**Joint Activities & Motor Education Service**

**Safeguarding & Child Protection**

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and Risk Identification Tool– updated version on JAMES Shared Area and [Continuum of Need](https://saferbradford.co.uk/media/0fabac3o/con-10-02-23update.pdf)

This document operates as part of the wider JAMES portfolio of policies and procedures.

JAMES wanted to thank PRISM Independent School and Young Lives Bradford for their support in the update of this document.

JAMES mission is;

***“To provide an effective, caring and understanding environment where young people and families can overcome disadvantage and lack of provision to achieve their full potential in life”***

In achieving this JAMES understands we have a critical role to ensure that all young people and families accessing our services are kept safe. Our responsibility extends to others operating within the organisation, including all; staff, volunteers, trustees and student placements, but also beyond our walls and to address all reports and concerns regardless of their location.

The Voluntary Sector are taking on increasing service delivery to those facing disadvantage, where as a result JAMES promotion of welfare and wellbeing will be part of a multi-agency response in Bradford District; where everyone has a responsibility.

The young people, families and all who participate at JAMES, have the right to protection, regardless of age, gender, race, culture, disability or other characteristic. At JAMES we respect all who engage with us; supporting them to overcome individual barriers, giving them the confidence and ability to sustain positive changes in their lives. We work to build an effective, caring and understanding environment, creating a culture of security, where people feel valued and listened to. Those that engage with JAMES drive our programmes, creating services which reflect the needs and resilience of our communities. As a result our safeguarding ethos is an all-encompassing approach, with children and young people at the very centre, where they understand and are supported at every point along their journey.

JAMES is committed to safer recruitment and the guidelines within this document are for all staff and volunteers to follow when faced with safeguarding and child protection situations. We all have a responsibility and need to take an active role in supporting young people and families, ensuring we do not miss an opportunity to make a positive difference or protect others.

This document will be available for inspection and reference at all times, as well as being accessible on our website, at JAMES sites, for all staff and volunteers and as part of our induction process.

JAMES Management Team

# Document Aims:

This document provides guidelines to help ensure

* the safety of children, young people and families who come into contact with our services
* all JAMES staff, trustees and volunteers, understand their child protection and safeguarding responsibilities
* JAMES is working within the principles, requirements and duties established by the purpose of the Acts:
* Children Act (1989/ 2004)
* Disability Discrimination Act (1995/2005) as replaced by the Equality Act (2010)
* Data Protection Act (2018) General data Protection Regulation (GDPR)
* Homelessness Reduction Act (2017)
* Female Genital Mutilation Act (2003) – Serious crime Act (2015)
* Human Rights Act (1998)
* Education Act (2002/2011)
* Sexual Offences Act (2003)
* Safeguarding Vulnerable Groups Act (2006)
* Safeguarding Children and Safer Recruitment in Education (2012)
* Protection of Freedoms Act (2012)
* Children and Families Act (2014)
* Statutory Framework for the Early Years Foundation Stage (2021)
* Disqualification under the Childcare Act (2006/ 2018)
* Information sharing – Advice for practitioners providing safeguarding services to children, young people, parents and carers (2018)
* Special Educational needs and disability (SEND) code of practice: 0 – 25 – Statutory guidance for organisations who work with and support children and young people who have special educational needs or disabilities; HM Government (2014 / 2020)
* What to do if you’re worried a child is being abused (March 2015)
* The Teachers Standards (2011 / 2021)
* Working Together to Safeguard Children (2018/ 2022)
* Counter-terrorism and Security Act (2015) (section 26 Prevent duty)
* Safer working Practice Guidance (2022)
* The Care Act (2014)
* Keeping Children Safe in Education (Sept 2024)
* Children missing education (20132/ 2016)
* United Convention of the Rights of the Child (1989)
* JAMES follow the West Yorkshire child protection procedures set out by Safer Bradford <http://saferbradford.co.uk>
* Plus the Continuum of Need and Risk Identification Tool for Bradford District (2023) [continuum of need](https://saferbradford.co.uk/media/0fabac3o/con-10-02-23update.pdf)

JAMES work with, support and sometimes lead different agencies to enable the most appropriate form of intervention to take place. This policy aims to outline this role, the procedures that staff should take and guidance on issues related to safeguarding and child protection generally, it also provides information. It is not exhaustive. All staff should put the needs and safety of the children, young people and families at the centre of any decision they need to take. We all have a responsibility to not miss an opportunity to keep JAMES service users safe.

**SEXUAL OFFENCES ACT 2003: Abuse of Trust**

The purpose behind the offences in the Act is to enable the prosecution of abusive and exploitative sexual activity. To achieve this, the Act includes a number of offences that criminalise sexual activity between under 18s and under 16s. However, this will not lead to the prosecution of mutually agreed sexual activity within normal adolescence behaviour, where there is no evidence of sexual exploitation or coercion.

Abuse of trust is created where a person aged 18 or over in a position of trust/power abuses that power in a sexual manner (this can be actual, intent, exposure to, etc) In cases of Abuse of Trust the child may be aged 16 or 17.

The legislation describes a number of situations whereby a sexual relationship with someone of 16 or 17 (under 18) is against the law. These include:

* In a hospital, a nursing home, children’s home or other institution providing health and/or social care.
* When being looked after by the local authority, whether in foster care, residential care or semi-independent accommodation.
* In full time education.
* In detention under any court or enactment.

Reference is made to working on an individual basis by providing services under, or pursuant to, section 114 of the Learning and Skills Act 2000. This category covers employees who provide or secure support for young people facing barriers to effective participation in learning. They also provide information, advice, guidance and personal development opportunities and broker access to specialist help on such issues as drug abuse or teenage pregnancy. Therefore, in line with JAMES protocols this will be viewed as a disciplinary matter.

B. **Principles Relating to Risk and Abuse**

JAMES staff and volunteers must always be aware and open to the issue of risk and abuse, and must therefore:

* Always be open to the possibility that young people may be living with or in danger of abuse, or risk.
* Remember disclosure may not always be immediate.
* Aware that young people may go to great lengths to hide risk or abuse.

Reasons include:

* + because they wish to protect others (including, sometimes, the perpetrator),
  + because they are ashamed,
  + because they are fearful of the consequences of disclosure,
  + because they think it is their fault.
* Acknowledge that the young person’s experience is real and a starting point from which the worker can begin to assist the young person in obtaining help.
* Always take seriously disclosure of abuse or risk. Young people rarely make up such things. Never indicate disbelief or surprise - your reaction to an attempt at disclosure may be critical in a young person deciding whether or not to take the issue forward.
* Always follow these guidelines when dealing with issues of disclosed or **suspected** abuse or risk.
* Be aware that disclosure may raise issues for yourself and/or others working with you. This may be unexpected and can never form part of your discussions with young people. It is essential you use your own support networks to address this. These may include supervision both managerial and non-managerial, as well as support from colleagues and friends.

# How do You Know When Abuse or Risk May Exist?

There is no sure way of ‘recognising’ young people who are at risk or living with abuse. Instead there are factors that may or may not be indicators of abuse. As ‘indicators’ these factors cannot be seen as evidence, so a checklist is not helpful.

JAMES staff have a role to build positive relationships with young people and families, which often means they are well placed to notice any outward signs of abuse and/or any significant changes in behaviour.

JAMES follows an open approach to safeguarding, where we maintain a ‘it could happen here’ ethos to support a culture of transparency.

If you have any concerns about a young person whom you feel may be showing signs of risk, or abuse, yet are uncertain, use the steps outlined in these guidelines and speak to Kevin Metcalfe or Angela Stack; Designated Safeguarding Officers (DSO).

# c. Roles & Responsibilities

# What Role Does JAMES Play?

JAMES should provide an environment in which young people and families feel safe and are able to disclose abuse and/or circumstances in which they are or feel at risk.

JAMES is NOT an investigative agency for child protection. This means if we have concerns about a young person we must alert the relevant people using the procedures outlined below. We will continue to work with the young person but we will not assume an investigative role.

The staff member will make it clear to all young people that confidentiality cannot be guaranteed, and if a young person is considered ‘at risk’ the information will be passed to the relevant agencies, (see appendix B)

JAMES work in partnership with other agencies, including Pupil Referral Units (PRU), other education providers and Children’s Social Care. As a result JAMES staff will be part of a range of multi-agency panels including Child Protection Conferences/Strategy meetings and has signed up to the Bradford Continuum of Need and Risk Identification Tool (2019)

**Role & Responsibilities of JAMES Trustees**

The Trustees have overall responsibility for monitoring child protection at JAMES by:

* Having organisational DSO; Kevin Metcalfe (Operations Manager) and Angela Stack
* Ensuring that there is a member of the governing body who has particular responsibility for safeguarding and child protection; Paul Robinson
* Reviewing policies and procedures in line with the Bradford Safeguarding Partnership and other appropriate guidance, on at least an annual basis
* Receiving regular reports from the Management Team on safeguarding and child protection
* Ensuring all staff and volunteers are made aware of Bradford Safeguarding Partnership procedures and where to locate them.
* Ensuring appropriate procedures are in place to deal with allegations against a member of staff or volunteer
* Ensuring that appropriate ongoing training is provided so that staff maintain knowledge of safeguarding and child protection issues and are aware of any new developments.

**Management Team’s Roles and Responsibilities**

* Ensuring all staff, trustees and volunteers are given a copy of this Safeguarding document and the implications on their role are fully explained.
* Ensuring all members of staff and volunteers are made aware of their responsibilities in relation to the disclosure or discovery of child abuse/harm and JAMES procedures for dealing with such incidents.
* Ensuring all members of staff and volunteers are made aware of the main forms of abuse and their symptoms
* Develop a clear framework for behaviour management for any children/ young people
* Ensuring that all staff and volunteers have enhanced DBS checks and any online pre-recruitment checks for short-listed candidates
* Check staff’s knowledge and identify training needs around safeguarding issues.

**Staff Roles & Responsibilities**

We recognise that some of the young people and families engage with JAMES, where they do not with other provision. In addition, some of the young people and families have more daily contact with JAMES than with any other agency. Therefore staff and volunteers are well placed to observe children and spot potential indicators of abuse. Kevin Metcalfe is the Designated Safeguarding Officer (DSO) for young people and Angela Stack is the DSO for the Family programmes. The deputy designated person is Anna Shepherd.

