

Safeguarding Policy

Safeguarding is everyone's business. It is about being proactive in all that we do as a charity to prevent and reduce abuse.

The Faithworks (FW) Safeguarding Policy is based on both our Christian ethos and on the BCP and Dorset Safeguarding Procedures, which govern all agencies in the area dealing with abuse issues and concerns.

Faithworks is absolutely committed to, and takes seriously, its responsibility to protect and safeguard the welfare of children and adults at risk who we come into contact with. We also have a duty to safeguard and support our staff and volunteers and to reduce the risk of staff and volunteers being falsely accused of improper or unprofessional conduct.

This safeguarding policy applies to all staff and volunteers (including trustees). Specific procedures for dealing with safeguarding issues are referred to in the appendices.

1. Aims

- 1.1. In relation to safeguarding, Faithworks will seek to:
- stop abuse or neglect wherever possible;
 - prevent harm and reduce the risk of abuse or neglect to children or adults at risk in particular;
 - set out procedures for identifying and reporting cases, or suspected cases of abuse (see the appendix to this document).
 - safeguard adults in a way that supports them in making their own choices and having control about how they want to live;
 - safeguard children in a way that works with parents/ carers where possible. Note this will be over-ridden where the parents/ carers are the suspected abuser.
 - ensure that those who have been abused are supported in line with any agreed protection plan (as it pertains to working with FW);
 - promote an approach that helps improve life for the adults and children concerned;
 - raise public awareness so that communities as a whole, alongside professionals, play their part in preventing, identifying and responding to abuse and neglect.

2. Definitions

- 2.1. An Adult at Risk (under section 42 of 2014 Care Act) is someone who:
- Is aged 18 and over,
 - Has needs for care and support (whether or not the Local Authority is meeting any of those needs), and
 - Is experiencing, or at risk of abuse and/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.

Adults at risk definition may include: older people; people with mental health needs, learning disabilities, a long term illness or physical impairments; people with alcohol or

substance dependency; family carers providing assistance to a vulnerable adult; victims of domestic harm etc. This could include volunteers working with FW who could be included in the above definition of adults at risk. In our operations, FW takes a broad view of Adults and Risk.

- 2.2. A child or young person is anyone under the age of 18.
- 2.3. Child Abuse is (according to the NSPCC) when a child is intentionally harmed by an adult or another child. It can be over a period of time, or a one-off action. It can also include a child not being properly looked after.
- 2.4. Harm is defined as:
 - A single act or a repeated act;
 - An act of neglect or a failure to act;
 - Multiple acts, for example, an adult at risk may be neglected and also financially harmed;
 - Self-neglect.

The various types of abuse are listed in Appendix 2.

3. Underlying principles

- 3.1. Faithworks is absolutely committed to adherence to our statutory duties as set out in (for example) the Care Act 2014, Children Act 1989 and Domestic Abuse Act 2021. This also includes reporting of any serious incident to the Charity Commission¹.
- 3.2. The welfare of the individual is paramount and the duty to protect the welfare of children and adults at risk rests with all staff and volunteers.
- 3.3. All service users shall be treated with respect and we will create an environment across all of our operations in which vulnerable adults and children can feel safe and valued.
- 3.4. Employees/volunteers should not wait until an incident occurs to put these principles into practice. **Doing nothing is not an option**; acting positively may prevent harm arising.
- 3.5. Safer recruitment practices are in place and are detailed in our linked policies.
- 3.6. We have clear whistleblowing procedures which are suitably referenced and we promote a culture that enables issues about safeguarding and promoting welfare to be addressed.
- 3.7. We will train, equip and empower staff and volunteers to be alert to and act swiftly and appropriately in dealing with safeguarding of children and adults at risk. To this end, all Faithworks employees and volunteers working with vulnerable adults or children require an understanding of the BCP and Dorset Multi-Agency Adult and Child

¹ Examples of what is considered a serious incident can be found in https://assets.publishing.service.gov.uk/media/5bd706d9ed915d789dcd63ef/RSI_guidance_what_to_do_if_something_goes_wrong_Examples_table_deciding_what_to_report.pdf

Protection Policies and Procedures. This will be done as part of our safeguarding training:

- a) all new volunteers have a safeguarding module as part of their initial training; they are then invited for refresher training at least every 3 years they are with us.
- b) all new staff receive in-depth safeguarding training (normally given by the Local Authority); all staff attend an update session (again with Local Authority) every 3 years. Those with specific responsibilities for children receive additional training (at least every 3 years), as do our Safeguard Leads.

