

Church Urban Fund

Safeguarding Policy and Procedures

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1. Introduction

‘Safeguarding means protecting people’s health, wellbeing and human rights, and enabling them to live free from harm, abuse and neglect.’ CQC 2014

Those most in need of protection are: children / young people / adults with care and support needs

2. CUF context

The Church Urban Fund is not a direct service delivery organisation and as such its daily work does not bring its staff and volunteers into frequent unsupervised contact with children or adults at risk of abuse. However, it does work with many partner organisations through diverse networks across England. CUF’s subsidiaries partners do work with children and adults at risk of abuse in the course of their activities. CUF would expect all partners to have their own robust safeguarding policies and procedures in place. We expect any projects we grant fund working with children and young people, or vulnerable adults, to have the appropriate safeguarding policies in place, or to be in development in time for project delivery.

3. Legislative framework

This safeguarding document sets out the responsibility we have in recognising and preventing abuse and the actions we will take when abuse is disclosed, identified, suspected or alleged. It is designed and interfaced with the Local Authority Safeguarding Policy. Although the Local Authority play the lead role in protecting individuals from harm, it is everyone’s responsibility.

Safeguarding means protecting an individual’s right to live in safety and free from abuse and neglect. Organisations work together to prevent and stop risks of abuse or neglect. This includes, where capacity has been established, a regard for their views, wishes, feelings and beliefs when deciding on any actions, however complex their interpersonal relationships or unclear or unrealistic they are about their personal circumstances.

Wellbeing should always be promoted in relation to any safeguarding arrangements and this should include decisions based on a broad variety of factors in the individual's life as well as their safety.

Through our moral and legal responsibilities under current legislation, we will ensure that:

Welfare is paramount, prevention is priority, equality and protection go hand in hand, all allegations or suspicions will be taken seriously and responded to swiftly, partnership working is essential along with compliance with local agency procedures.

The national standards include:

- Empowerment – people are encouraged to make an informed decision around consent.
- Prevention – people are encouraged to stay safe by simple definitions of what abuse is and how to recognise it.
- Proportionality – the least intrusive response to the situation presented.
- Protection – support and representation for those in need.
- Partnership – localised solutions through services working in their communities, who have a part to play in helping recognise, prevent and report abuse.
- Accountability – accountability and transparency in delivering safeguarding.

At CUF we will work with the national standards in mind to ensure that we are offering a safe environment for individuals. We will also maintain Disclosure and Barring Checks for all qualifying roles covering employees and volunteers in line with legislation.

A DBS disclosure can be obtained for any post which is exempt from the provisions of the Rehabilitation of Offenders Act 1974.

Standard DBS checks contain the convictions, cautions, reprimands and warnings held in England and Wales on the Police National Computer. Standard checks no longer include a check of the old or new barred lists from 12 October 2009 and, therefore, if you are working or volunteering with children or vulnerable adults, you may be required to apply for an Enhanced DBS check.

Enhanced DBS checks are for posts involving work in regulated activity with children or vulnerable adults. The Protection of Freedoms Act (September 2012) amended the definition of regulated activity and therefore eligibility for DBS and barred list checks.

Please note the definitions of regulated activity for children and adults are very different.

4. Safeguarding Procedure (see types of abuse in appendix 1)

If a member of CUF or one of its subsidiaries staff or volunteers witnesses, suspects or has a safeguarding incident disclosed to them. They must follow the following procedure:

Doing nothing is not an option

Make safe – the first thing to do is to ensure no immediate danger; if so, we will gain emergency medical treatment or contact emergency services. If we suspect a crime then will take practical action to ensure evidence is protected.

Reporting an incident - the concern or incident will not be handled in isolation. The concern will be reported to the local authority safeguarding team without delay and within 24hours. **Contact details for Westminster Council Social Services below.**

Please report the incident to CUF's safeguarding lead; Tony Edwards, Managing Director. If the safeguarding allegation involves the Managing Director, please report the incident to the Chief Executive, Paul Hackwood.

If the safeguarding lead is not available please report the safeguarding alert/ concern to your line manager or director (if different from your line manager and line manager unavailable). If neither are available please report to a member of SMT. All potential safe guarding's should be discussed with your line manager or the safeguarding lead, even if you are unsure it's a safe guarding or not you must discuss your concerns.

