Safeguarding Policy

Reviewed January 2021

Reference: thirtyone:eight safeguarding policy guidelines
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Section 1- Details of Agapé Ministries Limited

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Registered Charity Number: England & Wales (258421) and Scotland (SCO42332)
Registered Company Number in England: No 949989
Insurance Company: Ansvar Insurance (Policy Number: CCP 2338323)

The following is a brief description of Agapé.

Agapé is a Christian charity dedicated to addressing the spiritual needs of the UK. For over 50 years, we’ve been inspiring people to discover Jesus at home, at work, at university, and abroad. As the UK arm of an international Christian charity, active in over 190 countries, we’re bringing people together and transforming lives.

At home
Agapé UK is strengthening relationships and promoting the importance of family life and community, to enhance the emotional and spiritual wellbeing of everyone in society. Through our Family Life relationship courses and events, we’re helping couples up and down the country to connect with one another in flourishing relationships and build a lasting relationship with Christ.

At work
Agapé UK is equipping people to confidently live and share their faith at work. We’re helping the UK’s workforce to learn more about their professional strengths and weaknesses, achieve a healthy work life balance and gain a sense of satisfaction and purpose at work. And, through our network of music professionals, Crescendo, we’re sharing our faith through music.
At university

Agapé UK has been active on university campuses across the UK for over 50 years – working with students to help them navigate the complexities of student life. Together, we’re building student communities where people from all backgrounds can discover more about themselves and explore big questions about life, faith, and God.

And abroad

Agapé UK works with a number of international partners to meet the needs of people around the world. This includes our humanitarian work with the Global Aid Network (GAiN), and the wider activities of the Agape Europe and Cru global networks.

Our Commitment

As a Leadership we recognise that as part of normal ministry activities in each of these areas our staff and volunteers may work with children or vulnerable adults and it is our responsibility 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 building constructive links with statutory and voluntary agencies involved in safeguarding.

The policy and any attached practice guidelines are based on the ten Safe and Secure safeguarding standards published by thirtyone:eight.

The Leadership undertakes to:

- endorse and follow all national and local safeguarding legislation and procedures, in addition to the international conventions outlined above.
- provide on-going safeguarding training for all its workers and will regularly review the operational guidelines attached.
- ensure that the premises meet the requirements of the Equality Act 2010 and all other relevant legislation, and that it is welcoming and inclusive.
- support the Safeguarding Coordinator(s) in their work and in any action they may need to take in order to protect children and adults with care and support needs.
- 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 Agapé we adhere to the UN Convention on the Rights of the Child and have as our starting point as a definition of abuse, Article 19:

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

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

Also for adults the UN Universal Declaration of Human Rights with particular reference to Article 5:

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

Detailed definitions, and signs and indicators of abuse, as well as how to respond to a disclosure of abuse, are included here in our policy.

See Appendix 1 Definitions of Abuse

See Appendix 2 Signs and symptoms of abuse

See Appendix 3 Responding to Abuse
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 suitability or self-declaration form depending on the role applied for.
- 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 at the appropriate level. (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.

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 employees and volunteers have been issued with a code of conduct that includes the way we work with children, young people and adults with care and support needs.
Section 3 - Practice Guidelines

As an organisation working with children, young people and adults we wish to operate and promote good working practice. This will enable employees and volunteers to run activities safely, develop good relationships and minimise the risk of false or unfounded accusation. All employees and volunteers have a code of conduct issued to them when they join and we also have specific good practice guidelines for every activity we are involved in.

Details of Agapé UK’s Practice Guidelines can be obtained from the HR Department hr@agape.org.uk

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 regard 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 thirtyeight’s safeguarding standards.

We believe good communication is essential in promoting safeguarding, both to those we wish to protect, to everyone involved in working with children and adults and to all those with whom we work in partnership. This safeguarding policy is just one means of promoting safeguarding.
Section 4 - Responding to allegations of abuse

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

Documenting a concern

The worker or volunteer should make a report of the concern in the following way:

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

**Name:** (hereafter the "Safeguarding Lead") Henrietta Duncan

**Tel:** 0121 765 4404 / 07833 100 179

**Email:** henriduncan@agape.org.uk

The above 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 Lead or, if the suspicions in any way involve the Safeguarding Coordinator, then the report should be made to:

**Name:** (hereafter the "Deputy") Ruth Birkenshaw

**Tel:** 0121 765 4404 / 07947395529

**Email:** ruthbirkenshaw@agape.org.uk

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

**thirtyone:eight:** PO Box 133, Swanley, Kent, BR8 7UQ.

Tel: 0303 003 1111.

Alternatively contact Social Services or the police.

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

Children’s Social Services

The Birmingham Multi-Agency Safeguarding Hub

Tel (office hours): 0121 303 1888

Out of hours Tel: Social Services Emergency number is 0121 675 4806

Website Address: http://www.lscbbirmingham.org.uk/index.php/safeguarding-referrals-item

Email: MASH@birmingham.gov.uk

Adult Social Services

Tel (office hours): 0121 303 1234 extension 1

Out of hours Tel: Adult Services emergency number 0121 675 4806

Website Address: http://www.birmingham.gov.uk/safeguardingadults

Email: ACAP@birmingham.gov.uk

Contacting the Police: 999 for serious crime and emergencies; 101 for urgent help and safeguarding referrals

If more appropriate, the Mental Health Social Work Teams can be contacted directly by telephone:

Central Birmingham –Phone 0121 303 5188
South Birmingham –Phone 0121 301 2830
North Birmingham –Phone 0121 464 5123

The Safeguarding Lead may need to inform others depending on the circumstances and/or nature of the concern:

- Chair of the Council of Management or member of the council responsible for safeguarding who may need to liaise with the insurance company or the charity commission to report a serious incident.
- Designated officer or LADO (Local Authority Designated Officer) if the allegation concerns a worker or volunteer working with someone under 18.

Suspicions must not be discussed with anyone other than those nominated above. A written record of the concerns should be made in accordance with these procedures and kept in a secure place.

Whilst allegations or suspicions of abuse will normally be reported to the Safeguarding Lead, the absence of the Safeguarding Lead or Deputy should not delay referral to Social Services, the Police or taking advice from thirtyone:eight.
The Leadership will support the Safeguarding Lead/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 Agapé will use this procedure. If, however, the individual with the concern feels that the Lead/Deputy has not responded appropriately, or where they have a disagreement with the Safeguarding Lead(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 Lead/ deputy is to collate and clarify the precise details of the allegation or suspicion and pass this information on to statutory agencies who have a legal duty to investigate.

Detailed procedures where there is a concern about a child

Allegations of physical injury, neglect or emotional abuse.

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

- Contact Children’s Social Services (or thirtyone:eight) for advice in cases of deliberate injury, if concerned about a child's safety or if a child is afraid to return home.
- Not tell the parents or carers unless advised to do so, having contacted Children’s Social Services.
- Seek medical help if needed urgently, informing the doctor of any suspicions.

For lesser concerns, (e.g. poor parenting), encourage parent/carer to seek help, but not if this places the child at risk of significant harm.

Where the parent/carer is unwilling to seek help, offer to accompany them. In cases of real concern, if they still fail to act, contact Children’s Social Services direct for advice.

Seek and follow advice given by thirtyone:eight (who will confirm their advice in writing) if unsure whether or not to refer a case to Children’s Social Services.

Allegations of sexual abuse

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

- Contact the Children’s Social Services Department Duty Social Worker for children and families or Police Child Protection Team direct. They will NOT speak to the parent/carer or anyone else.
- Seek and follow the advice given by thirtyone:eight if for any reason they are unsure whether or not to contact Children’s Social Services/Police. Thirtyone:eight will confirm its advice in writing for future reference.
Detailed procedures where there is a concern that an adult is in need of protection

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 Co-ordinator/Deputy will:

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

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

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

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

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

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

Allegations of abuse against a person who works with adults who are vulnerable

It is recognised that Agapé in the normal course of its activities does not work with vulnerable adults with care and support needs. However, we recognise that anyone can at some point in their life be considered vulnerable for some reason. For example, this could include physical ill health, stress or depression, family conflict, low self esteem.

Where an allegation of abuse is made about a staff member or volunteer Safeguarding Lead will:

- Contact thirtyone:eight and in discussion with them will consider appropriate action with regards to the scale of the concern.
Section 5 - Pastoral Care

Supporting those affected by abuse

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

Working with offenders and those who may pose a risk

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

Details of Agapé’s policy on employing ex-offenders can be obtained from the HR department. 
hr@agape.org.uk
Appendix 1 Definitions of Abuse

Statutory Definitions of Abuse (Children)

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

Children may be abused in a family or in an institutional or community setting; by those known to them or, more rarely, by a stranger. They may be abused by an adult or adults or another child or children.

Child protection legislation throughout the UK is based on the United Nations Convention on the Rights of the Child. Each nation within the UK has incorporated the convention within its legislation and guidance. We are aware that children with disabilities and young carers are more vulnerable to abuse. The Working Together to Safeguard Children (2018) defines a young carer as: ‘a person under 18 who provides or intends to provide care for another person (of any age, except generally where the care is provided for payment, pursuant to a contact or as voluntary work).

The four definitions of abuse below operate in England based on the government guidance ‘Working Together to Safeguard Children (2018)’.

What is abuse and neglect?

A form 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 others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults, or another child or children

Physical abuse

A form of abuse which 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

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.

Child Sexual Exploitation

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

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), ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child’s basic emotional needs.

Extremism

Extremism goes beyond terrorism and includes people who target the vulnerable – including the young – by seeking to sow division between communities on the basis of race, faith or denomination; justify discrimination towards women and girls; persuade others that minorities are inferior; or argue against the primacy of democracy and the rule of law in our society. Extremism is defined in the Counter Extremism Strategy 2015 as the vocal or active opposition to our fundamental values, including the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs. We also regard calls for the death of members of our armed forces as extremist.
Statutory 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. 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 behavior 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.

**Further Definitions of Abuse**

**Significant Harm**

This relates to the degree of harm that triggers statutory action to protect a child. It is based on the individual child's health or development compared to that which could reasonably be expected of a similar child. e.g. severity of ill treatment, degree and extent of physical harm, duration and frequency of abuse and neglect, premeditation. Department of Health guidance suggests that 'significant' means 'considerable, noteworthy or important.'

**Children in Whom Illness is Fabricated or Induced (formerly known as Munchausen’s Syndrome By Proxy)**

This is a form of child abuse in which the parents or carers give false accounts of symptoms in their children and may fake signs of illness (to draw attention to themselves). They seek repeated medical investigations and needless treatment for their children. The government guidance on this is found in 'Safeguarding Children in whom Illness is Fabricated or Induced' (2002).

**Spiritual Abuse**

Linked with emotional abuse, spiritual abuse could be defined as an abuse of power, often done in the name of God or religion, which involves manipulating or coercing someone into thinking, saying or doing things without respecting their right to choose for themselves. Some indicators of spiritual abuse might be a leader who is intimidating and imposes his/her will on other people, perhaps threatening dire consequences or the wrath of God if disobeyed. He or she may say that God has revealed certain things to them and so they know what is right. Those under their leadership are fearful to challenge or disagree, believing they will lose the leader’s (or more seriously God's) acceptance and approval.

**Domestic Violence**

The shared Association of Chief Police Officers (ACPO), Crown Prosecution Service (CPS) and government definition of domestic violence is: ‘any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults, aged 18 and over, who are or have been intimate partners or family members, regardless of gender and sexuality.’ (Family members
are defined as mother, father, son, daughter, brother, sister and grandparents, whether directly related, in-laws or step-family.) In 2004 the Government’s definition of domestic violence was extended to include acts perpetrated by extended family members as well as intimate partners. Consequently, acts such as forced marriage and other so-called ‘honour crimes’, which can include abduction and homicide, can now come under the definition of domestic violence. The definition of domestic violence in Working Together 2010 states: Forced marriage and honour-based violence are human rights abuses and fall within the Government’s definition of domestic violence. (Section 6.21) Home Office (2009) What is Domestic Violence? The Home Office defines domestic violence as ‘Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or have been intimate partners or family members, regardless of gender or sexuality’. Nearly a quarter of adults in England are victims of domestic violence. Although both men and women can be victimised in this way, a greater proportion of women experience all forms of domestic violence, and are more likely to be seriously injured or killed by their partner, ex-partner or lover.
Appendix 2 Signs of Possible Abuse

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. 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.