3.8. Whilst our procedures are set out in more detail in Appendix 1, our training and process is based around the steps of:

- a) **Recognise** – look out for signs of abuse and neglect
- b) **Record** – what you observe or what is said
- c) **Report** – your concerns to project leads and safeguard leads
- d) **Refer** – to statutory services where appropriate.

Note - any decision to refer to statutory services shall be made by staff or a trustee responsible for safeguarding, and not a volunteer. The exception to this is an emergency situation where 999 needs to be called and no staff members are immediately available.

3.9. We have clear lines of accountability for the provision of safe services and for dealing with safeguarding issues. This includes a safeguarding subgroup of the trustee board, a designated trustee with safeguarding oversight and two senior staff members designated as safeguard leads.

3.10. We are committed to appropriate inter agency collaboration in order to protect children and vulnerable adults from abuse and neglect.

3.11. Staff/volunteers will co-operate fully in any adult or child protection investigation and comply with any recommendations of an individual's protection plan where it pertains to Faithworks.

4. Risk, Disclosure and Confidentiality

4.1. Adult Safeguarding

- a) When dealing with adults, there is a presumption of capacity – every adult has the right to make their own decisions and should be assumed to have capacity to do so unless shown otherwise. Given this, service users should be supported and encouraged to make their own decisions and helped to arrive at their own solution to problems, even if we consider them to be unwise.
- b) When an individual has the capacity to make an informed decision regarding their personal circumstances, and the individual does not wish to accept any intervention, then that individual's wishes will generally be respected. Where capacity is in doubt, advice should be sought by first contacting the safeguard leads.

- c) The right for adults to make decisions and exercise choice is not unconstrained and must be assessed alongside a consideration of the risks others may be exposed to. Sometimes there are legal constraints (e.g. mental health legislation), where an individual cannot safely exercise choice for themselves. Anything done for, or on behalf of people without capacity must be in their best interests.
- d) Where the situation appears to include elements of serious crime, risk or harm to the individual or to others (in particular children), there is an overwhelming responsibility to intervene and set aside the fact that the information was provided in confidence.
- e) The decision to pass on information without the consent of a service user will not be taken lightly. Decisions about breaching confidentiality/ going against the wishes of the individual must be made in consultation with the project lead, and one of the safeguarding leads (see below for details), taking into account the capacity of the individual to understand the consequences of their action or inaction, and the reasonableness of the decision given the circumstances. In any case we may choose to seek advice from our external advisory agency or statutory body.
- f) If it should be necessary to breach confidentiality, the service user will normally be informed where this does not put the vulnerable adult at risk.
- g) Some service users may fear reprisals or not understand the seriousness of what has occurred, and may require support, whether or not they have consented to the disclosure taking place.

4.2. Child Safeguarding

- a) Where we are concerned that a young person is, or is at significant risk of, being abused, we will make a referral to the relevant statutory agency.
- b) We will normally work in conjunction with the parent/ carer and inform them of our actions, unless our concern is with the parent/ carer in which case we may choose not to inform them.

5. Contacts & Further Help

- 5.1. Faithworks Safeguarding Lead (staff) is the CEO and the deputy safeguarding lead is the Business Support Manager. The contact number for both is 01202 429037.
- 5.2. BCP Adult Social Services can be contacted on 01202 123654 (daytime) and 0300 123 9895 out of hours (emergency only). Dorset Council Social Services can be contacted on 01305 221016 (daytime) and 01305 858250 out of hours (note not 24 hours).
- 5.3. BCP Child Social Services can be contacted on 01202 123 334 (daytime) and 01202 738 256 (out of hours). Dorset Council Child Social Services can be contacted on 01305 228866 (daytime) and 01305 228558 out of hours.
- 5.4. The nominated trustee for Safeguarding is Rev. Sarah Yetman who can be contacted on 07920 005688.
- 5.5. Concerns may also be expressed to the Chair of Faithworks, who can be contacted via the office on 01202 429037.

