

Safeguarding Policy

1. ABOUT THIS POLICY

- 1.1 This policy sets out Community Action Isle of Wight's procedure to be followed by you in the event that you suspect a child or vulnerable adult may be at risk of harm.
- 1.2 This policy applies to the board of trustees, employees, volunteers, workers, agency staff, or anyone working on behalf of Community Action Isle of Wight.
- 1.3 This policy does not form part of any employee's contract of employment and we may amend it at any time.

2. GENERAL PRINCIPLES

- 2.1 Community Action Isle of Wight (CAIW) believes that it is always unacceptable for a child or vulnerable adult to experience abuse of any kind and recognises its responsibility to safeguard the welfare of all, by a commitment to practice which protects them.
- 2.2 CAIW is committed to ensuring that vulnerable people who use our services are not abused and that working practices minimise the risk of such abuse. All Trustees, staff, workers and volunteers have a specific duty to identify if it occurs and report it.

3. DEFINITIONS

Children and young people aged 18 and under.

Vulnerable adults are individuals who are over 18 years of age who may be unable to take care of themselves and unable to protect themselves from harm or exploitation by other individuals.

4. RIGHTS & RESPONSIBILITIES

- 4.1 Children, Young People and Vulnerable Adults have the right to:
 - (a) be made aware of this policy;
 - (b) have alleged incidents recognised and taken seriously;
 - (c) receive fair and respectful treatment;

- (d) be involved in any process as appropriate; and
- (e) receive information about the outcome.

5. OUR RESPONSIBILITIES

5.1 Community Action Isle of Wight has a responsibility to:

- (a) ensure volunteers, employees, trustees and anyone who works for CAIW are aware of children, young people and vulnerable adults' need for protection;
- (b) notify the appropriate agencies if abuse is identified or suspected;
- (c) support and where possible secure the safety of individuals and ensure that all referrals to services have full information in relation to identified risk and vulnerability; and
- (d) undertake a Data Barring Service (DBS) check on trustees, employees, workers and volunteers who may have access to or work with children, young people and vulnerable adults.

6. YOUR RESPONSIBILITIES

6.1 You must ensure:

- (a) you are familiar with this policy;
- (b) you take appropriate action in line with this policy, where necessary; and
- (c) you declare any existing or subsequent criminal convictions to your Line Manager.

7. SUPPORT FOR THOSE WHO REPORT ABUSE

7.1 All those making a complaint or allegation or expressing concern, whether they are staff, volunteers, service users, carers, or members of the general public should be reassured that:

- (a) they will be taken seriously; and
- (b) their comments will usually be treated confidentially, but their concerns may be shared with the appropriate authorities if they or others are at significant risk.

8. IF THERE ARE CONCERNS FOR THE WELFARE OF A CHILD/YOUNG PERSON OR VULNERABLE ADULT

8.1 If a child/young person or vulnerable adult confides in you in relation to issues of abuse or neglect, you must:

- (a) listen to the child/young person or vulnerable adult. **DO NOT** directly question them.
- (b) ensure the individual has your full attention and time.
- (c) allow the individual to give a spontaneous account, do not stop them, when they are freely recalling significant events.
- (d) make an accurate record of the discussion, where possible use the individuals own words. The record should also record:
 - (i) the date and time of the conversation; and
 - (ii) the individuals present during the conversation;

This record needs to be kept secure, as it may be required later as evidence.

- (e) do not ask the individual to repeat any of their account, as this could cause them distress.
- (f) explain that you may have to discuss matters with other individuals – do not offer false confidentiality.
- (g) reassure the individual that they have done nothing wrong, and they were right to inform you of the issue.
- (h) explain to the individual what will be done next and confirm you need to seek additional assistance to ensure their safety.

9. NOTIFYING PARENTS/CARERS

9.1 CAIW will normally seek to discuss any concerns about a child/ young person or vulnerable adult with their parents or carers. This must be handled sensitively, and the Designated Officer will make contact with the parent or carer in the event of a concern, suspicion or disclosure. However, if CAIW believes that notifying parents/carer could increase the risk to the individual or exacerbate the problem, then advice will first be sought from children or adult's social care.

10. REPORTING A SAFEGUARDING CONCERN

10.1 If you have a safeguarding concern, you must inform the Designated Officer, see details below, if the Designated Officer is implicated in your concerns, then

you should discuss your concerns with the Chief Executive Officer or directly with Social Services.

- 10.2 Consultation is not the same as making a referral but should enable a decision to be made as to whether a referral to social services or the police should progress.
- 10.3 At no point before the investigation into the concerns is complete should the individual about whom the concerns are held be informed. This may endanger the child/young person or vulnerable adult and hamper both the investigation and any subsequent actions that need to be taken. Advice on this should be sought from a Deputy Social Worker.

