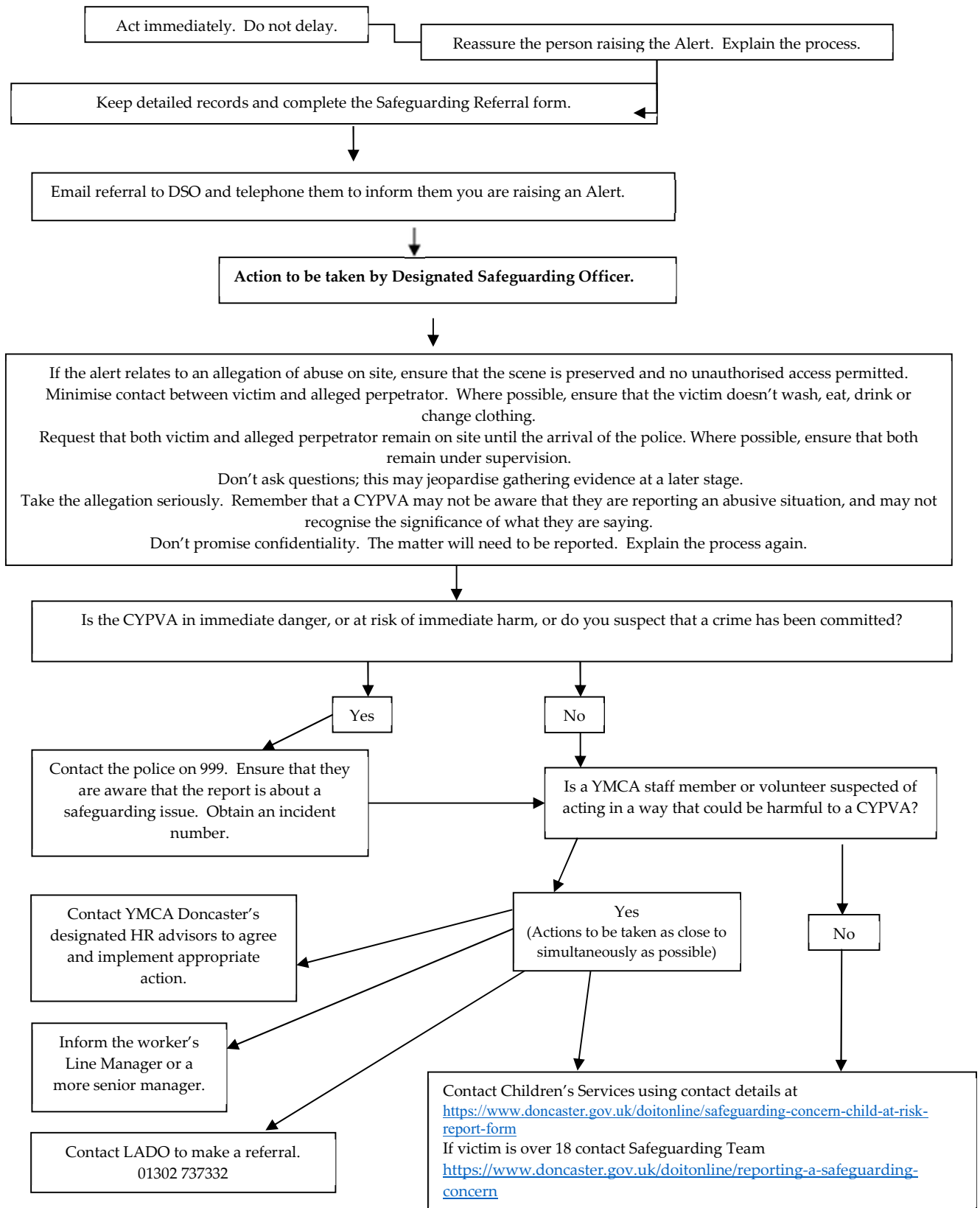
Prior to the implementation of this Policy, YMCA Doncaster had separate policies for Child Protection and Safeguarding Vulnerable Adults.