JAMES has a Mental Health Champion within the staff team; Kam Singh Kaddra.

**The Designated Safeguarding Officer is responsible for:**

* Coordinating action within JAMES and liaising with social care and other agencies over cases of abuse and suspected abuse
* Acting as a source of advice within JAMES and supporting/guiding referrals
* Ensuring that staff are familiar with the child protection policies and procedures
* Referral of individual cases of suspected abuse or harm to the relevant social care agency
* Organising in house training on safeguarding at least annually and signpost to relevant training on safeguarding practice
* Informing parents/carers of the responsibilities of staff members with regard to safeguarding and child protection procedures
* Ensuring that any referred young person who is absent is followed up with contact to the family and where no contact is possible to the referrer. Where there is persistent absenteeism (10 continuous days) JAMES will follow CME guidelines and notify the council – see attendance policies.
* Making any Prevent referrals to the local authority and discuss any concerns with them.
* Escalate any cases where necessary.
* Ensuring there is an up to date log of safeguarding flags/concerns where any actions are addressed timely.
* Ensuring JAMES undertake appropriate filtering and monitoring processes

Where referrals are made to social care these should be documented within 24 hours. The DSO is responsible for following up any referrals where concerns remain. Where there is uncertainty about making a full referral, advice can be sought from the advice line at the Integrated Front Door (IFD).

**JAMES staff and volunteers are responsible for:**

* Being alert to the signs and symptoms of abuse and their responsibility for the immediate referral of any concerns to the DSO.
* Providing information for use in multi-agency meetings and to DSO
* Receiving and applying any recommendations resulting from a multi-agency meeting
* Supporting young people and families who wish to make a disclosure
* Establishing and maintaining an environment where young people and families feel secure, are encouraged to talk, and are listened to.
* Implementing JAMES Health and Safety policies and procedures in order to maintain a safe and secure setting.
* Ensuring that young people know there are adults at JAMES whom they can approach if they are distressed or worried.
* Promoting anti-discriminatory and anti-oppressive practice in line with JAMES policy by providing positive role models, promoting diversity and by acknowledging and respecting the individual needs.
* Being aware of JAMES whistle blowing policy and are encouraged to raise any concerns relating to practice.
* Ensuring that every effort will be made to minimise the time when members of staff are left alone with a young person. If it is necessary for a member of staff to be alone with a young person then staff should be vigilant and minimise their time in vulnerable situations.
* Ensuring that if a young person makes inappropriate physical or verbal contact with a member of staff, or another participant, the incident must be reported to the DSO and recorded on the JAMES incident record and addressed immediately.
* Ensuring they are mindful of how they approach young people and families both physically and verbally. All contact should be appropriate to their age and emotional understanding and unnecessary or potentially inappropriate contact will be avoided.
* Ensuring that they are aware that their actions, however well intentioned, may be misconstrued and therefore they must ensure that they consider, and are aware of, the implications of their actions at all times.
* Be aware of and adhere to the JAMES code of conduct at all times.
* Ensure their safeguarding training is updated at least every three years.

New staff and volunteers are familiarised with this Safeguarding and Child Protection document as part of their induction.

* All JAMES staff are encouraged to report (even on a sense of unease or a nagging doubt) about other staff via this safeguarding process, even where they might not perceive it reaches the threshold of harm. Examples could include; being over friendly with children, having favourites; taking photographs of children on their mobile phone; engaging with a child on a one-to-one basis in a secluded area or behind a closed door; or using inappropriate sexualised, intimidating or offensive language. Any such concerns should be shared with the DSO, deputy or JAMES Chair, properly recorded and dealt with appropriately. This should also protect staff from potentially false allegations, or misunderstandings.

**Training**

All JAMES staff and volunteers will attend training at least every three years. The DSO will undertake training every two years in order for them to fulfil there role. All staff will undertake Prevent Awareness training. The DSO will be able to provide advice and support to members of staff on protecting children from the risk of radicalisation. Most full-time staff will be trained in First Aid.

**Raising Awareness of Safeguarding & Child Protection**

JAMES is committed to raising awareness of safeguarding and child protection and to equipping young people and families with the skills needed to keep them safe. It aims to do this by:

* Ensuring staff have access to appropriate training and resources.
* Including opportunities in the curriculum and our programmes that will help young people and families to develop skills they need to recognise and stay safe from abuse.
* Supporting young people and families to learn about online Safety.
* Providing opportunities for outside agencies to work alongside our young people and families
* Ensuring that young people and families know what to do if they have worries or concerns
* Providing young people and families with the opportunity to share their worries or concerns via a range of mediums

D**. Handling Disclosures**

# This section needs to be read in conjunction with section G (Absolute confidentiality)

**R**ecent research has outlined that a large number of young people have not felt supported when making a disclosure. Nothing should be considered trivial and all disclosures should be listened to and reported to the DSO and all young people making a disclosure should be treated with the utmost respect throughout and after disclosure.

When a young person discloses information about abuse to a member of staff, it may be done indirectly and be limited in detail. An abused young person is likely to be under severe emotional stress and the member of staff chosen may be the only adult with whom the young person feels it is safe to talk. The member of staff will need to reassure the young person and retain their trust, whilst explaining the need to inform other professionals.

In any discussions with the young person:

* Be accessible and receptive
* Listen carefully
* Do not ask leading questions
* Take it seriously
* Reassure the child/young person that they are right to tell.
* Inform the child/young person that you will have to pass the information on, highlight the confidentiality statement
* Negotiate getting help

Make careful records of what was said using the young person’s own words, do not use your own interpretation; it is vital that this is factual information and is recorded as soon as is practicable following the disclosure. Date, time and sign the record. This record could be used in any subsequent legal proceedings. Details of the referral should be documented within 24 hours and copied to your line manager.

Do not:

* Jump to conclusions, speculate or accuse anybody.
* Stop a child/young person from freely recalling significant events.
* Directly question the young person or suggest words for him/her to use.
* Interrupt the child/young person or try to get the young person to disclose all the details.
* Show shock or ask the young person if they are sure.

# E. Types of Abuse, Neglect and other Considerations

A young person up to the age of 18 years is considered to be abused or at risk of abuse by parents or carers “*when the basic needs of the young person are not being met through avoidable acts of either commission or omission so as to have caused or to have placed the young person at risk of significant harm*”.

Child abuse manifests itself in a variety of ways, some overt and some less obvious. All members of staff and volunteers are committed to maintaining a vigilant approach to identify potential cases. Safeguarding is not just about protecting children from deliberate harm. Somebody may abuse or neglect a young person 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. **Extra familial harm** was often previously known as contextual safeguarding and refers to harm caused by people outside the family such as peers, strangers or other known adults. **Intra familial harm** is the term used for harm caused by family members. Staff also need to be aware that all types of abuse can be child on child abuse not just adult to child.

**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 feigns the symptoms of, or deliberately causes ill health to a child whom they are looking after (this situation is commonly described using terms such as fabricated or fictitious illness – previously known as Munchausen by proxy).

**Emotional Abuse**

Emotional abuse is the persistent emotional ill treatment 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 feature age or developmentally inappropriate expectations being imposed on children. It may involve 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 ill treatment of a child though it may occur alone.

**Sexual Abuse and harassment**

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative (e.g. rape) or non-penetrative acts. They may include non-contact activities, such as involving children in looking at, or in the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways. Harassment is behaviour characterized by the making of unwelcome and inappropriate sexual remarks or physical advances.

**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. It may involve a parent or carer failing to provide adequate food, shelter and clothing, failing to protect a child from physical harm or danger, or the failure to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child’s basic emotional needs.

**Domestic Abuse**

Children may suffer both directly and indirectly if they live in households where there is domestic abuse. Domestic abuse is likely to have a damaging effect on the health and development of children, and it will often be appropriate for such children to be regarded as children in need. Domestic abuse can also be experienced from child-to-parent, and, or between siblings.

**Online Abuse**

Online abuse is any type of abuse that happens on the web, whether through social networks, playing online games or using mobile phones. Online abuse may be part of abuse that is taking place in the real world (for example bullying or grooming). Or it may be that the abuse only happens online (for example persuading children to take part in sexual activity online). Children can feel like there is no escape from online abuse – abusers can contact them at any time of the day or night, the abuse can come into safe places like their bedrooms, and images and videos can be stored and shared with other people.

**Child Exploitation**

Child sexual exploitation (CSE) and Child Criminal exploitation (CCE) are types of abuse. Children in exploitative situations and relationships receive something such as gifts, money or affection as a result of performing sexual activities or others performing sexual activities on them. Children or young people may be tricked into believing they're in a loving, consensual relationship. They might be invited to parties and given drugs and alcohol. They may also be groomed and exploited online. CCE is often referred to as County Lines where young people are trapped in an exploitative situation where they are then forced to sell drugs or be involved in criminal activities. Children are victims in these circumstances.

**FGM**

Female genital mutilation (FGM) is the partial or total removal of external female genitalia for non-medical reasons. It's also known as female circumcision or cutting. Religious, social or cultural reasons are sometimes given for FGM. However, FGM is child abuse. It's dangerous and a criminal offence. There are no medical reasons to carry out FGM. It doesn't enhance fertility and it doesn't make childbirth safer. It is used to control female sexuality and can cause severe and long-lasting damage to physical and emotional health. As FGM is illegal this should be reported to the Police via the 101 non-emergency number, staff need to speak to the JAMES DSO/ Deputy to ensure this takes place.

**Bullying/ Cyber-Bullying**

Bullying is behaviour that hurts someone else – such as name calling, hitting, pushing, spreading rumours, threatening or undermining someone. It can happen anywhere – at school, at home or online. It’s usually repeated over a long period of time and can hurt a child both physically and emotionally. Bullying that happens online, using social networks, games and mobile phones, is often called cyber-bullying. A child can feel like there’s no escape because it can happen wherever they are, at any time of day or night.

