**The BCC Safeguarding Policy**

**SECTION 1 Details of the organisation**

**Bawtry Community Church (BCC)**

Office & Hope Centre: 2-3 Pinder’s Court, Bawtry, Doncaster, DN10 6JA.

Worship Services: New Hall, Station Road, Bawtry, DN10 6PU

Tel No:  **01302 719911** Email address: **pastor.bawtry@gmail.com**

Name of Pastor (Senior Leader): **Ivor Greer**

Member of**: Fellowship of Independent Evangelical Churches (FIEC)**

Charity Number: **1178422**

Insurance Company: **Ansvar Insurance, Employers Liability Cover**

*The following is a brief description of our organisation and the type of activities we undertake with children and adults who have care and support needs:*

The New Hall is a local Community facility with a kitchen and adjacent rooms. It is owned by Bawtry Town Council, and we rent it on an as-needed basis. For our Sunday Children’s work, we also use a room in Bawtry Methodist Church which is close to The New Hall.

We rent 2-3 Pinders Court from a private landlord; it consists of two rooms – an Office and The Hope Centre – and two toilets, one of which is wheelchair accessible.

The Hope Centre is used for small groups which may include children and vulnerable adults.

We hold our main worship services in the New Hall. All age groups attend these services, including adults with support needs. Young people attend groups in the adjacent rooms or in the church office.

**Our commitment**

As a Leadership we recognise the need to provide a safe and caring environment for children, young people and adults. We acknowledge that children, young people and adults can be the victims of physical, sexual and emotional abuse, and neglect. We accept the UN Universal Declaration of Human Rights and the International Covenant of Human Rights, which states that everyone is entitled to “all the rights and freedoms set forth therein, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status”.

We also concur with the Convention on the Rights of the Child which states that children should be able to develop their full potential, free from hunger and want, neglect and abuse. They have a right to be protected from “all forms of physical or mental violence, injury or abuse, neglect or negligent treatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s), or any other person who has care of the child.” As a Leadership we have therefore adopted the procedures set out in this safeguarding policy in accordance with statutory guidance. We are committed to build constructive links with statutory and voluntary agencies involved in safeguarding.

The policy and attached practice guidelines are based on the ten Safe and Secure safeguarding standards published by **thirtyone:eight** and prepared in consultation with them.

The Leadership undertakes to:

* endorse and follow all national and local safeguarding legislation and procedures, in addition to the international conventions outlined above.
* provide on-going safeguarding training for all its workers and 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 Advocates in their work and in any action they may need to take in order to protect children and adults with care and support needs.
* the Leadership agrees not to allow the document to be copied by other organisations.

**SECTION 2 Prevention**

**Understanding abuse and neglect**

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

In order to safeguard those in our places of worship and organisations we adhere to the UN Convention on the Rights of the Child and have as our starting point as a definition of abuse, Article 19 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 and indicators of abuse, as well as how to respond to a disclosure of abuse, are included in our policy.

**Statutory definitions of abuse:** Please see Appendices2 and 3

**Signs and indicators of abuse**: Please see Appendices 4 and 5

**How to respond to a child wishing to disclose abuse**: Please see Appendix 6

**Safer recruitment**

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

* There is a written job description / person specification for the post
* Those applying have completed an application form and a self declaration form
* Those short listed have been interviewed
* Safeguarding has been discussed at interview
* Written references have been obtained, and followed up where appropriate
* A disclosure and barring check has 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
* A suitable training programme is provided for the successful applicant
* The applicant has completed a probationary period
* The applicant has been given a copy of the organisation’s safeguarding policy and knows how to report concerns.

**Safeguarding Training**

The Leadership is committed to on-going safeguarding training and development opportunities for all workers, developing a culture of awareness of safeguarding issues to help protect everyone.**All our workers will receive induction training and undertake recognised safeguarding training on a regular basis through** **thirtyone:eight.** The Leadership will also ensure that children and adults with care and support needs are provided with information on where to get help and advice in relation to abuse, discrimination, bullying or any other matter where they have a concern.