5.6. Government advice for Practitioners worried about child abuse:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/419604/What_to_do_if_you_re_worried_a_child_is_being_abused.pdf

6. Linked Policies

This policy should be read in conjunction with the following other Faithworks policies:

DBS policy
Lone worker policy
Confidentiality policy
Professional Boundaries policy
Safer recruitment policy (both staff and volunteers)
Whistleblowing policy

7. Review of this policy

This policy will be reviewed regularly by the trustees of Faithworks. Previous versions of this document are shown below:

Date of review	File name	Where reviewed
April 2019	FW Safeguarding Adults Policy – Apr 19.doc	Trustee Board
November 2021	FW Safeguarding Adults Policy – Nov 21 v1	AGM
November 2023	FW Safeguarding Adults Policy – Nov 23	AGM

Date of review	File name	Where reviewed
March 2019	FWW Child Protection Policy – Mar 2019.doc	Trustee Board
November 2021	FW Child Protection Policy – Nov 21 v1	AGM
November 2023	FW Child Protection Policy – Nov 23	AGM

8. Change Log

Date of review	Key Changes Made
May 2024	Merge Child and Adult Safeguarding Policies
	Separate Policy (Main Policy) from Procedure (Appendix 1)

Appendix 1: Specific Safeguarding Procedures

1. General

- 1.1. All members of staff and volunteers are required to report any suspected abuse and be aware of the appropriate reporting and support procedure for safeguarding. We will exercise a 'professional curiosity' and will be alert to the fact that safeguard issues present in many forms and anyone could become, or be, at risk.
- 1.2. Staff and volunteers shall respond to all concerns, worries, suspicions, disclosures, allegations. If there is a safeguarding concern staff and volunteers must not keep information about their concerns to themselves and must follow the procedure below for reporting safeguarding concerns.
- 1.3. In any emergency situation where someone is in immediate danger, we will call 999 and inform emergency services.
- 1.4. For staff and volunteers we follow the '4R's Principles':
 - a) **Recognise:** the signs of abuse and how to deal with disclosures
 - b) **Record:** what you have seen and what has been said
 - c) **Report:** report your concerns to the appropriate person/s
 - d) **Refer:** as necessary to the appropriate statutory bodies, in discussion with one of the safeguard leads.

2. Recognising possible abuse

- 2.1. Sometimes it will not be obvious whether a situation could be considered abusive or criminal or meet other definitions of concern. If in any doubt, then the employee or volunteer must talk to their line manager or a FW safeguard lead so that guidance is sought about the appropriate course of action.
- 2.2. Signs of abuse can take many forms:
 - a) Physical signs
 - Any injuries, bruises, etc. which are not consistent with the explanation given for them.
 - Injuries to the body in places which are not normally exposed to falls etc.
 - Injuries which appear to have been caused by a weapon e.g. cuts, welts, etc.
 - Injuries which have not received medical attention.
 - Self-mutilation or self-harming e.g.. cutting, slashing, drug abuse.
 - b) Emotional signs
 - Changes or regression in mood and behaviour. Also depression/aggression.
 - Nervousness or inappropriate fear of particular individuals.
 - Changes in behaviour e.g., under-achievement or lack of concentration, inappropriate relationships with others e.g., excessive dependence attention-seeking behaviour.