**Child Trafficking**

Child trafficking and modern slavery are child abuse. Children are recruited, moved or transported and then exploited, forced to work or sold. Many children are trafficked into the UK from abroad, but children can also be trafficked from one part of the UK to another.

**Grooming**

Grooming is when someone builds an emotional connection with a child to gain their trust for the purposes of sexual abuse, sexual exploitation or trafficking.

Children and young people can be groomed online or face-to-face, by a stranger or by someone they know - for example a family member, friend or professional. Groomers may be male or female. They could be any age. Many children and young people don't understand that they have been groomed or that what has happened is abuse.

**Self-neglect** - This covers a wide range of behaviour concerning a person’s personal hygiene, health or surroundings and includes behaviour such as hoarding. It should be noted that self-neglect may not prompt a section 42 enquiry. An assessment should be made on a case-by-case basis. A decision on whether a safeguarding response is needed will depend on the person’s ability to protect themselves by controlling their own behaviour. There may come a point when they are no longer able to do this, without external support.

**Forced marriage**

Forced marriage is against the law and occurs when, one or both spouses do not consent to a marriage and some element of duress is involved. Duress might include both physical and/or emotional/psychological pressure. Forced marriage is recognised as an abuse against human rights and will also constitute abuse within the context of this Multi-Agency Safeguarding Adults Policy and Procedure if the person is also an adult at risk.

The Forced Marriage Unit is a joint initiative between the Home Office and the Foreign and Commonwealth Office providing specialist advice and guidance. The guidance recommends forced marriage of an adult at risk, should be dealt with within the safeguarding adults procedure. The *One Chance Rule* is that sometimes there will only be one chance to help a person facing forced marriage, hence reference should be made with urgency to the Multi-Agency Practice Guidelines listed above.

The police should always be contacted for advice in relation to suspicions or concerns about forced marriage.

In addition, the Forced Marriage Unit provides a confidential advice and assistance for**:**

* those who have been forced into marriage
* those at risk of being forced into marriage
* people worried about friends or relatives
* professionals working with actual or potential victims of forced marriage

Forced marriage should be reported to the police. If the person has needs for care and support, and is unable to protect themselves as a result, a safeguarding concern should also be raised.

The Forced Marriage Unit website provides a wealth of information and guidance

www.fco.gov.uk/forcedmarriage, together with a helpline: 020 7008 0151

**Honour-based violence**

So-called 'honour-based violence’ is a crime or incident, which has or may have been, committed to protect or defend the perceived honour of the family and/or community.

Honour-based violence can take many forms, it is used to control behaviour within families to protect perceived cultural and religious beliefs and/or honour. Examples may include murder, fear of or actual forced marriage, domestic violence, sexual abuse, false imprisonment, threats to kill, assault, harassment and forced abortion. This list is not exhaustive.

Women are predominantly (but not exclusively) the victims and the violence is often committed with a degree of collusion from family members and/or the community.

Honour-based violence is a crime and should be reported to the police. If the person has needs for care and support, and is unable to protect themselves as a result, a safeguarding concern should be raised.

**Anti-Radicalisation and Extremism (The Prevent Duty)**

We will ensure that staff are provided with appropriate training and information to enable them to assess the risk of young people and families being drawn into extremist ideas that are part of terrorist ideology and identify any young person who may be at risk and how to support them. We recognise that young people with low aspirations are more vulnerable to radicalisation and therefore we strive to equip our service users with confidence, self-belief, respect and tolerance as well as setting high standards and expectations for themselves.

Concerns will be discussed with the young person and their family whenever possible and with the Local Authority Prevent co-ordinator and referrals made to the Channel programme when appropriate. We recognise that during the process of radicalisation it is possible to intervene to prevent vulnerable people being radicalised.

Radicalisation is defined as the act or process of making a person more radical or favouring of extreme or fundamental changes in political, economic or social conditions. Extremism is defined by HM Government as ‘vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs; and/or calls for the death of members of our armed forces, whether in this country or overseas’.

All staff members are aware of these issues and have accessed training.

JAMES works within our services to promote the Fundamental British Values, tolerance and respect for diverse views, while challenging prejudice of any kind.

Concern from staff member to be brought to DSO immediately

DSO call Prevent education officer or prevent co-ordinator 01274 437770

To decide on further action such as notifying the police or a Channel referral.

**Children Absent from Education or services**

All staff should be aware that children being absent from education or other services, particularly repeatedly, and/or for prolonged periods, and children missing education can act as a vital warning sign of a range of safeguarding possibilities. This may include abuse and neglect such as sexual abuse or exploitation and can also be a sign of child criminal exploitation including involvement in county lines. It may indicate mental health problems, risk of substance abuse, risk of travelling to conflict zones, risk of female genital mutilation, ‘honour’-based abuse or risk of forced marriage. Early intervention is essential to identify the existence of any underlying safeguarding risk and to help prevent the risks of a child going missing in future. It is important that staff are aware of the procedures when children and young people are absent.

**Child on Child Sexual Violence and Sexual Harassment**

Context Sexual violence and sexual harassment can occur between two children of any age and sex. It can also occur through a group of children sexually assaulting or sexually harassing a single child or group of children. Children who are victims of sexual violence and sexual harassment will likely find the experience stressful and distressing. This will, in all likelihood, adversely affect their attainment and engagement.

Sexual violence and sexual harassment exist on a continuum and may overlap, they can occur online and offline (both physical and verbal) and are never acceptable. It is important that all victims are taken seriously and offered appropriate support. Staff should be aware that some groups are potentially more at risk. Evidence shows girls, children with SEND and LGBT children are at greater risk.

All JAMES Staff should be aware of the importance of:

• Recognising the extent/scale of sexual harassment. Acknowledging that it can

happen outside/ inside organisations; on or offline and understand that it can be driven by wider societal factors such as everyday sexism/ sexist language

• making clear that sexual violence and sexual harassment is not acceptable, will never be tolerated and is not an inevitable part of growing up;

• not tolerating or dismissing sexual violence or sexual harassment as “banter”, “part of growing up”, “just having a laugh” or “boys being boys”; and

• challenging behaviours (potentially criminal in nature), such as grabbing bottoms, breasts and genitalia, flicking bras and lifting up skirts, or dropping/pulling down trousers. Dismissing or tolerating such behaviours risks normalising them.

Reporting sexual violence or sexual harassment

The initial response to a report from a child or young person is important. It is essential that JAMES staff reassure all victims that they are being taken seriously and that they will be supported and kept safe. A victim should never be given the impression that they are creating a problem. It is important that all JAMES staff (and especially DSO and deputy) understand consent. This will be especially important if a child or young person is reporting they have been raped. Nor should a victim ever be made to feel ashamed for making a report. If staff have a concern or a child or young person makes a report to them, they should follow the safeguarding process as set out in this policy.

It is important to also recognise that children or young people may not directly tell staff about their abuse – eg staff may overhear a child/ their friend talking about it. The key consideration is for staff not to view or forward illegal images of a child. The highlighted advice provides more details on what to do when viewing an image is unavoidable. If possible, staff should manage reports with two members of staff present, (preferably one of them being the DSO or a deputy). As is always the case, if staff are in any doubt as to what to do they should speak to the DSO (or a deputy). All cases should be dealt with on a case by case basis and due to the extremely complex nature of these allegations appropriate responses carefully considered and decisions never taken in isolation.

**Children Who Abuse Other Children**

JAMES recognises that children and young people are capable of abusing their peers. JAMES works to minimise the risk of child on child abuse and will investigate and deal with any allegations robustly. Where needed risk assessments will be carried out and strategies put in place to protect the young person. Concerns raised will be treated seriously and followed up in a timely and sensitive fashion.

The new government guidance/legislation on sexual violence and sexual harassment 2021 will be followed.

It is important to be conscious that any child who is engaging in abusive behaviour towards others may have been subject to abuse from other children or from adults. Children who abuse others should be held responsible for their abusive behaviour, whilst being identified and responded to in a way which meets their needs as well as protecting others. In such incidences, JAMES will follow guidance issued in relation to children who abuse others and make referrals to social care and/ or police as appropriate.

**Malicious Claims**

JAMES should consider any appropriate steps relating to deliberately invented or malicious claims, but also consider whether all unfounded claims are a cry for help. Those making reports may have been abused themselves and need a referral to children’s social care services. Such considerations must be responded to appropriately and under the guidance of the DSO and Deputy.

# F. Absolute Confidentiality

No service for young people, or any individual, should ever guarantee a young person absolute confidentiality. Referred young people will be made aware and supported to complete and sign a data recording and sharing form (see appendix B).

**When to Share Information**

There are situations when staff must share information and any GDPR is overruled:

* Where there is a child protection issue (i.e. young person is at risk of suffering harm);
* Where the life of the young person or a third party is at risk;
* When sharing the information with your immediate team (where appropriate); or on a need to know basis.
* When in supervision with your line manager.

Every young person should be made aware of the confidentiality boundaries of the organisation, each project should ensure a young person is aware of the likely or possible outcomes of the information being passed on to another agency. This is essential if the young person is to retain any control or self-determination (and therefore trust in JAMES). If the decision is made to pass on information the worker should attempt to obtain the young person’s permission to do so (**failure to obtain the consent will not constitute a reason for not passing on the information).**

**G.** **Action to be taken if abuse is suspected**

Whenever any member of staff suspects that a young person has suffered abuse or is at risk of suffering abuse, the worker must inform the JAMES DSO. In consultation with the worker, a decision must be made as to whether there are grounds for suspecting abuse or potential risk of abuse.

In the case of immediate risk or concern the DSO or the allocated worker will contact Social Care. It is unacceptable to delay the referral as this could put the young person further at risk.

All relevant information recorded on the appropriate referral form must be passed on and should include the young person’s name, address, date of birth, telephone contact numbers of parents/carers and details of the allegation where possible.

An accurate written record must be kept of all that has occurred. The written record must include a factual account of what is alleged to have occurred or been said using the young person’s own words, including any visible marks or injuries (see Appendix A Skin Map). This record must be timed, dated and signed.

Referring School/Referral Unit and/or Social Care, as the lead agency will decide who is the appropriate person to contact and inform parents.

When a child requires medical attention and there is suspicion of abuse, Social Services will make appropriate arrangements to accompany the young person. Where a parent/guardian is unwilling/unable to attend, the young person must be accompanied at all times by a responsible adult, who will be identified in discussion with Social Care, the young person and School/referring unit or agency.

There are strict procedures in the event of an allegation against a member of staff. (see Allegations policy ).

If you think a child is at immediate risk of harm you need to contact Children's Social Care’s IFD on **01274 435600** for action to be taken to safeguard the child.

If there are concerns that a child may be at risk of sexual exploitation then a West Yorkshire CSE Risk Assessment should be sent to Children's Social Care IFD, sent to: childrens.enquiries@bradford.gov.uk

If you do not have a secure email, please fax to: **01274 435607**

Please make sure the vulnerabilities and indicators (see Threshold document appendix 1) of the young person are identified on the form.

Referrer will be contacted and informed of the outcomes and actions recommended from Childrens social care. Staff should inform themselves of this document and a range of additonal guidelines including the government document. ‘what to do if you’re worried a child is being abused’ <https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused--2>

# H. Codes of Practice

# For the purposes of this document, the following issues have been highlighted.

**STAFF**

At no time is any non-approved adult to have access to young people without constant supervision from an approved member of staff. NB. 'Approved' means an adult who has been cleared in accordance with DBS. Volunteers must be cleared in accordance with all the procedures required for the appointment of paid staff.

Regular team meetings and sessional briefings should be held to clarify child protection roles and responsibilities and to ensure that all work is delivered proactively and reactively in issues relating to child protection.

**DBS Checks**

Any employee or volunteer whose DBS check is considered unsuitable will have the right to put forward a reason/account of the incident/incidents in question.

If a potential employee/volunteer fails to pre-notify JAMES of any historical incidents that show up on the DBS check then their employment will be subject to review. Once all information has been gathered, regarding any DBS recordings, the Management Team will make an informed judgement, taking into account the nature of any incident and the age of the person when this happened. Staff must also notify the management team of any personal incident involving the police or Children’s Social Care at the earliest opportunity – failure to do so could result in dismissal.

No one will be considered with any history of offences against children.

**Working with Young People**

Ensure that at all times and in all places, full and detailed consideration is given so that you do not place yourself in a vulnerable position as far as safeguarding and child protection is concerned.

Avoid physical contact with young people, e.g. do not encourage physical displays of affection; do not engage in physical 'horseplay'.

Ensure that you maintain professional boundaries with both staff and young people and families in all situations.

Keep full and detailed written records of all child protection related incidents. These must be kept locked securely. Include date, time, name(s) of people involved and details of incident/allegation, including where and when.

Ensure that the Childline number and other local agency information is prominently displayed in JAMES buildings

* **Childline 0800 1111**
* **NSPCC 0800 800500**

# i. Record Keeping

Accurate record keeping is an essential part of best practice in all work with young people. In matters of child protection in particular it can allow the building of a wider picture and identify patterns of behaviour.

All sites/projects are expected to keep accurate and as detailed as possible records of work undertaken including incidents/concerns arising out of contact with young people.

If a concern arises regarding child protection an additional recording should be kept in a separate log. All concerns, however small, should be recorded, the written record must be signed and dated and timed as this may be read for evidence. Make sure you are careful not to ask leading questions.

If there are signs of physical abuse, the worker should use a skin map, with the young person’s permission (see appendix A), to record marks and should give a brief description of their size, colour etc. Workers should not investigate markings or disturb any clothing. Do not further investigate, i.e. asking friends, etc. Workers should record details of any alleged marks but must state whether or not they have seen them. They should state the source of any allegations. (i.e. a friend said they’d seen a bruise).

NB. Where an injury is not visible then a worker must not undress a young person in order to see if there are any marks. Undressing the young person in these circumstances could constitute assault.

# J. Allegations against staff – see JAMES Allegations Policy

Allegations made against an outside organisation or individual; these might be allegations from community groups, sports associations or other service providers.

JAMES will follow this safeguarding policy and procedures and our DSO will inform the local authority designated officer (LADO) if a safeguarding allegation is made by JAMES against an external individual or organisation.

# K. Communication with the community and media

Under no circumstances should any member of JAMES staff respond to queries from the public and/or the media. All such queries will be dealt with through the Management Team. In the event that you are contacted please record the following details about the person who has contacted you:

* Name
* Telephone number
* Organisation
* Deadline
* Their line of enquiry/questions
* Tell them the matter will be looked into and that someone will call them back shortly. Then pass all this information to a member of the Management Team.

**Appendix A**

RECOGNITION OF CHILD ABUSE (SKIN MAP)

**NAME OF YOUNG PERSON**

**DATE OF BIRTH**



DATE

NAME OF REFERRER

SIGNATURE OF REFERRER

APPENDIX B

**Consent to receive a service & for information to be recorded & shared**

1. **What we will record about you**

We may keep paper files or electronic files on our computer system. These may include photographs, videos and other personal information. All our records will be factual but may sometimes contain a workers opinion. Any contact we have with you or with someone else about you will be recorded including phone calls, text messages and letters sent and received. Notes taken at meetings attended will also be saved onto the file.

1. **The reasons that we record the information about you**

A record is held about you so we can decide how we can best help you and show the people that fund us how we have helped you. How much progress you have made and in which areas, plus which bits to focus on where you need more support.

1. **If you want to see your record**

If you would like to see your record you can speak to a member of staff and they will contact a manager and ask for your record for you.

1. **Who will have access to your information and who may it be shared with**

Any of the staff team has access to records. The staff will often share information from your record with their managers and occasionally with funders and inspectors. People looking at the records will be able to see all of your record.

1. **What will happen to your record when we no longer work with you**

After we finish working with you we still have to keep the records for several years.

1. **Confidentiality**

The information recorded about you will not be shared with anyone, apart from people like those listed above, without your consent, unless this is considered by JAMES to be needed to protect yourself, or others, to stop, or help the police with a crime, or because we have to by law, for example due to a Court Order.

**If I have any questions about the information recorded about me I understand that I can discuss this with my worker or a JAMES manager.**

**I agree to JAMESrecording and sharing information about me, as explained above.**

**Name of person receiving the service:**

**Date of birth:**

**Signature of child/young person:**

**Signature of worker:**

**Date:**

**Joint Activities & Motor Education Service**

**Safeguarding Adults**

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This document operates as part of the wider JAMES portfolio of policies and procedures.

JAMES mission is;

***“To provide an effective, caring and understanding environment where young people and families can overcome disadvantage and lack of provision to achieve their full potential in life”***

In achieving this JAMES understands we have a critical role to ensure that all who access our services are kept safe. Our responsibility extends to others operating within the organisation, including all; staff, volunteers, trustees and student placements.

The Voluntary Sector are taking on increasing service delivery to those facing disadvantage, where as a result JAMES promotion of welfare and wellbeing will be part of a multi-agency response in Bradford District; where everyone has a responsibility.

The young people, families and all who participate at JAMES, have the right to protection, regardless of age, gender, race, culture, disability or other characteristic. At JAMES we respect all who engage with us; supporting them to overcome individual barriers, giving them the confidence and ability to sustain positive changes in their lives. We work to build an effective, caring and understanding environment, creating a culture of security, where people feel valued and listened to. Those that engage with JAMES drive our programmes, creating services which reflect the needs and resilience of our communities.

JAMES is committed to safer recruitment and the guidelines within this document are for all staff and volunteers to follow when faced with safeguarding and child protection situations. We all have a responsibility and need to take an active role in supporting young people and families, ensuring we do not miss an opportunity to make a positive difference.

This document will be available for inspection and reference at all times, as well as being accessible on our website, at JAMES sites, for all staff and volunteers and as part of our induction process.

JAMES Management Team

**Document Aims:**

The Care Act 2014 has now placed safeguarding adults on a statutory footing with new duties and responsibilities.

This document provides guidelines to help ensure that

a) Everyone has the right to live their life free from violence, fear and abuse

b) All adults have the right to be protected from harm and exploitation

c) All adults have the right to independence, which involves a degree of risk.

JAMES supports the JOINT MULTI-AGENCY SAFEGUARDING ADULTS POLICY & PROCEDURES and the Bradford Safeguarding Adults Board which has informed this document:

<https://saferbradford.co.uk/adults/>

JAMES work with, support and sometimes lead different agencies to enable the most appropriate form of intervention to take place. This policy aims to outline this role, the procedures that staff should take and guidance on issues related to safeguarding, it also provides information. It is not exhaustive. All staff should put the needs and safety of our participants at the centre of any decision they need to take. We all have a responsibility to not miss an opportunity to keep JAMES service users safe.

**What is Safeguarding**

Adult safeguarding means protecting a person’s rights to live in safety, free from abuse and neglect. An adult at risk is any person who is aged 18 years or over and at risk of abuse or neglect because of their needs for care and support. Where someone is over 18 but still receiving children’s services and a safeguarding issue is raised, the matter should be dealt with as a matter of course by the adult safeguarding team.

Safeguarding focuses on people who, because of their vulnerable situation, are least able to protect themselves from harm. At times it is not just the people with decision making impairment but also adults with no underlying cognitive impairment but whose physical situation, or brief period of illness, has temporarily affected their ability to protect their own interests.

It does not mean taking away their rights to make choices and to decide how to live their lives. People are entitled to decide how they manage their safety provided they have the mental capacity to make this decision and others are not also at risk. Abuse is the misuse of power, trust, respect, control and/or authority; it violates a person’s human and civil rights.

**An adult at risk – definition**    
Is a person (18 and over) who has care and support needs (irrespective of whether such needs are being formally met) **and**; is experiencing, or is at risk of abuse or neglect **and**; is unable to protect themselves because of their care and support needs. 

**Making safeguarding personal** (MSP)   
   
MSP means that safeguarding:

* *Is person led;*
* *Is outcome focused;*
* *Enhances involvement, choice and control.*

It is important that conversations are had with the person to ensure their desired outcomes are identified and that safeguarding interventions are introduced to meet such outcomes. These outcomes should be measured at the end of the intervention. MSP supports personalisation, putting the person in control of shaping their intervention, this removes the new need to follow a process.   
   
The key focus is on developing a real understanding of what people wish to achieve. This includes agreeing, negotiating and recording their desired outcomes, working out with them (and their representatives or advocates if they lack capacity) how best those outcomes might be reached, and the extent to which desired outcomes have been realised at the end point.

**6 Safeguarding Principles:**

All staff have the responsibility to follow the six safeguarding principles enshrined within The Care Act 2014:

Principle 1 Empowerment – Personalisation and the presumption of person-led decisions and informed consent.

*‘I am asked what I want as the outcomes from the safeguarding process and these directly inform what happens’*

Principle 2 Prevention – It is better to take action before harm occurs.

*‘I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help’*

Principle 3 Proportionality – Proportionate and least intrusive response appropriate to the risk presented.

*‘I am sure that the professionals will work for my best interests as I see them and they will only get involved as needed’*

Principle 4 Protection – Support and representation for those in greatest need

*‘I get help and support to report abuse. I get help to take part in the safeguarding process to the extent to which I want and to which I am able’*

Principle 5 Partnerships – Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.

*‘I know that staff treat any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together to get the best result for me’*

Principle 6 Accountability – Accountability and transparency in delivering safeguarding.

*‘I understand the role of everyone involved in my life’*

In developing this policy JAMES is committed to

a) Ensuring that there is a consistent and effective response to any concerns, allegations or disclosures of abuse

b) Supporting staff in reporting and investigating incidents of adult abuse

c) Ensuring that staff and volunteers have the knowledge and understanding about adult protection and receive training on implementing safeguarding procedures

d) Working in partnership with other organisations

e) Monitoring and evaluating our own practices

f) Contributing towards inter-agency adult protection investigations and risk management plans

g) Encouraging staff and members of the public to report abuse or suspicions of abuse

h) Working towards creating safer services

j) Making safeguarding personal: promoting and empowering JAMES service users

**Types of Abuse, Neglect and other Considerations**

**How do You Know When Abuse or Risk May Exist?**

This guidance should not limit what constitutes abuse or neglect. The specific circumstances of an individual case should always be considered. The following is a list of some forms of abuse, but it is not exhaustive.

JAMES staff have a role that is about building positive relationships, which often means they are well placed to notice any outward signs of abuse and/or any significant changes in behaviour.

If you have any concerns about an adult whom you feel may be showing signs of risk, or abuse, yet are uncertain, use the steps outlined in these guidelines and speak to Kevin Metcalfe; Designated Safeguarding Officer (DSO).

**Discriminatory abuse** – Discrimination on the grounds of race, faith or religion, age, disability, gender, sexual orientation and political views, along with racist, sexist, homophobic or ageist comments or jokes, or comments and jokes based on a person’s disability or any other form of harassment, slur or similar treatment. Excluding a person from activities on the basis they are ‘not liked’ is also discriminatory abuse.

**Domestic abuse** - The cross-government definition of domestic violence and abuse is: any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between people aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass but it is not limited to:

* psychological
* sexual (including female genital mutilation)
* financial
* emotional
* forced marriage
* honour-based violence

A new offence of coercive and controlling behaviour in intimate and familial relationships was introduced in the Serious Crime Act 2015. Serious Crime Act 2015 - Legislation.gov.uk The offence imposes a maximum five years imprisonment. The offence closes the gap in the law around patterns of coercive and controlling behaviour during a relationship between intimate partners, former partners who still live together, or family members, sending a clear message that it is wrong to violate the trust of those closest to you, providing better protection to victims experiencing continuous abuse allowing for earlier identification, intervention and prevention.

In relation to high risk domestic violence cases a Multi-Agency Risk Assessment Conference (MARAC) meeting may be held. MARAC meetings include representatives of local police, probation, health, children and safeguarding adults, housing practitioners, substance misuse services, Independent Domestic Violence Advisers (IDVAs) and other specialists from statutory and voluntary sectors.

The aims of a MARAC are as follows:

· to safeguard adult victims who are at high risk of future domestic violence and abuse

· to make links with other public protection arrangements in relation to children, the perpetrator and people at risk

· to safeguard agency staff, and

· to work towards addressing and managing the behaviour of the perpetrator

Safeguarding adults services and domestic violence services need to work together to ensure the safety, protection, needs and wishes of the person at risk are met.

Domestic violence can be reported to the police. If the person has needs for care and support, and is unable to protect themselves as a result, a safeguarding concern should be raised. The police and safeguarding adults services will both work with domestic violence services for that area.

**Modern slavery** - Slavery, servitude and forced or compulsory labour. A person commits an offence if:

The person holds another person in slavery or servitude and the circumstances are such that the person knows or ought to know that the other person is held in slavery or servitude, or

The person requires another person to perform forced or compulsory labour and the circumstances are such that the person knows or ought to know that the other person is being required to perform forced or compulsory labour. There are many different characteristics that distinguish slavery from other human rights violations, however only one needs to be present for slavery to exist. Someone is in slavery if they are:

* Forced to work – through mental or physical threat
* Owned or controlled by an “employer”, usually through mental or physical abuse or the threat of abuse
* Dehumanised, treated as a commodity or bought and sold as property
* Physically constrained or has restrictions placed on his/her freedom of movement
* Subject to human trafficking

Contemporary slavery takes various forms and affects people of all ages, gender and race. Adults who are enslaved are not always subject to human trafficking. Recent court cases have found homeless adults promised paid work opportunities enslaved and forced to work and live in dehumanising conditions, and adults with a learning difficulty restricted in their movements and threatened to hand over their finances and work for no gains. From 1 November 2015, specified public authorities have a duty to notify the Secretary of State of any person identified in England and Wales as a suspected victim of slavery or human trafficking, under Section 52 Modern Slavery Act 2015.

**Neglect and acts of omission** - Ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, social care or educational services, and the withholding of the necessities of life such as medication, adequate nutrition and heating. Neglect also includes a failure to intervene in situations that are dangerous to the person concerned or to others, particularly when the person lacks the mental capacity to assess risk for themselves

**Organisational abuse** - Is the mistreatment, abuse or neglect of an adult by a regime or people in a setting or service where the adult lives or that they use. Such abuse violates the person’s dignity and represents a lack of respect for their human rights.

**Physical abuse** - Assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions

**Emotional/ Psychological abuse** - 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.

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

**Self-neglect** - This covers a wide range of behaviour concerning a person’s personal hygiene, health or surroundings and includes behaviour such as hoarding. It should be noted that self-neglect may not prompt a section 42 enquiry. An assessment should be made on a case-by-case basis. A decision on whether a safeguarding response is needed will depend on the person’s ability to protect themselves by controlling their own behaviour. There may come a point when they are no longer able to do this, without external support.

**Financial Abuse**

Including; theft, fraud, internet scamming and coercion or misappropriation of property. Financial abuse is the main form of abuse investigated by the Office of the Public Guardian both amongst adults at risk and children. Financial recorded abuse can occur in isolation, but as research has shown, where there are other forms of abuse, there is likely to be financial abuse occurring. Although this is not always the case, everyone should also be aware of this possibility.

**Forced marriage**

Forced marriage is against the law and occurs when, one or both spouses do not consent to a marriage and some element of duress is involved. Duress might include both physical and/or emotional/psychological pressure. Forced marriage is recognised as an abuse against human rights and will also constitute abuse within the context of this Multi-Agency Safeguarding Adults Policy and Procedure if the person is also an adult at risk.

The Forced Marriage Unit is a joint initiative between the Home Office and the Foreign and Commonwealth Office providing specialist advice and guidance. The guidance recommends forced marriage of an adult at risk, should be dealt with within the safeguarding adults procedure. The *One Chance Rule* is that sometimes there will only be one chance to help a person facing forced marriage, hence reference should be made with urgency to the Multi-Agency Practice Guidelines listed above.

The police should always be contacted for advice in relation to suspicions or concerns about forced marriage.

In addition, the Forced Marriage Unit provides a confidential advice and assistance for**:**

* those who have been forced into marriage
* those at risk of being forced into marriage
* people worried about friends or relatives
* professionals working with actual or potential victims of forced marriage

Forced marriage should be reported to the police. If the person has needs for care and support, and is unable to protect themselves as a result, a safeguarding concern should also be raised.

The Forced Marriage Unit website provides a wealth of information and guidance

www.fco.gov.uk/forcedmarriage, together with a helpline: 020 7008 0151

**Honour-based violence**

So-called 'honour-based violence’ is a crime or incident, which has or may have been, committed to protect or defend the perceived honour of the family and/or community.

Honour-based violence can take many forms, it is used to control behaviour within families to protect perceived cultural and religious beliefs and/or honour. Examples may include murder, fear of or actual forced marriage, domestic violence, sexual abuse, false imprisonment, threats to kill, assault, harassment and forced abortion. This list is not exhaustive.

Women are predominantly (but not exclusively) the victims and the violence is often committed with a degree of collusion from family members and/or the community.

Honour-based violence is a crime and should be reported to the police. If the person has needs for care and support, and is unable to protect themselves as a result, a safeguarding concern should be raised.

**Hate crime**

Hate crime is taken to mean any crime where the perpetrator’s prejudice against any identifiable group of people is a factor in determining who is victimised. Hate crime is a form of discriminatory abuse.

Hate crimes happen because of hostility, prejudice or hatred of people due to:

* disability
* gender identity
* race, ethnicity or nationality
* religion or belief
* sexual orientation

The police and other organisations work together to ensure a robust, coordinated and timely response to situations where adults at risk become a target for hate crime. Coordinated action will aim to ensure that victims are offered support and protection and action is taken to identify and prosecute those responsible.

Hate crime should be reported to the local community safety initiative. If the person has needs for care and support, and is unable to protect themselves as a result, a safeguarding concern should also be raised. In the event that a person is at immediate risk, contact the police.

**FGM**

Female genital mutilation (FGM) is the partial or total removal of external female genitalia for non-medical reasons. It's also known as female circumcision or cutting. Religious, social or cultural reasons are sometimes given for FGM. However, FGM is child abuse. It's dangerous and a criminal offence. There are no medical reasons to carry out FGM. It doesn't enhance fertility and it doesn't make childbirth safer. It is used to control female sexuality and can cause severe and long-lasting damage to physical and emotional health. As FGM is illegal this should be reported to the Police via the 101 non-emergency number, staff need to speak to the JAMES DSO/ Deputy to ensure this takes place.

**Anti-Radicalisation and Extremism (The Prevent Duty)**

We will ensure that staff are provided with appropriate training and information to enable them to assess the risk of young people and adults being drawn into extremist ideas that are part of terrorist ideology and identify anyone who may be at risk and how to support them. We recognise that young people with low aspirations are more vulnerable to radicalisation and therefore we strive to equip our service users with confidence, self-belief, respect and tolerance as well as setting high standards and expectations for themselves.

Concerns will be discussed with the individual and their family whenever possible and with the Local Authority Prevent co-ordinator and referrals made to the Channel programme when appropriate. We recognise that during the process of radicalisation it is possible to intervene to prevent vulnerable people being radicalised.

Radicalisation is defined as the act or process of making a person more radical or favouring of extreme or fundamental changes in political, economic or social conditions. Extremism is defined by HM Government as ‘vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs; and/or calls for the death of members of our armed forces, whether in this country or overseas’.

All staff members are aware of these issues and have accessed training.

JAMES works within our services to promote the Fundamental British Values, tolerance and respect for diverse views, while challenging prejudice of any kind.

**Patterns of abuse**

Abuse can take place in any context. It may occur when an adult at risk lives alone or with a relative; it may also occur within nursing, residential or day care settings, within hospitals or other places previously assumed safe, or in public places.

Patterns of abuse may reflect very different dynamics, such as:

* serial abuse in which someone seeks out and ‘grooms’ individuals. Sexual abuse sometimes falls into this pattern as do some forms of financial abuse.
* long term abuse – may occur in the context of an ongoing relationship such as domestic violence between partners or generations or persistent psychological abuse
* opportunistic abuse - such as theft occurring because money or jewellery has been left lying around
* self-neglect – where a person declines support and assistance with their care and support needs impacting on their individual wellbeing.

Abuse may consist of:

* a single or repeated acts
* an act of commission or omission
* multiple acts, for example, an adult at risk may be neglected and also be financially abused

Abuse may be intentional or unintentional. A number of abusive acts are crimes and

informing the police must be a key consideration.

**Who might commit abuse?**

This procedure is relevant to all incidents of abuse, regardless of who has committed them.

Anyone might be responsible for abuse, including:

* a member of staff, a proprietor or service manager
* a member of a recognised professional group
* a service user, or other adult at risk
* a volunteer
* a member of a community group such as place of worship or social club
* a spouse, relative, member of the person’s social network or an unpaid carer
* a child, including the person’s own son or daughter
* a neighbour, member of the public or stranger; or
* a person who deliberately targets adults at risk in order to exploit them

**Abuse by ‘persons in positions of trust’**

The term ‘persons in positions of trust’ refers to an employee, volunteer, or student (paid or unpaid) who works with adults with care and support needs.

In the event a ‘person in position of trust’ is alleged to have abused an adult with care and support needs, or may pose a risk of abuse to an adult with care and support needs, it is essential that the concerns are appropriately reported and responded to within this Safeguarding Adults Policy and Procedure.

The following concerns must be reported to the local authority:

* A ‘person in a position of trust’ has or is alleged to have abused an adult with care and support needs
* A ‘person in a position of trust’ has behaved (or is alleged to have behaved) towards another adult in a way that indicates that they may pose a risk of harm to an adult with care and support needs. This could include situations involving an investigation into a criminal offence, even if the victim is not a person with care and support needs
* A ‘person in a position of trust’ has behaved (or is alleged to have behaved) towards children in a way which means they may pose a risk of harm to adults with care and support needs.

These concerns could emerge from the persons home and personal life or circumstances, as well as within their work.

The Designated Adults Safeguarding Manager (DASM) for the local authority will provide coordination and management oversight of concerns, to ensure that the risks posed by a ‘person in position of trust’ are managed appropriately. The Local Authority DASM will work with the organisation responsible for the work of the ‘person in a position of trust’ and other relevant parties to achieve this.

The organisation responsible for the employee, volunteer or student may also need to:

· Invoke its disciplinary procedure

· Undertake enquiries on behalf of the local authority, providing evidence of their findings as required.

· Consider the need to make a referral to the Disclosure and Barring Service

· Consider the need to refer the concerns to the relevant professional group under the relevant code of conduct for the profession

· Report the concerns to the police, if a crime is suspected

· Inform the Care Quality Commission (regulated care providers)

· Provide the relevant DASM(s) with demonstrable assurance that appropriate actions in relation to any identified risks are being undertaken

· Keep the relevant DASM(s) informed of actions and decision undertaken

**Abuse by children**

If an adult at risk is being abused by a child (including their own child), the response should involve the local authority children’s services and domestic violence and abuse services as appropriate, in order to respond to the risks of harm.

**Roles & Responsibilities**

**What Role Does JAMES Play?**

JAMES should provide an environment in which all who engage with us feel safe and are able to disclose abuse and/or circumstances in which they are or feel at risk.

JAMES is NOT an investigative agency. This means if we have concerns we will alert the relevant people using the procedures outlined below.

JAMES work in partnership with other agencies, including Social Care, the Police and Health providers. As a result JAMES staff will be part of a range of multi-agency panels and conforms to ‘Safeguarding Adults West and North Yorkshire and York Multi-Agency Policy and Procedures’ (<https://www.bradford.gov.uk/media/3927/safeguarding-adults-multi-agency-policy-and-procedures.pdf> )

**Role & Responsibilities of JAMES Trustees and staff**

All JAMES staff and trustees have the responsibility to ensure that:

* our policy and procedures are consistent with regional Multi-Agency Policy and Procedures (<https://saferbradford.co.uk/resources/adults/safeguarding-adults-policy-and-procedures/>  )
* all staff and volunteers raise safeguarding concerns in-line with this document
* staff and volunteers actively contribute and participate within safeguarding Formal Enquiries and Case Conferences where appropriate.
* JAMES staff (and volunteers) will work in partnership with other agencies to ensure the safeguarding planning needs of the adult at risk are met
* information is shared between agencies in accordance with information sharing policies and protocols
* JAMES keeps its own records in relation to safeguarding concerns and how these are responded to.
* JAMES participates within Safeguarding Adults Reviews where requested by the safeguarding adults board (SAB)
* JAMES supports and empowers adults at risk to make decisions about their own lives
* staff seek further advice from the SAB to adhere to the Mental Capacity Act and Code of Practice where an adult at risk lacks mental capacity
* JAMES supports adults at risk to end abuse and to access support that enables them to cope with the impact of what has happened.
* Ensuring all staff and volunteers are made aware of Bradford safeguarding partnership procedures and where to locate them.
* Ensuring appropriate procedures are in place to deal with allegations against a member of staff or volunteer
* Ensuring that appropriate ongoing training is provided so that staff maintain knowledge of safeguarding and child protection issues and are aware of any new developments.
* Ensuring all members of staff and volunteers are made aware of the main forms of abuse and their symptoms
* Ensuring that all staff and volunteers have enhanced DBS checks.
* Implementing JAMES Health and Safety policies and procedures in order to maintain a safe and secure setting.
* Promoting anti-discriminatory and anti-oppressive practice in line with JAMES policy by providing positive role models, promoting diversity and by acknowledging and respecting the individual needs.
* Being aware of JAMES whistle blowing policy and are encouraged to raise any concerns relating to practice.
* Ensuring that they are aware that their actions, however well intentioned, may be misconstrued and therefore they must ensure that they consider, and are aware of, the implications of their actions at all times.
* New staff and volunteers are familiarised with this Adults Safeguarding document as part of their induction.

**Role of the Designated Safeguarding Officer (DSO)**

The JAMES Designated Safeguarding Officers are (DSO) Kevin Metcalfe and Angela Stack who are responsible for ensuring that concerns of possible abuse and neglect are responded to and reported appropriately. Anna Shepherd is the Deputy Safeguarding Officer.

The DSO must be informed about concerns of possible abuse or neglect without delay. Where actions are needed urgently or if the DSO is unavailable, **any member of staff or volunteer** may need to raise a concern with the local authority themselves and undertake other actions required to safeguard the adult at risk.

**Gather information**

If you are made aware of safeguarding concerns or allegations, you must take them seriously however trivial they might initially seem.

You may need to gather information in order to decide whether you should raise a safeguarding concern and the most appropriate action to keep the person safe. This may involve checking relevant records, ascertaining concerns from colleagues, gathering background information, etc.

Gather only the information you need in order to make the decision about whether to raise a safeguarding concern and to keep the person safe.

Unless it might prejudice a safeguarding enquiry or a police investigation, the DSO should speak to the adult at risk to get their views about:

· what has happened

· what they want to happen now

· the desired outcomes that the adult wants

Desired outcomes are those changes that the adult at risk wants to achieve from the support they receive, such as feeling safe at home, access to community facilities, restricted or no contact with certain individuals or pursuing the matter through the criminal justice system.

**Take action to ensure the immediate safety of the adult at risk**

The DSO must consider whether there are any immediate actions they need to take in order to keep the adult, or others, safe from harm.

This involves taking actions in relation to the adult at risk and others, including:

* making an immediate evaluation of the risk to the adult at risk and others
* taking reasonable and practical steps to safeguard the adult at risk as appropriate
* liaising with the police where an immediate police presence is required or to discuss any risk management issues
* arranging any necessary emergency medical treatment; note that offences of a sexual nature will require expert advice from the police
* making sure that other service users (and staff/volunteers) are not at risk

It may also involve taking actions in relation to the person or organisation alleged to have caused harm, including:

* liaising with the police wherever possible regarding actions that may impact upon a subsequent criminal investigation, such as where the protective arrangements may forewarn the person alleged to have caused harm of an impending criminal investigation and potentially prejudice the collection of evidence
* ensuring that any staff (or volunteers) who have caused harm are not in contact with service users and others who may be at risk, for example, ‘whistle-blowers’

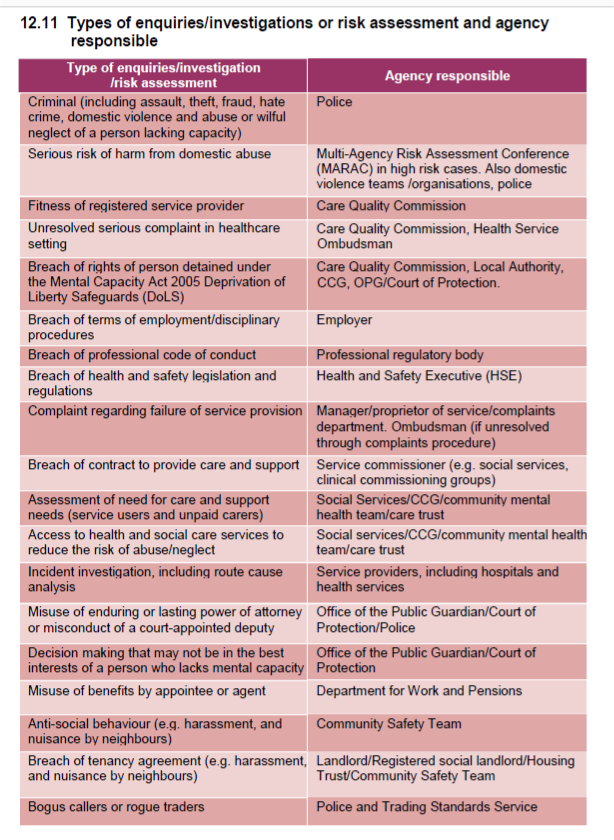
**Bradford**

To Raise a Safeguarding Concern

If you think an adult is at risk of abuse or you are worried that someone might be abused raise your concern at: 01274 431077 or

<https://systmonline.tpp-uk.com/Safeguarding/Home?OrgId=558423556104>

Bradford Metropolitan District Council's front door is the single point of contact to report safeguarding concerns for practitioners; 01274 431077.  This also now acts as an advice line as well as a referral line.     
Operating/opening hours:   
• Monday to Thursday: 8.30am to 5pm.   
• Friday: 8.30am to 4.30pm.   
   
**Outside of opening hours this is handed over to the Emergency Duty Team (EDT)**   
   
• If your feel your concern requires an urgent out of hours response, contact the Emergency Duty Team direct on **01274 435400**.   
• If your concern is not urgent, please complete the online form.   
 

Shape

**Safeguarding children and young people**

The Children Act 1989 provides the legislative framework for agencies to take decisions on behalf of children and to take action to protect them from abuse and neglect. It is essential that JAMES staff working to safeguard adults at risk are also aware of their responsibilities to safeguard and promote the welfare of children and young people. There will be occasions when those working with adults at risk identify risks to children and young people, and occasions when safeguarding adults and safeguarding children procedure need to operate side-by-side.

This document should operate in conjunction with JAMES safeguarding and child protection document, if there are concerns about abuse or neglect of children and young people under the age of 18.

Sometimes allegations of abuse will occur with regard to a person who is approaching the age of 18. If an allegation of abuse is made before a young person turns 18, the process of safeguarding the young person would be managed under child protection procedures.

Where a young person may remain at risk after the age of 18 and they would meet the criteria of an ‘adult at risk’ at that age, representatives from adult services may need to be invited to Strategy Meetings in order to contribute to the development of protective measures and plan for the young person’s future. Once a young person turns the age of 18, protection arrangements would then be reviewed by adult services.

**Mental Capacity and Decision Making**

We make many decisions every day, often without realising.  UK Law assumes that all people over the age of 16 have the ability to make their own decisions, unless it has been proved that they can’t.  It also gives us the right to make any decision that we need to make and gives us the right to make our own decisions even if others consider them to be unwise.

We make so many decisions that it is easy to take this ability for granted.  The Law says that to make a decision we need to:

* Understand information
* Remember it for long enough
* Think about the information
* Communicate our decision

A person’s ability to do this may be affected by things such as learning disability, dementia, mental health needs, acquired brain injury and physical ill health.    
   
Most adults have the ability to make their own decisions given the right support however, some adults with care and support needs have the experience of other people making decisions about them and for them.

Some people can only make simple decisions like which colour T-shirt to wear or can only make decisions if a lot of time is spent supporting them to understand the options.  If someone has a disability that means they need support to understand or make a decision this must be provided.  A small number of people cannot make any decisions.  Being unable to make a decision is called “lacking mental capacity”.     
   
Mental capacity refers to the ability to make a decision at the time that decision is needed.  A person’s mental capacity can change.  If it is safe/possible to wait until they are able to be involved in decision making or to make the decision themselves.   
   
For example:

* A person with epilepsy may not be able to make a decision following a seizure.
* Someone who is anxious may not be able to make a decision at that point.
* A person may not be able to respond as quickly if they have just taken some medication that causes fatigue.

Mental Capacity is important for safeguarding for several reasons.   
   
Not being allowed to make decisions one is capable of making is abuse.  For example, a disabled adult may want to take part in an activity but their parent who is their carer won’t allow them to and will not provide the support they would need.  Conversely the adult may not seem to be benefiting from an activity other people are insisting they do.   
   
Another situation is where an adult is being abused and they are scared of the consequences of going against the views of the person abusing them.  It is recognised in the law as coercion and a person can be seen not to have mental capacity because they cannot make ‘free and informed decisions’.   
   
Mental Capacity must also be considered when we believe abuse or neglect might be taking place.  It is important to make sure an ‘adult at risk’ has choices in the actions taken to safeguard them, including whether or not they want other people informed about what has happened, however, in some situations the adult may not have the mental capacity to understand the choice or to tell you their views.     
   
Each home nation has legislation that describes when and how we can make decisions for people who are unable to make decisions for themselves.  The principles are the same.

* We can only make decisions for other people if they cannot do that for themselves at the time the decision is needed.
* If the decision can wait, wait – e.g. to get help to help the person make their decision or until they can make it themselves.
* If we have to make a decision for someone else then we must make the decision in their best interests (for their benefit) and take into account what we know about their preferences and wishes.
* If the action we are taking to keep people safe will restrict them then we must think of the way to do that which restricts to their freedom and rights as little as possible.

Many potential difficulties with making decisions can be overcome with preparation.  A person needing support to help them make decisions whilst taking part in a sports organisation will ordinarily be accompanied by someone e.g. a family member or formal carer whose role includes supporting them to make decisions.     
   
It is good practice to get as much information about the person as possible.  Some people with care and support needs will have a ‘One page profile’ or a ‘This is me’ document that describes important things about them.  Some of those things will be about how to support the person, their routines, food and drink choices etc. but will also include things they like and don’t like doing.  It’s also important to have an agreement with the person who has enrolled the adult in the sports activity about how different types of decisions will be made on a day to day basis.     
   
If a person who has a lot of difficulty making their own decisions is thought to be being abused or neglected you will need to refer the situation to the Local Authority, and this should result in health or social care professionals making an assessment of mental capacity and/or getting the person the support they need to make decisions.

There may be times when a sporting organisation needs to make decisions on behalf of an individual in an emergency.  Decisions taken in order to safeguard an adult who cannot make the decision for themselves could include:

* Sharing information about safeguarding concerns with people that can help protect them.
* Stopping them being in contact with the person causing harm.

**Involving the adult at risk**

Adults at risk need to be able to make informed decisions about situations in their own lives.

This includes having this document explained to them so that they know what to expect and can say how they would wish to be involved. The adult at risk should be central throughout the safeguarding adult procedure, be supported to make decisions relating to their own welfare, have opportunity to review enquiry reports and findings, and decide about their Safeguarding Plans. Sometimes consideration for the safety and welfare of others will need to be balanced with the wishes and views of the adult at risk.

In order to be fully involved, the adult at risk may need support in a variety of ways such as the help of a family member or friend, a language interpreter or other communication assistance.

Where a person has mental capacity to make decisions, the role of professionals is to support them to make informed decisions throughout the safeguarding adults procedure. If the person has a ‘substantial difficulty’ in participating, and has no one who can support and represent them other than in a professional capacity, then an independent advocate must be arranged where it is appropriate and proportionate to do so. The Independent Advocate’s role will be to support the person to be fully involved and participate as they would wish within the safeguarding procedure.

Where a person lacks the mental capacity, any decisions required will need to be in their best interests, involving them to the full extent possible, and taking their views, wishes, beliefs and values into account. If the adult does not have an appropriate person to represent and support them an Independent Mental Capacity Advocate must be considered.

Throughout the response to the safeguarding adults concern, due regard should be given to issues of equality and diversity, and accessibility issues.

**Information sharing**

Information sharing between organisations is essential to safeguard adults at risk of abuse, neglect and exploitation. Decisions about what information is shared and with whom will be taken on a case-by-case basis. Whether information is shared with or without the consent of the adult at risk, the information shared should be:

* necessary for the purpose for which it is being shared
* shared only with those who have a need for it
* be accurate and up to date
* be shared in a timely fashion
* be shared accurately
* be shared securely

There are only a limited number of circumstances where it would be acceptable not to share information pertinent to safeguarding with relevant safeguarding partners. These would be where the person involved has the mental capacity to make the decision and does not want their information shared AND:

* nobody else is at risk
* no serious crime has been or may be committed
* the alleged abuser has no care and support needs
* no staff are implicated
* no coercion or duress is suspected
* the public interest served by disclosure does not outweigh the public interest served by protecting confidentiality
* the risk is not high enough to warrant a multi-agency risk assessment conference referral
* no other legal authority has requested the information.

If there is reluctance from one partner to share information on a safeguarding concern the matter should be referred to the Bradford Safeguarding Adults Board.