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
Signs of Possible Abuse (vulnerable adults)

Physical
- A history of unexplained falls, fractures, bruises, burns, minor injuries
- Signs of under or over use of medication and/or medical problems unattended

Domestic Violence
- Unexplained injuries or ‘excuses’ for marks or scars
- Controlling and/or threatening relationship including psychological, physical, sexual, financial, emotional abuse; so called ‘honour’ based violence and Female Genital Mutilation Age range extended to 16 yrs

Sexual
- Pregnancy in a woman who is unable to consent to sexual intercourse
- Unexplained change in behaviour or sexually implicit/explicit behaviour
- Torn, stained or bloody underwear and/or unusual difficulty in walking or sitting
- Infections or sexually transmitted diseases
- Full or partial disclosure or hints of sexual abuse
- Self-harming

Psychological
- Alteration in psychological state e.g. withdrawn, agitated, anxious, tearful
- Intimidated or subdued in the presence of the carer
- Fearful, flinching or frightened of making choices or expressing wishes
- Unexplained paranoia

Financial or Material
- Disparity between assets and living conditions
- Unexplained withdrawals from accounts or disappearance of financial documents
- Sudden inability to pay bills
- Carers or professionals fail to account for expenses incurred on a person’s behalf
- Recent changes of deeds or title to property

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
- Inappropriate remarks, comments or lack of respect
- Poor quality or avoidance of care
- No confidence in complaints procedures for staff or service users
- 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

Incidents of abuse may be one-off or multiple and affect one person or more.
Appendix 3 Responding to Abuse

Effective Listening

Ensure the physical environment is welcoming, giving opportunity for the child or vulnerable adult to talk in private but making sure others are aware the conversation is taking place. It is especially important to allow time and space for the person to talk.

Above everything else listen without interrupting; be attentive and look at them whilst they are speaking. Show acceptance of what they say (however unlikely the story may sound) by reflecting back words or short phrases they have used.

Don’t ask leading questions or put words into their mouth, avoid asking questions, and only use open questions if you feel that’s appropriate. Let them tell you what they feel comfortable saying and if they decide not to tell you after all, accept their decision but let them know that you are always ready to listen.

Be honest and don’t make promises you can’t keep regarding confidentiality. Use language that is age appropriate and, for those with disabilities, ensure there is someone available who understands sign language, Braille etc.

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

Helpful responses:

You have done the right thing in telling.
I am glad you have told me.
I will try to help you.
I will have to tell somebody about this.

Don’t say:

Why didn’t you tell anyone before?
I can’t believe it!
Are you sure this is true?
I am shocked, don’t tell anyone else.
I’ll keep it a secret.

What to do if you do not have consent to share the information

You should consider:

- Is anyone else at risk?
- Has a serious crime been/will be committed?
- Does the person appear to understand the implications of not doing anything?
- How likely is it that the person or someone else will come to serious harm?
- Can you provide them with more information to help them understand the risk and are there any other services who could help?
Action:

**Do not** be tempted to investigate yourself.

Immediately write down everything they have said as accurately as you can remember, using their words where possible.

Use the form below if possible, if it is not easily accessible at that moment, write it down elsewhere, trying to include all of the information possible.

If the person hasn’t given consent but you have any of the concerns listed above then you should consult the Safeguarding Lead/Deputy for advice.

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

**Safeguarding Lead:** Henrietta Duncan 0121 765 4404 / 07833 100 179 henriduncan@agape.org.uk

If she is not available, then you should report your concerns to:

**Deputy:** Ruth Birkenshaw 0121 765 4404 / 07947 395 529 ruthbirkenshaw@agape.org.uk