This policy was agreed by the Board of Governors on 5th May 2022

And reviewed on 18<sup>th</sup> May 2023, and 3<sup>rd</sup> June 2024

This policy will be reviewed annually.

## Receiving a CYPVA Safeguarding Alert



### YMCA Doncaster's DSO

- Retain a copy of the Referral noting all further contact and progress regarding the issue.
- Work closely with DSCP to provide relevant information or evidence.
- Agree any action to be taken (e.g., suspension of worker, informing carers) with DSCP and the police.
- Participate in, or designate another appropriate competent individual to participate in, the Strategy Meeting and Case Conference as appropriate.



## Appendix 1

### Indicators of Abuse – Children

Physical Abuse	<p>Physical abuse is the deliberate infliction of pain, physical harm or injury and includes withholding or misuse of medication.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Any injuries not consistent with the explanation given for them.</li> <li>• Injuries which occur to the body in places which are not normally exposed to falls, bumps, etc.</li> <li>• Injuries which have not received medical attention.</li> <li>• Reluctance to change for, or participate in, games or swimming.</li> <li>• Finger marks or multiple bruising.</li> <li>• Bruises, bites, cuts, scratches, burns, fractures, etc. which do not have an accidental explanation.</li> <li>• Flinching or evidence of pain/discomfort during normal activity.</li> <li>• Fabricated or induced illness.</li> </ul>
Emotional Abuse	<p>Emotional abuse is the emotional ill treatment 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, unloved or inadequate or causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. It may feature age or developmentally inappropriate expectations. Some level of emotional abuse is involved in all types of ill treatment of a child, though it may occur alone.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Changes or regression in mood or behaviour, particularly where a child withdraws or becomes clinging.</li> <li>• Nervousness, frozen watchfulness.</li> <li>• Obsessions or phobias.</li> <li>• Sudden under-achievement or lack of concentration.</li> <li>• Inappropriate relationships with peers and/or adults.</li> <li>• Attention seeking behaviour.</li> <li>• Running away/stealing/lying.</li> </ul>
Neglect and acts of omission.	<p>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. It may involve a parent or carer failing to provide adequate food, shelter or clothing, failure to protect a child from physical harm or danger, or failure to ensure access to appropriate medical care or treatment.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Persistent hunger.</li> <li>• Weight loss.</li> <li>• Poor hygiene.</li> <li>• Dress inappropriate to weather or activities.</li> <li>• Physical problems and medical needs that are not attended.</li> <li>• Failure to thrive.</li> </ul>
Organised Abuse	<p>Organised or multiple abuse may be defined as abuse involving one or more abusers and a number of related or non-related abused children and young people. The abusers concerned may be acting in concert to abuse children, sometimes acting in isolation, or may be using an institutional framework or position of authority to recruit children for abuse.</p> <p>Indicators include:</p>

	<ul style="list-style-type: none"> <li>• Series of complaints from different parents about the same staff/situations/issues.</li> <li>• Records regularly being mislaid/poor record keeping.</li> <li>• Controlling relationships.</li> <li>• Children/activities being visited regularly by "associates" of staff.</li> </ul>
Grooming	<p>Grooming is when someone builds a relationship, trust and emotional connection with a child or young person so they can manipulate, exploit and abuse them. Children and young people who are groomed can be sexually abused, exploited or trafficked.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Being very secretive about how they're spending their time, including when online.</li> <li>• Having an older boyfriend or girlfriend.</li> <li>• Having money or new things like clothes and mobile phones that they can't or won't explain.</li> <li>• Underage drinking or drug taking.</li> <li>• Spending more or less time online or on their devices.</li> <li>• Being upset, withdrawn or distressed.</li> <li>• Sexualised behaviour, language or an understanding of sex that's not appropriate for their age.</li> <li>• Spending more time away from home or going missing for periods of time.</li> <li>• Suffering from sexually transmitted infections.</li> <li>• Pregnancy.</li> </ul>
Radicalisation	<p>Radicalisation is the process through which a person comes to support or be involved in extremist ideologies. It can result in a person becoming drawn into terrorism and is in itself a form of harm.</p> <p>Children who are at risk of radicalisation may have low self-esteem or be victims of bullying or discrimination. Extremists might target them and tell them they can be part of something special, later brainwashing them into cutting themselves off from friends and family.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Isolating themselves from family and friends.</li> <li>• Talking as if from a scripted speech.</li> <li>• Unwillingness or inability to discuss their views.</li> <li>• A sudden disrespectful attitude towards others.</li> <li>• Increased levels of anger.</li> <li>• Increased secretiveness, especially around internet use.</li> </ul>
Online Abuse	<p>Online abuse is any type of abuse that happens on the internet, through social media, online gaming or mobile phones. Children and young people may be the victims of online grooming, sexual abuse, sexual exploitation or emotional abuse. They also may be exposed to sexting, online misrepresentation and cyberbullying.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Spending a lot more or a lot less time than usual online, texting, gaming or using social media.</li> <li>• Seeming distant, upset or angry after using the internet or texting.</li> <li>• Being secretive about who they're talking to and what they're doing online or on their mobile phone.</li> <li>• Having lots of new phone numbers, texts or email addresses on their mobile phone, laptop or tablet.</li> </ul>