**Management of Workers – Codes of Conduct**

As a Leadership we are committed to supporting all workers and ensuring they receive support and supervision. All workers will be issued with a code of conduct towards children, young people and adults with care and support needs.

**SECTION 3 Practice Guidelines**

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

As well as a general code of conduct for workers we also will develop specific good practice guidelines for every activity we are involved in and these will be developed.

**Working in Partnership**

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

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

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

**Section 4 RESPONDING TO ALLEGATIONS OF ABUSE**

Under no circumstances should a worker carry out their own investigation into an allegation or suspicion of abuse. Following procedures as below:

* The person in receipt of allegations or suspicions of abuse should report concerns as soon as possible to **Mr. Jonathan Redden** (hereafter the "Safeguarding Advocate") **tel no: 01777 816729** who is nominated by the Leadership to act on their behalf in dealing with the allegation or suspicion of neglect or abuse, including referring the matter on to the statutory authorities.
* In the absence of the Safeguarding Advocate or, if the suspicions in any way involve the Safeguarding Advocate, then the report should be made to **Dr. Jane Redden** (hereafter the "Safeguarding Deputy ") **tel no: 07741 300446**. If the Safeguarding Deputy is unavailable, the report should be made to **Mrs** **Sharon Copperwheat** (hereafter the “Safeguarding Assistant”) **tel. no:** **07739 344078**.
* If the suspicions implicate both the Safeguarding Advocate and the Safeguarding Deputy, then the report should be made in the first instance to **thirtyone:eight** PO Box 133, Swanley, Kent, BR8 7UQ. Telephone 0303 003 1111. Alternatively contact Social Services or the police.
* Where the concern is about a child the Safeguarding Advocate should contact Children’s Services. Where the concern is regarding an adult in need of protection contact Adult Social Services or take advice from **thirtyone:eight** as above.

**Doncaster:**

Children’s Services:

8.30-5.00pm Urgent Children and Family Duty Team: 01302 736000

Out of hours: Urgent Children and Family Duty Team: 01302 796000

Adult Services:

8.30-5.00: 01302 737063

Out of Hours: 01302 796000

**Bassetlaw:**

Urgent Children’s and Adult Services: 8.30-5.00: 0300 500 8090

Out of Hours: 0300 456 4546

For **urgent Police matters** phone 999

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

The role of the Safeguarding Advocate/Deputy is to collate and clarify the precise details of the allegation or suspicion and pass this information on to statutory agencies who have a legal duty to investigate.

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

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

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

* Contact Children’s Social Services (or **thirtyone:eight**) for advice in cases of deliberate injury, if concerned about a child's safety or if a child is afraid to return home.
* Not tell the parents or carers unless advised to do so, having contacted Children’s Social Services.
* Seek medical help if needed urgently, informing the doctor of any suspicions.
* For lesser concerns, (e.g. poor parenting), encourage parent/carer to seek help, but not if this places the child at risk of significant harm.
* Where the parent/carer is unwilling to seek help, offer to accompany them. In cases of real concern, if they still fail to act, contact Children’s Social Services direct for advice.
* Seek and follow advice given by **thirtyone:eight** (who will confirm their advice in writing) if unsure whether or not to refer a case to Children’s Social Services.

**Allegations of sexual abuse**

In the event of allegations or suspicions of sexual abuse, the Safeguarding Advocate/Deputy will:

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

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

**Suspicions 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 Advocate/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 Advocate 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.

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

If an accusation is made against a worker (whether a volunteer or paid member of staff) whilst following the procedure outlined above, the Safeguarding Advocate, in accordance with Local Safeguarding Children Board (LSCB) procedures will need to liaise with Children’s Social Services in regard to the suspension of the worker, also making a referral to a Local Authority Designated Officer (LADO). In Doncaster, contact: LADO@dcstrust.co.uk; Tel 01302 737332 – Jim Foy /Lynn Hutchinson

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

The Care Act places the duty upon Adult Services to investigate situations of harm to adults with care and support needs. Any allegation of abuse should be reported to the Safeguarding Advocate who will refer the matter to Adult Services.