We will where appropriate seek the consent of the individual involved (vulnerable person) before doing so, however, this action must not put the individual in danger.

Record - all reports will be completed (when concerning the CUF head office locality) on a **Westminster Safeguarding Adults Referral Form (Appendix 2)**, in a factual manner. All contact with the vulnerable person will be recorded in detail noting the exact words. If an alleged safe guarding is reported to CUF head office and has taken place outside of the Westminster area then it needs to be reported to the local authority where the alleged incident took place or where the victim resides. **Please follow the safe guarding reporting procedures for that particular local authority.** If practical pass the safe guarding alert onto the CUF safeguarding lead or your line manager.

Important note: If safe guarding alerts are being reported into CUF from a funded project partner or a JV. It is that organisation who needs to report the safe guarding alert to their local authority. If the partner's staff or volunteers are unsure how to do this, then CUF staff will support them as much as possible. If staff are in doubt how to proceed, they must contact the CUF safe guarding lead or their line manager for support. The most important thing is the safe guarding concern is reported to the local authority.

Should further actions or an investigation need to take place by the Local Authority then we will assist with this, ensuring correct procedures are followed and actions taken.

Consent, informed consent and capacity - Data protection issues can be avoided if consent is sought and obtained from an individual. However, if the individual may come to further harm by knowing then permission is not necessary. Evidence leading to this decision will need to be documented and submitted with the referral.

Capacity to consent is defined under the Mental Health Act 2005. A defined test is used to give guidance as to whether an individual has capacity to consent to this particular decision at this time. Every individual should be assumed to have capacity to consent unless there is clear reason to question it.

Informed consent is demonstrated by an individual indicating that they are willing to allow a third party to do this for them and they have accessed, understood and processed the information relating to make their decision without undue influence.

Confidentiality

The adult at risk should be made aware of reporting and their permission should be sought to share the information with the relevant Local Authority. However, there may be occasions where permission may not be sought and it is necessary to share information or knowledge of the person concerned to protect them from harm. This is also required when there is a consideration of public interest, for instance the perpetrator is unknown and could come into contact/ cause harm with other vulnerable people. This must be reported even without consent for the safety of others.

Please report all suspected or alleged safe guarding's relating to incidents in the CUF head office locality to Westminster Local Authority using the contact details below and using the reporting form in appendix 2.

Information Sharing / Partnerships

Working in partnership is one of the key principles of safe guarding and plays a part in recognising, preventing and reporting abuse. Sometimes it is necessary to share concerns with partner organisation's if it keeps individuals safe. However, information sharing around suspected safe guarding alerts must be carried out on a "need to know basis". Local authority safe guarding teams or Multi Agency Safeguarding Hubs MASH teams will take the lead in advising who it is appropriate to share information with once an alert has been reported.

In Church of England settings like churches or church run projects it may be appropriate for the relevant diocesan safeguarding team to be informed. However, this needs to be in line with the safe guarding reporting guidelines of that particular local authority and the local authority has the primary duty to manage all safeguarding alerts and will lead on how to proceed once an alert is made.

Safeguarding Children

Follow the same safeguarding process as outlined above. We should always involve young people in the decisions that affect them where possible and appropriate. If you have a concern about a child, you should, where possible, gain parental consent to share information unless you believe the parents may have committed the abuse or that to do so would put the child, yourself or another person at risk of harm.

Westminster Social Services

Safeguarding helpline: 020 7641 2176

Tel: 020 7641 6000 (out-of-office-hours)

Fax: 020 7641 1593

Email: adultsocialcare@westminster.gov.uk

5. Terminology

When reporting safe guarding alerts to local authorities some of the terms you may come across are:

LADO – Local Authority Designated (Safeguarding) Officer – This is a designated person within the authority for children's safeguarding.

Duty Safeguarding Lead – who will be a designated Lead for that day

MASH- Multi Agency Safeguarding Hub – a multi-agency team including; social workers, police officers, specialists for children's safeguarding.

Please don't be put off by these terms. The most important thing is to report the safeguarding concern via the local authority reporting procedure, which will be via a telephone number or email address.

6. Training

To ensure that staff and volunteers know how to recognise and report safeguarding concerns, safeguarding training will be delivered to all staff and volunteers who work for CUF and its three subsidiary programmes.

This training will focus on national legislation and standards. It will also cover CUF's safeguarding policy and procedures. Training will use safeguarding scenarios to give staff and volunteers practical examples to aid learning. All staff and volunteers will be made aware and asked to adhere to this policy as part of their terms of engagement.

Policy: Version 1: February 2018	Developed by Managing Director
Review Point	February 2019 or with significant changes to legislation

7. Appendix 1 – Definitions of Abuse

Definitions of Abuse

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. This section also contains a number of illustrative case studies showing the action that was taken to help the adult stay or become safe.

Local authorities should not limit their view of what constitutes abuse or neglect, as they can take many forms and the circumstances of the individual case should always be considered; although the criteria will need to be met before the issue is considered as a safeguarding concern. Exploitation, in particular, is a common theme in the following list of the types of abuse and neglect.

Abuse may occur in any setting for example where an adult, young person or child:

- Lives alone, with a relative, or other(s); - Attends care settings, such as residential, day care and nursing care settings for adults or school, youth clubs etc for children and young people; - Is in hospital or custodial situations; - Is receiving support services in their own home (supported housing); - Is in other places previously assumed safe; - Is in a public place - Is in education, training or a work place setting;

LINKS Care and Support Statutory Guidance 2014 <https://www.gov.uk/government/publications/care-act-2014-statutoryguidance-for-implementation> Forms of Adult Abuse

CUF takes its definitions from the Care Act 2014 Statutory Guidance 2015 published by the Department of Health in 2015.

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.

Working Together to Safeguard Children, updated March 2015

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419595/Working_Together_to_Safeguard_Children.pdf

Child Abuse

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.

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 caregivers); or
- ensure access to appropriate medical care or treatment.

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

Assessing the Seriousness of Abuse

The seriousness or extent of abuse is often not clear when anxiety is first expressed. It is important therefore, when considering the appropriateness of intervention at a service delivery level to approach reports or incidents or allegations with an open mind.

Where abuse is suspected or alleged, contact should be made with your Line Manager immediately. In the absence of your Line Manager, the relevant nominated county lead should be contacted.

When reviewing seriousness of the incident the following factors need to be considered:

- The vulnerability of the adult - The nature and extent of the abuse - The length of time it has been occurring - The impact on the individual and/or their carers/family - The risk of repeated or increasingly serious acts involving this or other vulnerable people - What action can be taken operationally to ensure that the individual is protected from further abuse.

- The vulnerability of the person who may have caused harm: Is the perpetrator a vulnerable person? If so what actions are needed to support and protect the person who may have caused harm? - Has a criminal offence taken place? - The risk of repeated or increasingly serious acts involving this or other vulnerable people.

8. Appendix 2 – Safeguarding Adults Referral Form



Safeguarding Adults Referral Form

City of Westminster

To be completed by a staff member or a third party who witnessed or was informed about the alleged or suspected abuse or neglect.

LOCAL AUTHORITY CONTACT DETAILS

Safeguarding Adults help line and ask for the Adults Access Team: 020 7641 2176

Emergency Duty Team: 020 7641 6000 (out of hours)

Secure Email: Please discuss with Adults Access Team

Email: adultsocialcare@westminster.gov.uk

The referrer must send in the referral form to social services line immediately or within 24 hours of the safeguarding concern coming to notice. If in doubt please call to discuss

Personal Details of the Adult at Risk	
FWI Number	
NHS number	
Name (include title)	
Preferred Name	
Address (include postcode)	
Tenure Type	
Household Structure	
Telephone No.	
Email Address	
Date of birth	
Religion	
First Language (interpreter required? If yes, give details)	
Gender	
<p>Ethnicity (Tick one box only)</p> <p><input type="checkbox"/> Prefer not to say</p> <p>White</p> <p><input type="checkbox"/> British</p> <p><input type="checkbox"/> Irish</p> <p><input type="checkbox"/> Any other White background</p> <p>Specify if Other:</p> <p>Mixed</p> <p><input type="checkbox"/> White and Black Caribbean</p> <p><input type="checkbox"/> White and Black African</p> <p><input type="checkbox"/> White and Asian</p> <p><input type="checkbox"/> Any other Mixed background</p> <p>Specify if Other:</p> <p>Asian, or Asian British</p> <p><input type="checkbox"/> Indian</p> <p><input type="checkbox"/> Pakistani</p> <p><input type="checkbox"/> Bangladeshi</p> <p><input type="checkbox"/> Any other Asian background</p> <p>Specify if Other:</p> <p>Black, or Black British</p> <p><input type="checkbox"/> Caribbean</p> <p><input type="checkbox"/> African</p> <p><input type="checkbox"/> Any other Black background</p> <p>Specify if Other:</p> <p>Chinese, or other ethnic group</p> <p><input type="checkbox"/> Chinese</p> <p><input type="checkbox"/> Any other</p> <p>Specify if Other:</p>	

Details of Alleged Abuse / Neglect	
Date safeguarding concern received	
Date of incident (if known)	

Details of alleged abuse / neglect	
Type of alleged abuse (tick all that apply)	<input type="checkbox"/> Physical abuse <input type="checkbox"/> Sexual Abuse <input type="checkbox"/> Psychological or emotional abuse <input type="checkbox"/> Financial or material abuse <input type="checkbox"/> Neglect/Act of Omission <input type="checkbox"/> Discriminatory abuse <input type="checkbox"/> Organisational abuse <input type="checkbox"/> Modern Slavery <input type="checkbox"/> Domestic abuse/violence <input type="checkbox"/> Self Neglect
Location of alleged abuse (tick all that apply)	<input type="checkbox"/> Own Home (excluding Residential Care Home / Nursing Care Home / Extra care housing / Supported Housing) <input type="checkbox"/> Extra care housing /Supported Housing <input type="checkbox"/> Residential Care Home <input type="checkbox"/> Nursing Care Home <input type="checkbox"/> In a community service (locations such as day care centres, community centres, schools, libraries, leisure centres) <input type="checkbox"/> In the community (locations such as businesses, offices, pubs, parks, shops/shopping centre) <input type="checkbox"/> Hospital – Acute <input type="checkbox"/> Hospital – Mental Health <input type="checkbox"/> Hospital – Community <input type="checkbox"/> Other health setting (e.g. GP surgery / dental surgery) <input type="checkbox"/> Other person's home <input type="checkbox"/> Adult's place of work or education <input type="checkbox"/> Any other setting not defined above
Have any similar concerns been raised in the past? If so, please note details	
Is this a crime or potential crime? Y/N/Not known	
If YES, has this allegation been raised with the police? Y/N	
If NO, then why not?	
If YES, then who notified the police?	
Name and contact details of police person contacted	
Date contacted	
Crime number (if known)	
Police Response	
If there are any known aspects of domestic abuse at this stage, please provide relevant details	

Has a referral to MARAC (Multi-Agency Risk Assessment Conference) been made? Y/N	
Which authority has funding responsibility? RBKC, WCC, LBHF, Other, N/A – Self Funder or CCG	
If Other give details	
Has that authority been notified? Y/N/Not applicable	
Name and contact details of the person contacted	
Date contacted	

Person Raising Concern

Include full name and contact details

Name	
Job Title	
Team/Service	
Telephone no.	
Email	

Relationship to the Adult at Risk: tick one	<input type="checkbox"/> Social care staff (LA & Independent sector staff) <input type="checkbox"/> Health staff <input type="checkbox"/> Self referral <input type="checkbox"/> Family member <input type="checkbox"/> Friend/neighbour <input type="checkbox"/> Other client <input type="checkbox"/> Care Quality Commission <input type="checkbox"/> Housing (including Supporting People) <input type="checkbox"/> Education / training / workplace establishment <input type="checkbox"/> Police <input type="checkbox"/> Other (including probation, anonymous, contract staff, Multi-Agency Public Protection Arrangements (MAPPAs), Multi-Agency Risk Assessment Conference (MARAC))
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Has the Adult at Risk given consent for this concern to be raised? Y/N/Lacks mental capacity to consent/Not known- Please give details

Has the person raising the concern discussed with the Adult at Risk that the Concern is being shared with Adult Social Care? Y/N/Lacks mental capacity to consent/Not known- Please give details

What are the Adult at Risk's (or their representative's) present views, values and beliefs about the incident that has occurred and the risks they face? What are their desired outcomes, including what they would like to happen next to make them feel safer?