- c) Signs of neglect.
- Regular poor hygiene.
 - Persistent tiredness.
 - Inadequate clothing.
 - Excessive appetite.
 - Failure to thrive e.g. poor weight gain, a child consistently being left alone and unsupervised.
- d) Indicators of possible sexual abuse
- Any direct disclosure concerning sexual abuse.
 - Excessive preoccupation with sexual matters and detailed knowledge of.
 - Adult sexual behaviour, or someone who regularly engages in age-inappropriate sexual play.
 - Child/Young person 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.
 - Other emotional signs (see above) may be indicative of sexual or some other form of abuse.

NOTE - It should not be assumed that in any set of circumstances where predisposing factors are present, there is actual harm occurring. The important point is that a discussion takes place or a referral leads to gathering of information and then a detailed assessment to define the risk and agree necessary action.

3. How to react when someone wants to talk about abuse

3.1. General

- Take them seriously (however unlikely the story may sound).
- Keep calm.
- Look at the person.
- Be honest.
- When talking with a child, let them know you will need to tell someone else – don't promise confidentiality.
- Reassure them they are not to blame for the abuse.
- Never push for information.
- Ask questions for clarification only (asking only high level open questions); avoid asking questions that suggest a particular answer. Once you are clear that there is a safeguarding risk then you should stop asking questions.

3.2. Helpful things to say or show

- Show acceptance of what the person says.

- “I am glad you have told me”.
- For a child you can say “I will help you”; for an adult, as if you can help.

3.3. Avoid saying

- “Why didn’t you tell anyone before?”.
- “I can’t believe it”.
- “Are you sure this is true?”.
- Never make false promises.
- Never make statements such as “I am shocked!”, or “don’t tell anyone else”.

3.4. Concluding

- Reassure the person that they were right to tell you and that you take them seriously.
- Subject to issues of confidentiality and autonomy, let the person know what you are going to do next and that you will let them know what might happen.
- Record what has been said and immediately report the matter, as per procedures.

4. Responsibilities for raising a concern (where there is a risk of suicide)

4.1. Staff and volunteers should contact the emergency services if a client:

- a) Is currently significantly harming themselves, just has, or is about to.
- b) Is unable to respond (e.g. is losing consciousness).
- c) Clearly intends to take their own life.

4.2. Where a client has a suicide plan in place a referral to the appropriate statutory or other support services should be made (guidance should be sought from the safeguarding leads).

4.3. Staff and volunteers should be aware that the risk of suicide is higher if a client has taken alcohol, drugs, or is on medication; has previously attempted suicide or has a history of mental health issues.

4.4. Where concerns are raised and the client is not in the same place as a volunteer or staff member (e.g. is on the phone) then the staff member or volunteer should try to find out the location of the person, whether they are alone, and whether they are under the influence of alcohol, drugs or other substance, before deciding on a course of action.

4.5. If you are concerned that someone will leave to act to take their own life, make a note of their dress any bags they are carrying or any defining features so that you can describe them to the emergency services if needed.

5. Responsibilities for raising a concern (where there is a suspicion of abuse)

If you are an employee or volunteer and you suspect abuse, or you are being told about alleged abuse, you should:

- 5.1. Listen carefully to what the person reporting the alleged abuse is saying, accept this without challenge. If necessary, ask very high-level questions ONLY to establish the **basic** facts, and reassure them that the matter will be taken seriously. You are ONLY asking questions to ascertain whether abuse has taken place at which point questioning should stop and left for statutory agencies as appropriate.
- 5.2. If the person reporting the abuse is not the individual concerned, then you should not take the initiative in discussing the matter with the client; you should simply follow the appropriate actions described below.
- 5.3. Do not under ANY circumstances:
 - a) get the person to justify what they are saying,
 - b) get the person to go into detail about what has happened,
 - c) promise that you'll keep what they say a secret,
 - d) be judgemental,
 - e) contact the alleged abuser.
- 5.4. Report the concern to the project lead, line manager or one of the safeguarding leads. A decision will then be taken as to next steps, including whether to refer the case to statutory services. Referrals to statutory services, except in emergency situations, should be made by a staff member and not a volunteer.
- 5.5. Record the incident in writing (electronically or manually) as soon as possible; seek to recall the exact words used by the person; state who was involved, any other witnesses, the appearance and behaviour of the person, including any injuries observed; keep the record factual, and confidential. Do NOT make an audio or video recording of the conversation. Also record any follow up discussions held about the disclosure, any decisions made, and actions taken, including timescales for completion.
- 5.6. **Important** - where a child is involved, if the child could be at risk by returning to their home/ carer, you must act immediately and not release the child. Speak to your line manager/ project lead or one of the safeguarding leads straight away and confirm the course of action. If they are not available, then call the police via 999.
- 5.7. Where there is physical evidence suggesting a crime may have been committed, contact the police immediately and follow their advice; try not to disturb the scene i.e. do not clean up, wash anything or throw anything away; secure the area where the incident took place and make notes of the state of the victim's clothing or any injuries observed.
- 5.8. All referrals to any statutory service must be written up and reported to a Faithworks safeguarding lead as soon as possible. Other concerns that are not reported to