Additional information can be obtained from HM Government (2018) – ‘Information Sharing’ <https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/721581/Information_sharing_advice_practitioners_safeguarding_services.pdf>

**Undertaking safeguarding responses without consent**

Consent to support through the safeguarding adults procedure is important, but not the only consideration. Sometimes it will be necessary to act contrary to a person’s expressed wishes, for example:

* the adult lacks mental capacity to consent and a decision is made to take actions in the adult’s best interests (Mental Capacity Act 2005)
* the adult is subject to coercion or undue influence, to the extent that they are unable to give consent. Legal advice may be required

Public interest considerations involve balancing the rights of the individual to privacy with the rights of others to protection. It may be necessary to act contrary to the adult’s expressed wishes in order to safeguard others, for example:

* other adults are at risk from the person or organisation alleged to be causing harm
* the concern is about organisational or systemic abuse
* the allegation or concern relates to the conduct of an employee or volunteer within an organisation providing services to adults at risk.
* the abuse or neglect has occurred on property owned or managed by an organisation with a responsibility to provide care and support

Actions may also be required in the person’s vital interests (to prevent serious harm or distress or life- threatening situations). Where a person with mental capacity declines support within this procedure, and thereby places themselves at risk of serious harm, advice may be required from your line manager, and should always be sought if the risk is life threatening. Legal advice may also be required. It may be appropriate to explore an alternative process to provide support.

**Equality and diversity**

It is every person’s human right to live a life free from abuse and neglect. Every adult at risk has an equal right to support and protection within this procedure regardless of their individual differences or circumstances.

This document applies equally to:

* all adults at risk as defined within this policy
* all agencies
* all forms of abuse

Throughout safeguarding adults due regard must be given to individual differences, including age, gender reassignment, disability, religion or belief, sex, sexual orientation, race or racial group, caring responsibilities, class, culture, language, pregnancy and marital or civil partnership status.

**Duty of care**

Everyone has a clear moral and/or professional responsibility to prevent or act on incidents or concerns of abuse. A duty of care to adults at risk is fulfilled when all the acts reasonably expected of a person in their role have been carried out with appropriate care, attention and prudence. Duty of care will involve actions to keep a person safe but will also include respecting the person’s wishes and protecting and respecting their rights. The nature of an individual’s duty of care will vary according to their role. In all cases however, it will involve taking allegations or concerns seriously, and owning one’s responsibilities to safeguard adults at risk.

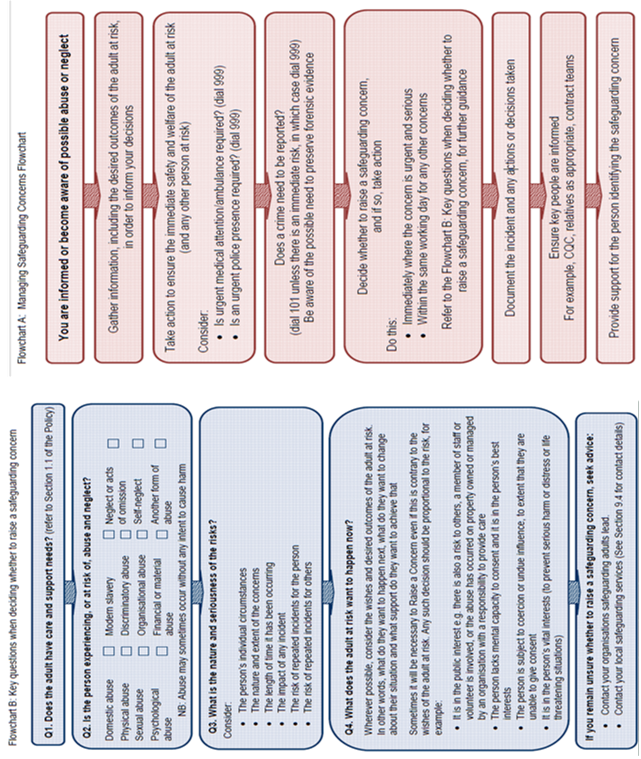
**Training**

All JAMES staff and volunteers will attend training at least every three years. The DSO will undertake training every two years in order for her to fulfil her role. All staff will undertake Prevent Awareness training. The DSO will be able to provide advice and support to members of staff on protecting children from the risk of radicalisation. Most full-time staff will be trained in First Aid.

**Raising Awareness of Safeguarding**

JAMES is committed to raising awareness of safeguarding and child protection and to equipping young people and families with the skills needed to keep them safe. It aims to do this by:

* Ensuring staff have access to appropriate training and resources.
* Including opportunities in the curriculum and our programmes that will help young people and families to develop skills they need to recognise and stay safe from abuse.
* Supporting young people and families to learn about online safety.
* Providing opportunities for outside agencies to work alongside our young people and families
* Ensuring that young people and families know what to do if they have worries or concerns
* Providing young people and families with the opportunity to share their worries or concerns via a range of mediums

**PROCEDURE**

**Raising a Concern?**

Any person who has concerns that someone who has, or may have care and support needs is experiencing, or is at risk of abuse and neglect, can raise their concerns with the local authority.

This means that the adult experiencing abuse or neglect can raise their concerns themselves, but so can their friends, family members, unpaid carers, other members of the public, paid carers, professionals and organisations.

A concern may be:

* something the adult at risk has disclosed to you
* something you have been told by a colleague, a friend, relative or the carer for the adult at risk, or someone else
* something you have witnessed for yourself, for example changes in the person’s behaviour, or how the adult at risk is being treated by someone else

Wherever possible, involve the adult at risk in decisions about raising a safeguarding concern. Try and talk to the person about what the person wants to change about their situation, and what support they want to achieve that.

There are occasions when you may need to raise a concern without the person’s consent, for example:

It is in the public interest, for example,

* there is a risk to other ‘adults at risk’, or
* the concern is about organisational or systemic abuse, or
* the concern or allegation of abuse relates to the conduct of an employee or volunteer within an organisation providing services to adults at risk, or
* the abuse or neglect has occurred on property owned or managed by an organisation with a responsibility to provide care
* the person lacks mental capacity to consent and a decision is made to raise a safeguarding concern in the person’s ‘best interests’ (Mental Capacity Act 2005)
* a person is subject to coercion or undue influence, to the extent that they are unable to give consent
* it is in the adult’s vital interests (to prevent serious harm or distress or life threatening situations)

All raised safeguarding concerns will have been discussed and agreed with the DSO or another Line Manager at the earliest opportunity.

Where possible, take action to ensure the safety of the adult at risk. You may also need to inform the police (if a crime has taken place or is taking place) or seek medical attention in an emergency.

If a person discloses abuse to you directly, use the following principles to respond:

· Assure them that you are taking the concerns seriously

· Do not be judgemental or jump to conclusions

· Listen carefully to what they are telling you, stay calm, get as clear a picture as you

can. Use open-ended questions

· Do not start to investigate or ask detailed or probing questions

· Explain that you have a duty to tell your manager or designated officer

· Reassure the person that they will be involved in decisions about them

If the concerns relate to the DSO, inform another member of the Management Team.

The DSO is the person who is responsible for:

* deciding whether to raise a safeguarding concern with the local authority
* taking immediate actions, wherever possible, to ensure the adult at risk is safe from abuse or neglect

However, where a situation is urgent or serious, **any member of staff (or volunteer)** may need to undertake these actions.

**In an emergency or out of hours**

When dealing with an incident that involves the abuse of an adult at risk, staff may need to call the police and/or ambulance (dial 999), if for example:

* someone is alleging that they have been sexually assaulted
* someone has been injured as a result of a physical assault
* an allegation is made regarding a recent incident of theft
* the person alleged to have caused harm needs to be removed
* the person alleged to have caused harm is still believed to be near the premises
* there is reason to believe that a crime is in progress
* there is likely to be evidence that needs to be preserved, in the case of physical or, sexual assault the police will be able to arrange for medical evidence to be collected

This list is by no means exhaustive.

If the police do not need to be contacted but you still have immediate concerns and it is out of normal working hours, the local authority ‘emergency duty team’ can be contacted

To Raise a Safeguarding Concern

If you think an adult is at risk of abuse or you are worried that someone might be abused raise your concern at:

<https://systmonline.tpp-uk.com/Safeguarding/Home?OrgId=558423556104>

If you are not sure whether a child is at risk, you can call and discuss the circumstances. Bradford Children’s Services now has a dedicated practitioners’ advice and referral contact number.

Call 01274 433999 if you want to seek support and/or raise a concern about a child or a young person.

Opening hours:

Monday to Thursday 8.30am to 5.00pm   
Fridays 8.30am to 4.30pm

**Out of office hours**

Our Emergency Duty Team will continue to take emergency out of hours calls on 01274 431010.

**Whistle-blowing – Public Interest Disclosure Act 1998**

Members of staff working within an organisation may become aware of safeguarding

concerns or allegations but be concerned about the impact on their employment if they were to report them.

Where people have these concerns, they should refer to the JAMES “Whistle-blowing” Policy. The policy is so named, because it provides advice in relation to those circumstances when an employee is protected for reporting concerns.

For further information and advice, the following services are available:

· Mencap: www.mencap.org.uk/organisations/whistleblowing-helpline

· Care Quality Commission: www.cqc.org.uk/contact-us

· Public Concern at Work: www.pcaw.org.uk

**Codes of Practice** For the purposes of this document, the following issues have been highlighted.

**Staff**

At no time is any non-approved adult to have access to JAMES service users without constant supervision from an approved member of staff. NB. 'Approved' means an adult who has been cleared in accordance with DBS. Volunteers must be cleared in accordance with all the procedures required for the appointment of paid staff.

Regular team meetings and sessional briefings should be held to clarify safeguarding roles and responsibilities and to ensure that all work is delivered proactively and reactively.

**DBS Checks**

Any employee or volunteer whose DBS check is considered unsuitable will have the right to put forward a reason/account of the incident/incidents in question.

If a potential employee/volunteer fails to pre-notify JAMES of any historical incidents that show up on the DBS check then their employment will be subject to review. Once all information has been gathered, regarding any DBS recordings, the Management Team will make an informed judgement, taking into account the nature of any incident and the age of the person when this happened.

No one will be considered with a History of:

* Offences against children

**Allegations against staff – see JAMES Allegations Policy**

**Communication with the community and media**

Under no circumstances should any member of JAMES staff respond to queries from the public and/or the media.  All such queries will be dealt with through the Management Team. In the event that you are contacted please record the following details about the person who has contacted you:

* Name •Telephone number
* Organisation •Deadline
* Their line of enquiry/questions
* Tell them the matter will be looked into and that someone will call them back shortly. Then pass all this information to a member of the Management Team.