What action, if any, has been taken by the person raising the concern to safeguard the Adult at Risk? Is the Adult at Risk in agreement with this action?

About the Adult at Risk

Does the Adult at Risk appear to have any care and support needs (regardless of whether or not the council is meeting them)?

Considering their care and support needs, are they able to protect themselves?
Are there any social, cultural or religious factors to take into account?
Details of any current support arrangements in place (including privately arranged / funded, health care, social care, informal support etc.)
Is the Adult at Risk likely to have substantial difficulty in being involved in the safeguarding process and if so, do they have someone to support them?
If living or staying elsewhere as a result of the alleged abuse or neglect, please give details of where/with whom

Immediate Actions Taken to Safeguard the Adult at Risk	
Is the Adult at Risk at immediate risk of abuse or neglect?	
If yes, what further immediate actions (if any) need to be taken to reduce the risk (including by who and when), and is the Adult at Risk in agreement with these actions?	
About the Person(s) Alleged to Have Caused Harm	
Name of person(s) alleged to have caused harm	
Age range Under 18, 18–24, 25-34, 35-44, 45-54, 55-64, 65+, unknown	
Gender Male, Female, unknown	
Is the person alleged to have caused harm themselves an Adult at Risk under safeguarding criteria? Y/N/Don't know	
Is the person alleged to have caused harm known to the Adult at Risk? Y/N/Don't know	
Does the person(s) alleged to have caused harm live with the Adult at Risk? Y/N/Don't know	

Is the person(s) alleged to have caused harm the primary carer for the Adult at Risk? Y/N/Don't know		
Please say which of the following categories best describes the person alleged to have caused harm	<input type="checkbox"/> Relative/Family member <input type="checkbox"/> Individual - not related (e.g. neighbour/friend/stranger) <input type="checkbox"/> Social care provider <input type="checkbox"/> Primary health care <input type="checkbox"/> Secondary health care <input type="checkbox"/> Care management/assessment staff (not social care provider staff) <input type="checkbox"/> Person unknown <input type="checkbox"/> Police <input type="checkbox"/> Regulator <input type="checkbox"/> Other	
If the person(s) alleged to have caused harm works for a health or social care provider please specify the type of service Residential care home provider, Nursing care home provider, Home care provider (including extra care schemes, supported living etc.), Hospital, Community Health Provider, Other, Not applicable		
If the person(s) alleged to have caused harm works for a health or social care provider, please give details of the provider		
Organisation Name		
Address		
If the source of risk involves a health or social care provider, then has this concern been reported to the Care Quality Commission (CQC)? Y/Not applicable		
Date Reported		
Have we any indication of a previous safeguarding concern involving the person(s) alleged to have caused harm? Y/N		
Further Information:		

Local Authority Response	
Safeguarding Adults Manager's Decision	
Name	
Job Title	
Team/Service	
Telephone no.	
Email	
Date form completed	
The 3-Point Test under Safeguarding	
Has/Is the Adult experiencing, or are they at risk of, abuse or neglect? Y/N	
Do they have needs for care and support? Y/N	

<p>As a result of those needs are they unable to protect themselves against the experience of, or risk of, abuse or neglect? Yes, No, Not applicable – does not have care and support needs and/or is not experiencing, or at risk of, abuse or neglect</p>	
<p>Decision regarding closing or progressing the Concern and Preliminary Enquiry (tick one)</p>	<p><input type="checkbox"/> Close the Concern and Preliminary Enquiry (i.e. end the Safeguarding process)</p> <p><input type="checkbox"/> Progress to Planning and Formal Enquiry</p>
<p>Rationale for decision</p>	
<p></p>	
<p></p>	