**SECTION 5 Pastoral Care**

**Supporting those affected by abuse**

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

**Working with offenders**

When someone attending the place of worship / organisation is known to have abused children, or is known to be a risk to adults with care and support needs the Leadership will supervise the individual concerned and offer pastoral care, but in its safeguarding commitment to the protection of children and adults with care and support needs, set boundaries for that person, which they will be mandated to keep.

**Adoption of the Policy:**

This policy is agreed by the Leadership of BCC and is reviewed annually each October – **see date and signatures after the Appendices on page 14**

**Appendix 1 Leadership Safeguarding Statement**

The Leadership of Bawtry Community Church recognises the importance of its ministry /work with children and young people and adults in need of protection and its responsibility to protect everyone entrusted to our care.

We are committed to creating and enabling a healthy culture in order to minimise any coercion and control within our church.

The following statement was agreed by the Leadership Team on: \_\_\_**12th October 2021**\_\_\_

This organisation is committed to the safeguarding of children and adults with care and support needs and ensuring their well-being.

Specifically:

* We recognise that we all have a responsibility to help prevent the physical, sexual, emotional abuse and neglect of children and young people (those under 18 years of age) and to report any such abuse that we discover or suspect.
* We believe every child should be valued, safe and happy. We want to make sure that children we have contact with know this and are empowered to tell us if they are suffering harm.
* All children and young people have the right to be treated with respect, to be listened to and to be protected from all forms of abuse.
* We recognise that we all have a responsibility to help prevent the physical, sexual, psychological, financial and discriminatory abuse and neglect of adults who have care and support needs and to report any such abuse that we discover or suspect.
* We recognise the personal dignity and rights of adults who find themselves victims of forced marriage or modern slavery and will ensure all our policies and procedures reflect this.
* We believe all adults should enjoy and have access to every aspect of the life of the church unless they pose a risk to the safety of those we serve.
* We undertake to exercise proper care in the appointment and selection of all those who will work with children and adults with care and support needs.
* We believe in the necessity of creating a healthy culture in our church where the value of all people is recognised and challenges are responded to appropriately.

**We are committed to:**

* Following the requirements for UK legislation in relation to safeguarding children and adults and good practice recommendations.
* Respecting the rights of children as described in the UN Convention on   
  the Rights of the Child.
* Implementing the requirements of legislation in regard to people with disabilities.
* Ensuring that workers adhere to the agreed procedures of our safeguarding policy.
* Keeping up to date with national and local developments relating to safeguarding.
* Following any **thirtyone:eight** guidelines in relation to safeguarding children and adults in need of protection.
* Supporting the safeguarding Advocate/s in their work and in any action they may need to take in order to protect children/adults with care and support needs.
* Ensuring that everyone agrees to abide by these recommendations and the guidelines established by this place of worship/organisation.
* Supporting parents and families
* Nurturing, protecting and safeguarding of children and young people
* Supporting, resourcing, training, monitoring and providing supervision to all those who undertake this work.
* Supporting all in the place of worship/organisation affected by abuse.
* Adopting and following the ‘Safe and Secure’ safeguarding standards  
  developed by **thirtyone:eight**.

**We recognise:**

* Children’s Services (or equivalent) has lead responsibility for investigating all allegations or suspicions of abuse where there are concerns about a child. Adult Social Care (or equivalent) has lead responsibility for investigating all allegations or suspicions of abuse where there are concerns about an adult with care and support needs.
* Where an allegation suggests that a criminal offence may have been committed then the police should be contacted as a matter of urgency.
* Where working outside of the UK, concerns will be reported to the appropriate agencies in the country in which we operate, and their procedures followed, and in addition we will report concerns to our agency’s headquarters.
* Safeguarding is everyone’s responsibility.

**We will review this statement and our policy and procedures annually.**

If you have any concerns for a child or adult with care and support needs then speak to one of the following who have been approved as safeguarding Advocates for this organisation.

Mr Jonathan Redden Safeguarding Advocate

Dr Jane Redden Deputy Safeguarding Advocate

Sharon Copperwheat Assistant Safeguarding Advocate

A copy of the full policy and procedures is available from the Church Office.