statutory bodies should be recorded (e.g., on Charity Log) and if considered significant should be reported to a safeguarding lead.

- 5.9. If the alleged abuser is also a service user, then a member of staff will need to be allocated to attend to their needs and ensure that they do not pose a risk to other vulnerable adults.
- 5.10. If the alleged abuser is a member of staff or a volunteer or there are any concerns regarding the behaviour of staff or volunteers, then this should be reported directly to the CEO or if not possible to one of the other staff or trustee safeguarding leads and appropriate action will be taken. Anyone involved in whistleblowing will be protected in line with the Faithworks Whistle-blowing Policy.

6. Other Practical Considerations

All staff and volunteers:

- 6.1. Will be recruited using safer recruitment principles, including the requirements for DBS certificates for specific roles, the use of probationary periods and reference checking. This is covered in more detail in our safer recruitment and DBS policies.
- 6.2. Are responsible for their own actions and behaviour and should avoid any conduct which would lead any reasonable person to question their motivation and intentions.
- 6.3. Should know the name of the designated safeguard leads within Faithworks and where to get help and support.
- 6.4. Should work, and be seen to work, in an open and transparent way.
- 6.5. Should apply the same professional standards regardless of who they are dealing with.
- 6.6. Shall not give their personal details such as address or phone number to service users (including children of service users).
- 6.7. Shall not be alone in a room with a service user or child. This includes transporting individuals. Readers should refer to the Faithworks lone working policy for further details.
- 6.8. Shall do our utmost to accommodate if the child / adults at risk expresses a wish to talk to a male or female member of staff.
- 6.9. Shall take note that there may be occasions when someone in distress (especially a child) needs comfort and reassurance. This may include age-appropriate physical contact. Staff should remain self-aware to ensure that their contact is not seen as threatening, intrusive or subject to misinterpretation. Individuals have the right to decide how much or how little physical contact they have with others. Except in exceptional circumstances, such as where they need medical attention, their wishes should always be respected. With regard to children, it is appropriate to hold and comfort a distressed child but be aware that the child may not interpret this contact in the manner in which you intend it. Extra caution may be required where a child has suffered physical abuse or neglect. In the child's view, physical contact might be associated with such experiences and lead to staff/volunteers being vulnerable to allegations of abuse. It is recognised that many children are extremely needy and seek out inappropriate physical contact. In such circumstances staff/volunteers should deter the child sensitively by helping them to understand the importance of personal boundaries.

- 6.10. Should avoid behaviour which might be misinterpreted by others. Where an incident occurs which may result in an action being misinterpreted and/or an allegation made against a member of staff/volunteer, the relevant information should be recorded and reported to the project lead and safeguard lead as soon as possible.
- 6.11. Should ensure they are dressed decently, safely, and appropriately for the tasks they undertake.
- 6.12. Should be aware that breaches of the law and other professional guidelines could result in criminal and/ or disciplinary action being taken against them.
- 6.13. Shall store all records securely and not share information in any form with anyone not directly involved in the case.