11. CONTACT DETAILS

11.1 The relevant contact details you will need to raise concerns are as follows:

Position	Name	Phone Number
Chief Executive Officer	Mike Bulpitt	539380
Designated Officer	Laura Reid	539371
Deputy	Sandra Shelly	539371
Trustee	Emma Corina	07787505822

12. OUTCOME

- 12.1 You should be notified what action, if any, has been taken in respect of the concern raised, and who to direct your concern to, in the event you disagree with the outcome.
- 12.2 At the conclusion of a case in which an allegation is substantiated, CAIW will review the circumstances of the case to determine whether there are any improvements to be made to the organisation's procedures or practices to help prevent similar events in the future.

13. CONTACTING FIRST RESPONSE

- 13.1 You should consult with the relevant first response team, details below, if:

- (a) you remain unsure after the internal process has concluded as to whether a safeguarding concern exists.
- (b) where there is a disagreement about whether a safeguarding concern exists.
- (c) when you are unable to consult with someone internally as to whether a safeguarding concern exists.

Children First Response Team	Telephone Number: 0300 300 0901 0300 300 0117 (24 hrs)	Email: iowcsprofessional@hants.gov.uk
Adult First Response Team & Adult Safeguarding	Telephone Number: 01983 814 980 01983 821 105 (out of hrs)	Email: abusereporting@iow.gov.uk

14. WHAT IS CHILD ABUSE?

14.1 Child abuse falls into one or more of four categories which are:

- (a) Physical abuse – this may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. It may also be caused when a parent or carer fabricates symptoms of, or induces illness in a child.
- (b) Emotional abuse – this is the persistent emotional ill treatment of a child such as to cause severe and persistent effects on the child's emotional development, and may involve:
 - conveying to a child that s/he is worthless, unloved, inadequate, or valued only insofar as s/he meets the needs of another person.
 - imposing developmentally inappropriate expectations e.g. interactions beyond the child's developmental capability, overprotection, limitation of exploration and learning, preventing the child from participation in normal social interaction.
 - causing a child to feel frightened or in danger e.g. witnessing domestic violence, seeing or hearing the ill treatment of another.
 - exploitation or corruption of a child.

- Some level of emotional abuse is involved in most types of ill treatment of children, though emotional abuse may occur alone.
- (c) Sexual abuse – this involves forcing or enticing a child to take part in sexual activities, including prostitution, whether or not s/he is aware of what is happening. Activities may involve physical contact, including penetrative and non-penetrative acts. ‘Penetrative acts’ include ‘rape’ (forced penetration of vagina, anus or mouth with a penis) and ‘assault by penetration’ (sexual penetration of vagina or anus of a child with a part of the body or an object). Sexual activities may also include non-contact activities, e.g. involving a child in looking at / production of abusive images, watching sexual activities or encouraging her/him to behave in sexually inappropriate ways. It may include use of photos, pictures, cartoons, literature or sound recordings via internet, books, magazines, audio cassettes, tapes or CDs. Children under sixteen years of age cannot lawfully consent to sexual intercourse, although in practice may be involved in sexual contact to which, as individuals, they have agreed. A child of under thirteen is considered in law incapable of providing consent.
- (d) Neglect – this is defined as 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 and development. Neglect may occur during pregnancy as a result of maternal substance misuse and once the child is born, neglect may involve failure to:
- provide adequate food, clothing or shelter (including exclusion from home or abandonment);
 - protect from physical and emotional harm or danger;
 - meet or respond to basic emotional needs;
 - ensure adequate supervision including the use of adequate care-takers;
 - ensure access to appropriate medical care or treatment;
 - ensure that her/his educational needs are met; or
 - ensure that her/his opportunities for intellectual stimulation are met.

15. TYPES OF ABUSE & BEHAVIOURS FOR VULNERABLE ADULTS

- 15.1 The types of abuse and behaviour which a vulnerable adult could be subjected to are as follows:

- (a) Physical abuse – which includes Hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions.
- (b) Sexual abuse – which includes 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.
- (c) Psychological abuse – which includes 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.
- (d) Financial or material abuse – which includes Theft, fraud, exploitation, pressure in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.
- (e) Neglect or acts of omission – this includes Ignoring medical or physical care needs, failing to provide access to appropriate health, social care, welfare benefits or educational services, withholding the necessities of life such as medication, adequate nutrition and heating.
- (f) Discriminatory abuse – this includes Racism, sexism or acts based on a person’s disability, age or sexual orientation. It also includes other forms of harassment, slurs or similar treatment such as disability hate crime.
- (g) Domestic abuse – this includes Psychological, physical, sexual, financial, emotional abuse and so called ‘honour’ based violence.
- (h) Organisational abuse – which includes Neglect and poor care practice within a care setting such as a hospital or care home or in relation to care provided in someone’s own home ranging from one off incidents to on-going illtreatment. It can be neglect or poor practice as a result of the structure, policies, processes and practices within a care setting.
- (i) Modern slavery – which includes Encompassing 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.
- (j) Self-neglect – which Covers a wide range of behaviour including neglecting to care for one’s personal hygiene, health or surroundings and behaviour such as hoarding.