<p>Criminal Exploitation / County Lines</p>	<p>Criminal exploitation is child abuse where children and young people are manipulated and coerced into committing crimes.</p> <p>County Lines is a form of criminal exploitation. County Lines is the police term for urban gangs exploiting young people into moving drugs from a hub, normally a large city, into other markets – suburban areas and market and coastal towns – using dedicated mobile phone lines or “deal lines.” This can involve children being trafficked away from their home area, staying in accommodation and selling / manufacturing drugs.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Frequently absent from and doing badly in school.</li> <li>• Going missing from home, staying out late and travelling for unexplained reasons.</li> <li>• In a relationship or hanging out with someone older than them.</li> <li>• Being angry, aggressive or violent.</li> <li>• Being isolated or withdrawn.</li> <li>• Having unexplained money and buying new things.</li> <li>• Wearing clothes or accessories in gang colours or getting tattoos.</li> <li>• Using new slang words.</li> <li>• Spending more time on social media and being secretive about time online.</li> <li>• Making more calls or sending more texts, possibly on a new phone or phones.</li> <li>• Self-harming and feeling emotionally unwell.</li> <li>• Taking drugs and abusing alcohol.</li> <li>• Committing petty crimes like shop lifting or vandalism.</li> <li>• Unexplained injuries and refusing to seek medical help.</li> <li>• Carrying weapons or having a dangerous breed of dog.</li> </ul>
<p>Female Genital Mutilation</p>	<p>Female genital mutilation (FGM) refers to all procedures involving partial or total removal of the female external genitalia or other injury to the female genital organs for non-medical reasons. It is most often carried out on young girls between infancy and age 15. In every form in which it is practiced, FGM is a violation of girls’ and womens’ fundamental human rights, including their rights to health, security and dignity.</p> <ul style="list-style-type: none"> <li>• Having difficulty walking, standing or sitting.</li> <li>• Spending longer in the bathroom or toilet.</li> <li>• Appearing quiet, anxious or depressed.</li> <li>• Acting differently after an absence.</li> <li>• Reluctance to go to the doctors or have routine medical examinations</li> <li>• Asking for help – though they might not be explicit about the problem because they’re scared or embarrassed.</li> </ul>
<p>Domestic Abuse (Children)</p>	<p>Domestic abuse is any type of controlling, bullying, threatening or violent behaviour between people in a relationship. It can seriously harm children and young people and witnessing domestic abuse is child abuse.</p> <p>Signs that a child has witnessed domestic abuse can include:</p> <ul style="list-style-type: none"> <li>• Aggression or bullying.</li> <li>• Anti-social behaviour, like vandalism.</li> <li>• Anxiety, depression or suicidal thoughts.</li> <li>• Attention seeking.</li> <li>• Bed-wetting, nightmares or insomnia.</li> <li>• Constant or regular sickness like colds, headaches and mouth ulcers.</li> <li>• Drug and alcohol use.</li> <li>• Eating disorders.</li> <li>• Problems in school or trouble learning.</li> </ul>

- Tantrums.
- Withdrawal.

### Indicators of Abuse – Adults

Physical Abuse	<p>Physical abuse is the deliberate infliction of pain, physical harm or injury and includes withholding or misuse of medication.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Injuries not consistent with falls or offered explanations.</li> <li>• Unexplained loss of hair in clumps.</li> <li>• Cuts that are not likely to be explained by self-injury.</li> <li>• Finger-marks.</li> <li>• Flinching or evidence of pain/ discomfort during normal activity.</li> </ul>
Psychological Abuse	<p>Psychological abuse is any pattern of behaviour by another that results in harm and may include insults, humiliation, ridicule, bullying, threats, enforced isolation, interference in relationships and contact between consenting adults, coercion, lack of privacy or choice, denial of dignity.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Signs of strain within a relationship and/ or tension when a particular person is present.</li> <li>• Indicators that an individual acts differently when a third person is present than at other times.</li> <li>• Suggestions of refusal to allow a choice e.g., to eat or not eat more or less of particular foods, to dress according to preference.</li> <li>• Signs of withdrawal or fear or other changes to emotional state.</li> <li>• Signs of unexplained sleep or weight loss.</li> </ul>
Sexual Abuse	<p>Sexual abuse is any sexual activity involving but carried out without the informed consent of an adult at risk. Sexual abuse may include sexual intercourse, inappropriate touching, offensive or suggestive language, 'voyeuristic' behaviour and exposure to the suggestive or sexually explicit activities of others, including films, photographs, images etc.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Unexplained bruising around or bleeding from the genital area.</li> <li>• Stained or bloody underclothing.</li> <li>• Unexplained difficulties in walking.</li> <li>• Reluctance of the person to be alone with an individual known to them.</li> <li>• Unusual and inappropriate sexualised language.</li> </ul>
Financial or Material Abuse	<p>Financial abuse is the misappropriation of funds (savings or income) or property of an adult at risk. This may include exploitation, theft or fraudulent use of money, misuse of property or possessions and incurring financial liabilities on behalf of an adult at risk without their informed consent.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Unexplained shortage of money despite a seemingly adequate disposable income.</li> <li>• Unexplained withdrawals from savings accounts.</li> <li>• Unexplained disappearance of financial documents for example bank statements, receipts for non-routine expenditure.</li> <li>• Loss of personal possessions.</li> </ul>

	<ul style="list-style-type: none"> <li>• Cuckooing – where a person’s property is taken over by a criminal in order to use it to deal, store or take drugs, facilitate sex work, as a place for them to live, or to financially abuse the tenant.</li> </ul>
Neglect and Acts of Omission	<p>Neglect may be deliberate or by default where the abuser is not able to provide the care and support needed or may not recognise the need for the care and support to be given. The abuser may also be neglecting themselves.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Persistent hunger and / or weight loss.</li> <li>• Poor hygiene.</li> <li>• Dress inappropriate to weather or activities.</li> <li>• Denial of religious or cultural needs.</li> <li>• Physical problems and medical needs that are not attended to.</li> <li>• Inadequate physical environment.</li> </ul>
Discriminatory Abuse	<p>When the adult at risk is harassed or discriminated against because of their age, race, gender, sexuality, religion, disability, culture, gender reassignment, sex or sexual orientation, marital status etc.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Signs of strain within a relationship and/ or tension when a particular person is present.</li> <li>• Signs of withdrawal or fear or other changes to emotional state.</li> <li>• Unexplained outbursts.</li> <li>• Out of character discriminatory language, behaviour.</li> </ul>
Organisational Abuse	<p>Where neglect and poor professional practice impact on care. It can occur when poor communication, systems, practice and norms mean the care received is below that what should be expected.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Medication errors.</li> <li>• Poor record keeping.</li> <li>• Complaints from service users and their family.</li> <li>• Loss of personal possessions / clothing.</li> <li>• Controlling relationships between staff and service users.</li> <li>• Unsafe or unhygienic environment.</li> <li>• Lack of choice, privacy, dignity.</li> <li>• Routine acceptance of poor practice.</li> </ul>
Self-Neglect	<p>Where the adult at risk is neglecting to care for their own personal hygiene, health or surroundings.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Hoarding.</li> <li>• Poor personal hygiene.</li> <li>• Unexplained weight loss.</li> <li>• Wearing the same clothes for a number of days.</li> <li>• Physical problems and medical needs that are not attended to.</li> <li>• Poor diet and nutrition.</li> <li>• Non engagement with agencies/refusing help.</li> </ul>
Modern Slavery	<p>Includes forced labour, debt bondage, sexual exploitation, criminal exploitation and domestic servitude.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Not being allowed to travel alone or make decisions.</li> <li>• Lack of personal possessions.</li> </ul>