Appendix 2: Types Of Abuse

The following forms of abuse are taken from the BCP Safeguarding Adults Board²: and from the NSPCC³

Physical abuse: Physical abuse is any way of intentionally causing physical harm. This may involve hitting, slapping, kicking, shaking, throwing, poisoning, burning or scalding, drowning, biting and scratching, breaking bones, or otherwise causing physical harm. It also includes making up the symptoms of an illness or causing a person to become unwell. It also includes misusing medication, controlling what someone eats or denying someone of their liberty.

Domestic violence: Domestic abuse is any incident of threatening behaviour, violence or abuse between adults who are or have been in a relationship together, or between family members, regardless of gender or sexuality. This may be a one-off incident or a pattern of incidents or threats, violence or controlling behaviour. It also includes being forced to marry, honour based violence and female genital mutilation (FGM). Domestic abuse can happen inside or outside the home, on-line or on the phone.

Sexual abuse: This may involve a person in a sexual activity which is unwanted or not understood. It includes rape, indecent exposure, inappropriate looking or touching, or sexual activity where the other person is in a position of power or authority. They may include non-contact activities, such as involving others in the production of sexual online images, or forcing others to watch sexual activities.

Grooming: Grooming is when someone builds a relationship, trust and emotional connection with someone, usually a child or young person so they can manipulate, exploit and abuse them. Anybody can be a groomer, no matter their age, gender or race. Grooming can take place over a short or long period of time – from weeks to years.

Psychological or Emotional abuse: The persistent emotional maltreatment of a person. This includes intimidation, threats, humiliation, extortion, racial, verbal or psychological abuse, conveying to a person that they are worthless or unloved or valued only insofar as they meet the needs of another person. It includes exploitation, coercion, harassment, online or mobile phone bullying and isolation. It may feature ignoring or humiliating an individual, making them the subject of jokes, blaming them or scapegoating. It may involve trying to control their lives and not allowing them to be individuals. For children it may involve age or developmentally inappropriate expectations being imposed on them or interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction

Financial or material abuse: This includes the theft or misuse of money, property or personal possessions; it also includes putting pressure on a person in connection with wills, property or inheritance. It also includes postal or internet scams.

Modern slavery: This includes slavery, a person being forced to work for little or no pay (including in the sex trade), being held against their will, tortured, abused or treated badly by others.

² www.bcpsafeguardingadultsboard.com/what-is-safeguarding.html

³ www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/

Discriminatory abuse: This includes treating people less favourably and unfairly on the grounds of a person's race, ethnicity, religion or belief, age, gender, gender identity, disability, culture, sexuality or mental health needs. Self-inflicted injury may be a sign that abuse is taking place, e.g., because someone feels disturbed. Hate crime is a form of discriminatory abuse.

Organisational abuse: This includes neglect and providing poor care in a care setting such as a hospital or care home, or in a person's own home. This may be a one-off incident, repeated incidents or on-going ill-treatment.

Neglect and acts of omission: This is the persistent failure to meet basic physical or psychological needs, which is likely to result in the serious impairment of health. It includes not providing food, clothing, attention or care; it also includes withholding of aids or equipment (continence, walking, hearing, glasses) and putting someone at risk of infection. Failure to provide access to appropriate health or social care and misuse of medication by inappropriately giving medication, overdosing or withholding it are also examples, imposed isolation or confinement are also included. In relation to children it can also include failure to provide suitable education, suitable supervision and neglect of a child's basic emotional needs.

Self-neglect: This may involve a person being unable, or unwilling, to care for their own essential needs, including their health or surroundings (for example, their home may be very unclean, or there may be a fire risk due to their hoarding).

Other forms of abuse that may trigger a safeguarding concern are:

Coercive Control: an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.

Cyber Bullying: the use of electronic communication to bully a person, typically by sending messages of an intimidating or threatening nature.

Criminal exploitation - is abuse where people are manipulated and coerced into committing crimes. Gangs may be involved.

Exploitation by radicalisation: Radicalisation refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups.

Sexual exploitation: The term "sexual exploitation" means any actual or attempted abuse of a position of vulnerability, differential power, or trust, for sexual purposes, including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another.