Signed on behalf of the Leadership Team by:

Signed \_\_\_\_\_\_**Gordon Warnes**\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_**Andrew Perkins**\_\_\_

Date \_\_\_\_\_\_\_\_**12th October 2021**\_\_\_\_\_\_

**Appendix 2 Statutory Definitions of Abuse (Children)**

Child protection legislation throughout the UK is based on the United Nations Convention on the Rights of the Child. Each nation within the UK has incorporated the convention within its legislation and guidance.

**England** The four definitions of abuse below operate in England based on the government guidance ‘Working Together to Safeguard Children (2015)’.

**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:** 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. It also includes FGM.

**Emotional abuse:** 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:** 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:** Neglect is the persistent failure to meet a child’s basic physical and/or psychological needs, likely to result in the serious impairment of the child’s health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

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

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

**Appendix 3 Definitions of Abuse (Adults)**

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

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

The Safeguarding duties apply to an adult who;

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

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

<http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>

<https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance>

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

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

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

**Sexual abuse** – including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.

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

**Financial or material abuse** – including theft, fraud, internet scamming, coercion in relation to an adult’s financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

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

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

**Organisational abuse** – including neglect and poor care practice within an Institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one’s own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

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

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

**Appendix 4 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

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

**Appendix 5 Signs of Possible Abuse in Adults**

**Physical abuse**

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

Signs of under or overuse 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

Female Genital Mutilation (FGM)

**Sexual abuse**

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

Unexplained change in behaviour or sexually explicit behaviour

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

Infections or sexually transmitted diseases

Full or partial disclosures or hints of sexual abuse

Self-harming

Emotional distress

Mood changes

Disturbed sleep patterns

**Psychological abuse**

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

Intimidated or subdued in the presence of a carer

Fearful, flinching or frightened of making choices or expressing wishes

Unexplained paranoia

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

Changes in sleep pattern or persistent tiredness

Loss of appetite

Helplessness or passivity

Confusion or disorientation

Implausible stories and attention seeking behaviour

Low self-esteem

**Financial or material abuse**

Disparity between assets and living conditions

Unexplained withdrawals from accounts or disappearance of financial documents or loss of money

Sudden inability to pay bills, getting into debt

Carers or professionals fail to account for expenses incurred on a person’s behalf

Recent changes of deeds or title to property

Missing personal belongings

Inappropriate granting and / or use of Power of Attorney

**Modern slavery**

Physical appearance; unkempt, inappropriate clothing, malnourished

Movement monitored, rarely alone, travel early or late at night to facilitate working hours.

Few personal possessions or ID documents.

Fear of seeking help or trusting people.

**Discriminatory abuse**

Inappropriate remarks, comments or lack of respect

Poor quality or avoidance care

Low self-esteem

Withdrawn

Anger

Person puts themselves down in terms of their gender or sexuality

Abuse may be observed in conversations or reports by the person of how they perceive themselves

**Institutional Abuse**

Low self-esteem

Withdrawn

Anger

Person puts themselves down in terms of their gender or sexuality

Abuse may be observed in conversations or reports by the person of how they perceive themselves

No confidence in complaints procedures for staff or service users.

Neglectful or poor professional practice.

**Neglect and acts of omission**

Deteriorating despite apparent care

Poor home conditions, clothing or care and support.

Lack of medication or medical intervention

**Self-neglect**

Hoarding inside or outside a property

Neglecting personal hygiene or medical needs

Person looking unkempt or dirty and has poor personal hygiene

Person is malnourished, has sudden or continuous weight loss and is dehydrated – constant hunger, stealing or gorging on food

Person is dressed inappropriately for the weather conditions

Dirt, urine or faecal smells in a person’s environment

Home environment does not meet basic needs (for example no heating or lighting)

Depression

**Appendix 6 Effective Listening**

Ensure the physical environment is welcoming, giving opportunity for the child or adult at risk 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 me
* I am glad you have told me
* I will try to help you

**BUT … SOME THINGS NOT TO 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

**Adoption of the Policy:**

This policy was agreed by the Leadership of BCC and will be reviewed annually each October

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

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

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

A copy of this policy is available at the BCC Office: