

Nottingham & Nottinghamshire Refugee Forum

Safeguarding Children and Adults at Risk Policy

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1. Introduction

- **1.1** The Nottingham and Nottinghamshire Refugee Forum (NNRF) supports refugees and asylum seekers of all ages and from all parts of the world and respects their rights and dignity.
- 1.2 It is our responsibility as an organisation to ensure that we create and maintain a safe environment for children and adults and actively promote their well-being in our service delivery. We will take all reasonable steps to promote safe practice and encourage a culture of vigilance to protect them from harm, abuse and exploitation.
- **1.3** This document sets out arrangements for safeguarding children and adults at risk. We fully recognise that some aspects of those arrangements are specific and relevant to either children or to adults at risk. However, we believe that our safeguarding procedures will be most effective if they are kept together in one single document.
- **1.4** Our overarching commitment to vigilance and to our shared responsibility for safeguarding applies fully to both children and adults at risk. Our procedures for reporting, referring and recording any safeguarding concerns are identical for both children and adults at risk. Where specific and distinct aspects apply to one group or the other, this is indicated clearly within this policy.
- **1.5** For the purposes of this policy, children are all those aged up to 18 and adults are those aged 18 and above.
- **1.6** We are committed to care for, safeguard and nurture <u>all</u> children and young persons under the age of eighteen, who use our Centre or the services of NNRF. We respect the dignity of children and young people and their rights as set out in the UN Convention on the Rights of the Child and work within UK legislation on Child Protection.
- 1.7 Although all NNRF service users may be considered to be "vulnerable" in respect of their immigration status and other personal circumstances, this policy is designed to inform the work of staff and volunteers specifically with "Adults at Risk" (as defined by the Care Act 2014) since other adults are deemed to have responsibility for their own welfare. (Please see Section 9 below for further information).

2. Aims

- **2.1** This policy covers all NNRF staff, Trustees, volunteers, service users, members and everyone who uses the NNRF Centre and is involved in NNRF activities.
- **2.2** This policy is intended to support staff and volunteers working within NNRF to understand their role and responsibilities in safeguarding children and adults at risk. All staff and volunteers are expected to follow this policy.
- **2.3** This policy supports our commitment to ensuring that all NNRF staff and volunteers are trained in safeguarding procedures

- **2.4** NNRF will ensure that its safeguarding procedures are continually monitored, developed and maintained and are clearly communicated to staff, Trustees, volunteers and service users.
- **2.5** NNRF will also ensure that safe and effective working practices are in place.
- **2.6** <u>CHILDREN</u>. Child protection is included within our policy on safeguarding children.
- **2.7** <u>ADULTS</u>: NNRF will ensure that decisions made will empower adults to make their own choices and include them in any decision making.

3. Legislation and related policies

- 3.1 <u>CHILDREN:</u> This policy should be read in conjunction with the **Nottinghamshire and Nottingham City**Interagency Safeguarding Children Procedures. These procedures reflect and are compliant with 'Working Together' 2018; 'Working Together to Safeguard Children' 2018 and the following: 'Children and Social Work Act' 2017, Education Act 2002, 'Every Child Matters: Change for Children' 2003, 'The Children Act' 2004. Found here: https://nottinghamshirescb.proceduresonline.com/
- **3.2** <u>ADULTS:</u> This policy has been written with reference to **The Care Act 2014** and the **Mental Capacity Act 2005**. Under *The Care Act 2014*, safeguarding of adults relates to an adult who:
- Has care and support needs (arising from physical or mental impairment or illness and having a significant impact on their wellbeing because of the inability to manage personal care and activities)
- Is experiencing or at risk of abuse and neglect and;
- Is unable to protect themselves from the risk or experience of abuse and neglect because of those care needs
- 3.3 <u>ADULTS</u>: Under the *Mental Capacity Act 2005*, an adult at risk will have been assessed as having an impairment that currently affects their capacity to make decisions independently. Individuals in these groups may be more open to abuse, neglect and possible exploitation by other individuals and should have a Care Plan in place. NNRF recognises this and will ensure that the people it supports are informed and protected. Safeguarding adults at risk means protecting their right to live in safety and free from abuse and neglect.
- **3.4** NNRF maintains a range of related policies and procedures that aim to ensure wellbeing and safety that include, but are not limited to the following:
- Recruitment Policy careful selection, induction and supervision of staff and volunteers with Disclosure and Barring Service (DBS) clearance checks where appropriate
- Learning and Development Policy regular essential and update training
- Information Security Policy
- Staff and Volunteer Disciplinary Processes
- Complaints Policy and procedures
- Whistleblowing Policy

4. Promotion of Good Practice

- **4.1** NNRF is committed to zero tolerance of abuse within the organisation. It is fundamental to this safeguarding policy that the welfare of the client is always regarded as paramount.
- **4.2** All clients have a right to be safeguarded from abuse in line with the Equality Act 2010, irrespective of their age, disability, race, religion/belief, sex, sexual orientation, or if they have had gender reassignment, are pregnant or are married/in a civil partnership.
- **4.3** All concerns and allegations of abuse will be taken seriously and responded to swiftly, appropriately and professionally. All members of NNRF, irrespective of their role, have a responsibility to report all concerns to their line manager, or the Duty Manager in the line manager's absence, or the Designated Safeguarding Lead (see Appendix 2 Procedures).
- **4.4** <u>ADULTS</u>: NNRF is a member of the local Vulnerable Adults Providers Network where best practice and issues are shared. Please see here for more information: https://www.nottinghamcvs.co.uk/voice-and-partnerships/networks/VAPN
- 4.5 The abuse of a child or an adult at risk can occur in a number of ways and could be perpetrated by any individual or service provider who is able to have regular contact with them. It is important therefore that all NNRF staff and volunteers are alert to the vulnerability of clients (see Appendix 1 Categories of Abuse).
- **4.6** Abuse can occur within many situations, including the home, care homes or other institutions. NNRF staff are in a good position to make assessments as to the standard of care people experience and the potential for adults at risk to be abused.
- **4.7** All staff and volunteers should be mindful to set an excellent role model for clients. Professional boundaries must be maintained at all times (see also NNRF Code of Conduct).
- **4.8** Working together to safeguard children and adults at risk is not the sole responsibility of any one agency or service. The law does not prevent sharing of information between agencies where this best serves public interest.
- **4.9** Safeguarding is to remain a standard agenda item for consideration at Trustees' monthly Board meetings, managers' meetings, staff meetings and supervision meetings.

5. Recruitment and training

5.1 All prospective staff and volunteers complete an application form; for staff this includes a self-disclosure about any criminal record. In addition, some staff posts are subject to an enhanced Disclosure and Barring Service (DBS) check at the appropriate level. Some relevant volunteer roles will also be subject to an enhanced DBS check.

- **5.2** In line with safer recruitment, direct safeguarding questions are included in all reference requests. No member of staff or volunteer should be permitted to provide support to clients until the application form has been completed in full and the initial induction is complete. New staff and volunteers must sign to acknowledge receipt of and adherence to this policy document.
- **5.3** All front-line staff and volunteers will have safeguarding training as part of their induction programme and, where appropriate, receive mandatory refresher training.

6. Roles and Responsibilities

6.1 Designated Safeguarding Lead (DSL): Frank Forman

Tel: 0115 9601234, mob: 07485 355438, email: frank.forman@nottsrefugeeforum.org.uk

- Ensure that the safeguarding policies and procedures adopted by NNRF are followed by all staff;
- Ensure that a single central database of all staff and volunteers, and their safeguarding training dates is maintained and that this list confirms that all staff and those volunteers who meet the specified criteria have had a DBS check;
- Ensure that all staff and volunteers feel able to raise their concerns about poor and unsafe practice and such concerns are addressed in a timely manner in accordance with agreed policies;
- Ensure that all allegations, including those concerning individuals who are not employed by NNRF, will be dealt with appropriately, informing the relevant parties and providing support where required;
- Undergo safeguarding training which is updated regularly, in line with advice from the Nottingham City and Nottinghamshire Safeguarding Partners;
- Liaise with relevant agencies in accordance with the Nottingham City and Nottinghamshire Safeguarding Partners procedures;
- Where there are concerns about a member of staff's suitability to work with children or adults at risk, contact the Designated Officer (LADO);
- Where appropriate, send a serious incident report to the Charity Commission;
- Ensure all staff, and volunteers are informed of the names and contact details of the safeguarding managers and of NNRF's procedures for safeguarding children and adults at risk;
- Support staff who attend strategy meetings, looked after reviews and/or case conferences;
- Support staff and volunteers who may find safeguarding issues upsetting or stressful by enabling them to talk through their anxieties and to seek further support from the leadership group or others as appropriate;
- Support staff to reflect on the information they hold about children and adults at risk and provide an
 alternative perspective on issues in order to promote a better understanding of what may or may not be
 concerning;
- Maintain secure written records of all safeguarding concerns, even if there is no immediate need for referral.

6.2 Safeguarding Team: Debbie Royle, Sonia Bilkhu, Fiona Broome, Richard Martin, Barbara S. Dhliwayo, Beth Potter, Nicole Shametiova

Ensure that safeguarding children and adults is embedded into all aspects of NNRF's work;

- Provide strategic oversight for all aspects of safeguarding work across the organisation and ensure our
 policies and procedures are up to date and effective in protecting people who use services from potential or
 actual harm;
- Advise the Board and NNRF staff on safeguarding matters;
- Provide assurance that the agreed policies, procedures and standards for NNRF's work on safeguarding are being adhered to by all staff;
- Initiate improvements in NNRF working practices, systems and procedures to support effective safeguarding practice;
- Identify, respond and escalate, as appropriate, organisational risk within NNRF related to safeguarding;
- Raise the profile of children and adults' safeguarding in all NNRF's work and promote proactive communications and raise awareness both internally and externally;
- Monitor and evaluate performance, including scrutiny of records and data, understanding and making recommendations to improve performance;
- Ensure implementation of the NNRF safeguarding procedures, monitor the effectiveness and impact of the procedures both internally and externally and recommend and implement improvements where needed;
- Use the NNRF governance structures to ensure that safeguarding issues are considered and addressed at the appropriate level;
- Ensure that appropriate records and data are collected about safeguarding children and adults' activity in a way that supports NNRF's responsibilities;
- Ensure that training programmes are in place to enable NNRF staff to understand and fulfil their duties and responsibilities in relation to safeguarding;
- Ensure that NNRF responds appropriately to changes in relevant legislation;
- Provide input into the Annual Report;
- Ensure that constructive links are maintained with relevant stakeholders and external agencies, including social care, police, Safeguarding Boards etc.

6.3 Trustee with Lead Responsibility for Safeguarding: Pete Strauss

Mob: 07729 810 202, email: safeguarding@nottsrefugeeforum.org.uk

- Meet regularly with the Safeguarding Team, receiving reports and discussing activity;
- Act as an independent resource who can offer advice, on request, to management that are dealing with and reporting safeguarding incidents;
- Challenge the organisation to ensure that NNRF is doing all it can to safeguard those it comes into contact with:
- Ensure appropriate time is devoted to safeguarding at board meetings;
- Be a key resource for the whole board, as someone with specialised training and knowledge;
- Operate as a person independent from management to whom safeguarding issues can be directly referred, if it is felt that management is not dealing with an issue appropriately or if it involves management.

6.4 Staff and Volunteers:

- Read and understand this policy
- Be aware that to safeguard children and adults at risk, there is a duty to share information with your line manager, or Duty Manager in absence of your line manager, in the first instance
- If you cannot get hold of your manager in an urgent situation, or after discussion you still think the issue requires a referral, you can make your own referral to Children's and Adults' Social Care

- Be alert to signs and symptoms of harm and abuse
- Know how to respond to their duty when they have concerns or when a child or adult discloses to them and to act
- Know how to record concerns and what additional information may be required
- Undergo safeguarding training which is updated regularly
- Recognise that abuse and neglect can happen in any setting and maintain an attitude of 'it could happen here'

7. Cultural considerations

- **7.1** All children and adults at risk have a right to be safeguarded from abuse in line with the Equality Act 2010, irrespective of their age, disability, race, religion/belief, sex, sexual orientation, or if they have had gender reassignment, are pregnant or are married/in a civil partnership.
- 7.2 It should be acknowledged that there may be culturally different practices and attitudes towards children and adults at risk amongst NNRF service users. This needs to be addressed with sensitivity and understanding but does not alter the need to safeguard and follow procedures.
- **7.3** We are aware that practices which are accepted and the norm in some cultures and countries are forbidden by British law. For example:
 - Female Genital Mutilation (FGM) by infibulation or excision is forbidden by the Prohibition of Female Circumcision Act 1985
 - Sexual intercourse and marriage are illegal under the age of 16
 - Forced Marriage (in law since June 2014)
 - Types of physical chastisement that would constitute physical abuse
- **7.4** It is possible that cases of abuse may be a result of lack of knowledge/different cultural expectations on the part of the alleged perpetrator. This does not affect the need to take appropriate action or address the abuse.

8. Children and young people's activities

- **8.1** Children and young people aged up to 13 years are welcome on NNRF premises; we hope they will make use of our facilities and join in activities but, whilst there, they must be supervised by their parents or by another adult approved by their parents/carers/guardians. Responsibility for safeguarding accompanied children on NNRF premises remains with their parents/ carers/ guardians at all times.
- **8.2** Children/young people aged 13 and above can attend NNRF independently to access on or off-site organised activities as well as advice from the drop-in General Advice service. In this case, the General Advice supervisor should be made aware by triage or Reception volunteers that there is a young person in the building and they should be given priority to be seen in General Advice. Where possible, the young person will be directed to see one of the General Advice volunteers who has attended the Youth Project training.

- After being seen in General Advice the case should then be referred to the Youth Project Worker, in case follow-up work is needed.
- **8.3** For off-site activities, specific risk assessments and preparations need to be in place to ensure the safety of all children and ensure that no member of staff or volunteer is compromised (see Appendix 5 for details).

9. Safeguarding All Adults

- **9.1** This policy focusses on adults at risk, as defined in legislation, and for whom we have specific statutory responsibilities. These are adults who cannot protect themselves because they have care and support needs related to physical or mental impairment or illness and who cannot manage their own day-to-day personal care needs.
- **9.2** However, the NNRF fully acknowledges our safeguarding duty to *all* adults. The NNRF recognises that refugees and asylum seekers face particular risks to their safety and wellbeing which are associated with their status and situation in society.
- **9.3** Our responsibility to act on, to report and to record safeguarding concerns apply to **all** adults and the procedures for doing so are identical as those for reporting safeguarding concerns about adults at risk.

10. Responding to concerns or disclosures

- **10.1** All concerns, disclosures or allegations, whatever their origin, must be taken seriously, never ignored and always reported to your line manager or the Duty Manager in absence of your line manager. If you personally have a concern about a child or an adult, it is expected that you will share this in the same way. This must be done as soon as possible and always on the same day.
- 10.2 All recording of any safeguarding concern is done using the Safeguarding Concern Form (Appendix 2).
- **10.3** All members of staff and volunteers have a responsibility to make their line manager, or the Duty Manager in absence of their line manager, aware of any concerns, even if they are unsure whether it is a safeguarding matter or not.
- 10.4 Confidentiality is to be respected and the sharing of such information should always be strictly limited to a "need to know" basis. A child or an adult may need reassurance that they will be protected by the information being passed to the person who is trained and has responsibility to safeguard (see Appendix 2 for Procedures)
- **10.5** <u>ADULTS</u>: If there is concern for an adult at risk but where safeguarding is not an issue, advice can be sought at: http://www.nottinghamcity.gov.uk/health-and-social-care/adult-social-care/getting-support/
- **10.6** <u>ADULTS</u>: If referring to adult social care or to the police, seek consent from the adult at risk (NB. A referral can be made without consent if it is in the overriding public interest, a possible crime has been committed or there is a risk to the health and safety of others).

- **10.7** Consideration must always be given to what, if any, additional action is required to keep the child or the adult safe.
- **10.8** The line manager will always feed back to the person who has passed on the original concern what actions have been taken.
- **10.9** If the member of staff or volunteer is not satisfied that the concern has been fully addressed, they have a responsibility to escalate the matter themselves directly to Social Care.
- **10.10** All concerns or allegations of abuse made against a member of staff or volunteer must be reported immediately to the Designated Safeguarding Lead. If the concern or allegation relates to the Designated Safeguarding Lead it must be reported to the Chair of the Board of Trustees.

11. Extremism

- **11.1** All charities have a responsibility to prevent abuse for extremist purposes (see Appendix 5, Useful Contact Details & Links):
 - https://www.gov.uk/guidance/safeguarding-duties-for-charity-trustees#terrorism-and-the-prevent-duty
- **11.2** Prevent is now part of national safeguarding policy for all agencies working with vulnerable adults who may be at risk of abuse and exploitation including grooming and radicalisation. Managers and other key NNRF staff receive training and updates and the NNRF is aware of its duty to take appropriate steps where concerns of this nature are raised or identified.
- **11.3** As this is a safeguarding concern, please following the appropriate steps to report this, as listed in this policy.

12. Monitoring

12.1 The Designated Safeguarding Lead, safeguarding team and the Board Trustee with responsibility for Safeguarding will have monthly contact to review and monitor any safeguarding referrals or issues arising and report to the Trustee Board meeting.

Date adopted by NNR		
Review due date:	01 February 2023	

13. APPENDIX 1: Safeguarding procedure flowchart (updated January 2023)

Client/ Volunteer



Staff member



Line Manager



Safeguarding Lead

Client or volunteer to discuss their concern with a member of staff.

Staff member to inform client/volunteer that their concern will be discussed with the staff member's line manager.

Actions for the staff member:

- Discuss the concern with their line manager (or if not available, the Duty Manager).
- Complete the Safeguarding Concern Form with agreed actions and email to the relevant manager to sign off.
- Create a new case on Advice Pro under
 Safeguarding (Matter Type) selecting the correct sub-matter and attach the concern form. Record the concerns and actions taken on Advice Pro and add social issue on client's profile.
- The case remains with the staff member and they are responsible for keeping both their line manager and Advice Pro up to date, unless re-allocated.

Actions for the line manager:

- Discuss the concern with the staff member and, if relevant, available safeguarding managers.
- Review and ensure updated actions are recorded on Advice Pro.
- Line manager should ensure the safeguarding concern is uploaded to the safeguarding folder on Sharepoint.
- 4. The line manager is responsible for allocating the safeguarding case to the relevant staff member/team.
- The line manager should inform the Designated Safeguarding Lead.

The Duty Manager will complete the above actions if the line manager is not available. The Duty Manager will inform the line manager and hand over once they are available.

Actions for the Designated Safeguarding Lead:

Keep an overview of all concerns to ensure the appropriate actions are taken.

This information and data will be used for monitoring and training purposes.

<u>Designated Safeguarding</u> <u>Lead:</u> Frank



Barbara, Debbie,
Sonia, Richard and
Frank
Coordinators: Matt,
Aiza, Nicole,
Zanele, Beth and
Sophie

APPENDIX 2: Safeguarding Concern Form



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SAFEGUARDING CONCERN FORM – page 1

To be completed by member of staff reporting the concern (to be passed immediately to a Line Manager and saved on Advice Pro)

Date:	Time:					
Record made by:	Role:					
Concern raised by (if not self):						
Person at Risk:						
Advice Pro:						
Reasons for concern: (Should be factual – not opinion or hearsay - include details of allegations, date evidence if appropriate, name of alleged perpetrator(s), witnesses, source of information)						
Signed by reporting member of staff		Date:				



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SAFEGUARDING CONCERN FORM – page 2

<u>List of actions to be taken (with names and timescale)</u>

ACTIONS - TICK WHEN COMPLETED	
Create safeguarding case on Advice Pro	
Uploaded this form to Advice Pro	
Added name and Advice Pro number to Safeguarding File on Sharepoint	
Fed back to reporting member of staff/volunteer	
Added to agenda for next Safeguarding Team meeting	
Inform Frank Forman, Designated Safeguarding Lead via email	

Sig	gned	by Li	ine N	Managei	r/Duty	/ Mana	ger	/DSL:	 Date:	

APPENDIX 3 - Categories of abuse

ADULTS

There are 10 categories of abuse listed for Adults at Risk

1. Physical abuse

including hitting, slapping, pushing, kicking, misuse of medication, restraint, or inappropriate sanctions

2. Sexual abuse

including rape and sexual assault or sexual acts to which the adult at risk has not consented or is incapable of giving informed consent or was pressured into consenting. This may involve contact or non-contact abuse (e.g. touch, masturbation, being photographed, teasing and inappropriate touching)

3. Psychological / Emotional Abuse

including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks

4. Neglect / acts of omission

including ignoring medical 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

5. Financial/Material

Theft Inheritance Fraud Property

Exploitation Abuse of Power of Attorney

Financial transactions Benefits

Possessions

6. Discriminatory

Based on:

Race Gender

Religion Sexual orientation

Age Disability

Culture

7. Organisational

Neglect and poor professional practice need to be taken into account. This may be isolated incidents or repeated incidences of poor or unsatisfactory practice, or long-term ill treatment or gross misconduct.

8. Domestic Violence

"Any incident or pattern of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members, regardless of gender or sexuality." Home Office 2013

This can encompass, but is not limited to, the following types of abuse: psychological, physical, sexual, financial, emotional.

9. Modern Slavery

Encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.

10. Self-Neglect

This covers a wide range of behaviour - neglecting to care for one's personal hygiene, health or surroundings, and includes behaviour such as hoarding.

CHILDREN

Abuse of children may take several forms:

- 1. 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 /carer/guardian makes up symptoms of, or deliberately induces illness in a child.
- **2. Emotional Abuse** is the persistent emotional maltreatment of a child causing adverse effects on the child's emotional development. It may involve:
- Making children feel that they are worthless or unloved or not valued.
- Overprotection or preventing the child participating in normal social interaction.
- Seeing or hearing the ill treatment of another.
- Serious bullying causing children frequently to feel frightened or in danger
- Exploitation or corruption of children.
- Some level of emotional abuse is involved in all types of ill treatment to a child, though it may occur alone.
- **3. Sexual Abuse** involves forcing or enticing a child or young person to take part in sexual activities (including prostitution), not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve:
- physical contact, including penetrative (e.g. rape, buggery or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.
- non-contact activities, such as involving children in looking at, or in the production of, sexual online images or watching sexual activities,
- encouraging children to behave in sexually inappropriate ways, or grooming of a child in preparation for abuse (including via the internet).
- Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.
- **4. Neglect** is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during

pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent /carer/guardian failing to:

- provide adequate food and clothing
- provide shelter including exclusion from home or abandonment
- protect a child from physical and emotional harm or danger
- ensure adequate supervision (including the use of inadequate care-givers)
- ensure access to appropriate medical care or treatment.
- **5. Financial Abuse**: For example, misappropriation or theft of an individual's funds, benefits, savings or property, misuse of their money, extortion or any other action that is against the person's best interests.

APPENDIX 4: Signs of abuse

Signs of Abuse: ADULTS

1. Physical abuse

- Multiple bruising
- Fractures
- Burns
- Bed sores
- Fear
- Depression
- Unexplained weight loss
- Assault (can be intentional or reckless)

2. Sexual abuse

- Loss of sleep
- Unexpected or unexplained change in behaviour
- Bruising
- Soreness around the genitals
- Torn, stained or bloody underwear
- A preoccupation with anything sexual
- Sexually transmitted diseases
- Pregnancy

3. Psychological/emotional abuse

- Fear
- Depression
- Confusion
- Loss of sleep

Unexpected or unexplained change in behaviour

4. Neglect

- Malnutrition
- Untreated medical problems
- Bed sores
- Confusion
- Over-sedation
- Deprivation of meals may constitute "wilful neglect"

5. Financial or material abuse

- Unexplained withdrawals from the bank
- Unusual activity in the bank accounts
- Unpaid bills
- Unexplained shortage of money
- Reluctance on the part of the person with responsibility for the funds to provide basic food and clothes etc.
- Fraud
- Theft

6. Discriminatory abuse

- lack of flexibility and choice for people using a service
- inadequate staffing levels
- being hungry or dehydrated
- poor standards of care
- lack of personal clothing and possessions and communal use of personal items
- lack of adequate procedures
- poor record-keeping and missing documents
- few social, recreational and educational activities
- public discussion of personal matters
- unnecessary exposure during bathing or using the toilet
- absence of individual care plans
- lack of management overview and support.

7. Organizational abuse

- Inflexible and non-negotiable systems and routines
- lack of consideration of dietary requirements
- Name calling; inappropriate ways of addressing people
- Lack of adequate physical care an unkempt appearance

8. Domestic abuse

- physical injuries
- excuses for frequent injuries
- stress, anxiety or depression
- absent from work and social occasions
- personality changes being jumpy or nervous
- low self-esteem
- lack of independent communication
- self-blame
- increased alcohol or drug use
- lack of money
- damage to property.

9. Modern slavery

- signs of physical or emotional abuse
- appearing to be malnourished, unkempt or withdrawn
- isolation from the community, seeming under the control or influence of others
- living in dirty, cramped or overcrowded accommodation and or living and working at the same address
- lack of personal effects or identification documents
- always wearing the same clothes
- avoidance of eye contact, appearing frightened or hesitant to talk to strangers
- fear of law enforcers.

10. Self-neglect

- very poor personal hygiene
- unkempt appearance
- lack of essential food, clothing or shelter
- malnutrition and/ or dehydration
- living in squalid or unsanitary conditions
- neglecting household maintenance
- hoarding
- collecting a large number of animals in inappropriate conditions
- non-compliance with health or care services
- inability or unwillingness to take medication or treat illness or injury.

Signs of Abuse: CHILDREN

Child abuse occurs to children of both sexes and all ages, in all cultures, religions, and social classes and to children with and without disabilities. All staff and volunteers should be alert to signs that a child may be at risk of significant harm. Refugee or asylum seeking children who cannot speak English or do not have the words to explain what is happening to them are especially vulnerable.

There may be physical and behavioural indicators of abuse; when working with children and young people who have experienced trauma, be aware that it is possible that the behaviours are associated with those experiences rather than current abuse.

Children experiencing abuse may become silent and withdrawn, or become aggressive and demanding; they may be fearful. They may have bruises, cuts or burn marks on their bodies.

Some general considerations are as follows:

- Identification of child abuse may be difficult; it normally requires both medical and social assessment.
- Different types of child abuse may be present at the same time, e.g. a child who is being sexually abused may also be being physically abused. When enquiring into one type of abuse staff need to be alert to potential signs of other abuse.
- Always listen carefully to the child pay particular attention to any spontaneous statement. In the case of children without speech or with limited language, pay attention to their signing or other means of expression, including behaviour and play.
- Any delay in seeking medical assistance or indeed none being sought at all, could be an indicator of abuse.
- Beware if explanation of an accident is vague, lacking detail, is inconsistent with the injury, or varies with each telling.
- Take note of inappropriate responses from adults, parents or carers.
- Observe the child's interaction with the adult, parents or carers particularly wariness, fear or watchfulness.
- Any history or patterns of unexplained injury/illness requires the most careful scrutiny. The fact that the
 adult, parent or carer appears to be highly attentive and concerned should not divert attention from the
 assessment of risk.
- Beware if the child's injury is inconsistent with the child's development and mobility.
- Beware if there are indications of or a history of domestic violence. Violence towards adults may also indicate violence towards children and may be emotional abuse, if not physical.
- Children who are being abused often do not say and tend to perceive themselves as deserving of ill treatment. This is particularly so for children who are being emotionally abused.

APPENDIX 5: Staff and volunteers organising OFF-SITE AND RESIDENTIAL ACTIVITIES involving children and young people

Safeguarding Considerations

Specific risk assessments and preparations need to be in place to ensure the safety of all children and ensure that no member of staff or volunteer is compromised.

- Ensure that any additional NNRF activities involving children are agreed and approved by a line manager in advance.
- Ensure a safe environment, carrying out appropriate risk assessments.
- Include gender-appropriate staffing

- Consider the age range of children and young people who will be mixing together and ageappropriateness of activities
- For off-site activities, give the young people guidance about safety rules and procedures.
- For residential events, a parental/carer/guardian consent form must be obtained.
- Transport or escorts must be provided for children under the age of 13 and parent/carer/ guardian consent obtained for any children aged 13-18 who can be responsible for making their own way to/from external activities/events.
- NNRF staff/volunteers should, if possible, avoid working in an isolated location or travelling in a 1:1 situation with a child or young person, and, if it is unavoidable, should make sure that the parent/carer/guardian is aware of the situation and that the situation has been appropriately risk assessed.
- Do not behave in away, physically or verbally, that could be offensive, being mindful of cultural differences.

APPENDIX 6: Useful contact details and links

CHILDREN

Nottingham City Children's Social Care

Tel: 0115 876 4800

Monday to Friday from 8:30 am to 4:50 pm. (Outside of these hours, the telephone number should be used for emergency safeguarding enquiries only).

candfdirect@nottinghamcity.gov.uk

Nottingham City Safeguarding Children Referral Form

Children & Families Direct (nottinghamchildrenspartnership.co.uk)

Nottinghamshire Children's Social Care

Safeguarding children - Multi-Agency Safeguarding Hub (MASH) | Nottinghamshire County Council

Tel: 0300 500 80 90

mash.safeguarding@nottscc.gov.uk.

Nottingham Safeguarding Children Partnership

Nottinghamshire Safeguarding Children Partnership

Nottinghamshire Safeguarding Children Referral Form

Report a new concern about a child | Nottinghamshire County Council

What to do if you're worried a child is being abused

What to do if you re worried a child is being abused[1].pdf

Working Together To Safeguard Children

Working Together to Safeguard Children 2018.pdf

Family Support Pathway

http://www.nottinghamchildrenspartnership.co.uk/family-support-pathway/

Child Sexual Exploitation

www.gov.uk/government/publications/child-sexual-exploitation-definition-and-guidance-forpractitioners

Female Genital Mutilation (FGM)

www.gov.uk/government/publications/multi-agency-statutory-guidance-on-female-genitalmutilation

Children who may have been trafficked

Safeguarding children who may have been trafficked - GOV.UK (www.gov.uk)

Criminal Exploitation

Criminal exploitation of children and vulnerable adults: county lines - GOV.UK (www.gov.uk)

ADULTS

Nottingham City Adult Social Care

Tel: 0300 300 3333

Opening hours are 8.30am to 5pm, Monday to Friday

All enquiries outside of these hours, use the Emergency Duty Team 0115 876 1000

0808 800 0340 (Domestic Violence 24hr Helpline)

Safeguarding Adults Referral Form

http://www.nottinghamcity.gov.uk/health-and-social-care/adult-social-care/adult-safeguarding/are-youworried-about-an-adult/

https://www.nottinghamcity.gov.uk/health-and-social-care/adult-social-care/adult-safeguarding/adult-safeguarding-procedures/

Nottinghamshire County Adult Social Care

The Multi-Agency Safeguarding Hub (MASH) is the single point of contact for all professionals to report safeguarding concerns.

Tel: 0300 500 80 90F

email: mash.safeguarding@nottscc.gcsx.gov.uk

Monday to Thursday: 8.30am to 5pm

Friday: 8.30am to 4.30pm

In an emergency outside of these hours, contact the Emergency Duty Team on 0300 456 4546

Referral Pathway Document

http://www.nottinghamshire.gov.uk/media/115370/safeguardingadultsreferralpathway.pdf

Referral Form

http://www.nottinghamshire.gov.uk/care/childrens-social-care/nottinghamshire-childrens-trust/pathway-to-provision/multi-agency-safeguarding-hub-mash

Equation- current advice/forms/pathways for domestic abuse situations and includes the DASH-RIC

https://equation.org.uk/best-practice-library/

Prevent

http://nottinghamshirescb.proceduresonline.com/p_sg_rad_vio_ext.html

E-learning course

https://www.elearning.prevent.homeoffice.gov.uk

Advice and concerns, contact: prevent@nottinghamshire.pnn.police.uk