	<ul style="list-style-type: none"><li>• Reluctance to seek help.</li><li>• Poor levels of nourishment, dress and energy.</li><li>• Unwillingness to provide basic information about self.</li><li>• Poor command of English or awareness of the local environment.</li></ul>
Domestic violence	<p>Includes controlling, coercive or threatening behaviour and / or violence between people who are or have been intimate partners or family members.</p> <p>Indicators include:</p> <ul style="list-style-type: none"><li>• 'Honour' based violence.</li><li>• Female genital mutilation (FGM).</li><li>• Forced marriage.</li><li>• Signs of strain within a relationship and/ or tension when a particular person is present.</li><li>• Signs of withdrawal or fear, or other changes to emotional state.</li></ul>

## Appendix 2

### Referral Form for Suspicions or Allegations of abuse of a CYPVA.

This form must be completed as soon as possible after receiving information that causes suspicion or an allegation of the abuse of a child, young person or vulnerable adult. This must be discussed with a Designated Safeguarding Officer as soon as possible. Do not delay by attempting to obtain information to complete the details.

Note: Confidentiality must be maintained at all times. Information must only be shared on a need-to-know basis. Do not discuss this incident with anyone other than those who need to know. Ensure that this form is kept securely and confidentially, whether in hard copy or electronic format.

Continue on a separate sheet of paper if required and attach securely to this form.

#### Details of person making this report:

Name:
Position:
Contact telephone number:

#### Details of child/vulnerable adult:

Name:
Date of birth:
Address:
Contact telephone number:
Names and address of parents/guardian/carers:

#### Details of person about whom there is concern:

Name:
Position:
Date of Birth:
Address:
Relationship to child/vulnerable adult:

If you are reporting this alleged incident on behalf of someone else, please provide details of that person:

Name:
Position:
Address:
Contact telephone number:
Date this person advised you of alleged incident:
Record here the information you were given from this person about the alleged incident:

**Details of alleged incident:**

Date of alleged incident:
Time:
Place:
Name and addresses of witnesses:
Describe in detail what happened:
Describe in detail visible injuries / bruises and concerning behaviour of the child / vulnerable adult, if any (use diagrams if this helps you to describe):
Was the child / vulnerable adult asked what happened: <b>Yes / No</b> If yes, record exactly what the child said in their own words and any questions asked if the situation needed clarification:



**Details of action taken:**

Detail what action, if any, has been taken following receipt of this information (for example, if you have contacted the police or other emergency services, please provide details):

Signature \_\_\_\_\_

Print name: \_\_\_\_\_

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

**For Completion by the Designated Safeguarding Officer****Details of action taken:**

Detail what action, if any, has been taken following receipt of this information:
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**Details of external agencies contacted:**

DCSP	Name and contact number:  Advice received:
Police	Name and contact number:  Incident Number: Advice received:
Other	Name of organisation:  Name and contact number: Advice received:

## Other information

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Signature \_\_\_\_\_

Print name: \_\_\_\_\_

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

**Where a referral has been made to DCSP/the Police a copy of this form must be sent to them as soon as possible.**

Last updated 3<sup>rd</sup> June 2024