

# Westminster Abbey: Policy for Safeguarding

Last updated February 2022

Next review date- February 2023

## Table of Contents

<b>Foreword by the Dean of Westminster .....</b>	<b>3</b>
<b>Introduction and Scope of Policy .....</b>	<b>4</b>
Guiding principles .....	4
<b>Safeguarding procedures and practices.....</b>	<b>5</b>
Code of safer working practice .....	5
Safeguarding Governance.....	6
<b>Safer recruitment.....</b>	<b>7</b>
Disclosure and barring services (DBS).....	8
<b>Safeguarding roles and responsibilities .....</b>	<b>8</b>
<b>Who to contact if you have a concern.....</b>	<b>9</b>
<b>Confidentiality and information sharing .....</b>	<b>10</b>
<b>Responding to concerns and disclosures .....</b>	<b>11</b>
<b>Whistleblowing and managing allegations against staff .....</b>	<b>12</b>
<b>Spiritual Abuse .....</b>	<b>13</b>
<b>General Guidance on Safeguarding.....</b>	<b>13</b>
<b>Appendix A - Legislation and guidance.....</b>	<b>14</b>
<b>Appendix B - Safeguarding contact information .....</b>	<b>15</b>
<b>Appendix C - Safeguarding Form.....</b>	<b>17</b>
<b>Appendix Di – Protecting children from abuse .....</b>	<b>18</b>
How might a child be harmed? .....	18
Who might harm a child?.....	18
What is the impact on children?.....	18
Categories, signs and definitions of abuse .....	18
<b>Appendix Dii – Safeguarding adults at risk .....</b>	<b>22</b>
When is an adult at risk of abuse or neglect?.....	22
How do I know if it is neglect or abuse? .....	23
Who might mistreat or abuse an adult at risk? .....	23
Categories of abuse and neglect.....	24

## Foreword by the Dean of Westminster

Many people think that religion is about rules: 'Don't do that' or 'You must do this'. That would make faith a bleak and disappointing thing. Christianity is, in truth, all about being human; being fully alive. 'I came that they may have life, and have it abundantly' said Jesus. In Westminster Abbey, we celebrate the possibility of human flourishing. We try to live our lives fully and we invite others to do the same. We are committed to promoting that life and protecting those who are vulnerable to harm. Safeguarding here is more than a responsibility or a duty, it is part of our way of life.

With a dedicated staff team we aim at vigilance, prompt action, review and learning. We are committed to working in partnership with statutory bodies, voluntary agencies and many others to promote the safety and wellbeing of children and adults at risk. We will act promptly whenever a concern is raised. We will be swift to engage with the appropriate partners should an investigation into abuse become necessary.

The Dean and Chapter holds ultimate responsibility for safeguarding matters at the Abbey. We know our relationships with visitors, staff and the community are a privilege, and we are committed to fulfilling the duty of care which comes with that privilege.

In commending this Safeguarding Policy to all those who visit, live and work within the Abbey precincts, I would like to thank all my colleagues who share in this duty of care and take it to heart.

A handwritten signature in black ink, appearing to read 'David Hoyle', with a long horizontal flourish underneath.

**The Very Reverend Dr David Hoyle**

Dean of Westminster

## Introduction and Scope of Policy

Westminster Abbey is committed to safeguarding the 1.5 million visitors and worshippers it welcomes each year. The Abbey is dedicated to safeguarding children and adults at risk so they can visit, worship and grow safely in Christ. This is done by acting together in a coordinated and supported manner and requires the Abbey clergy, staff and volunteers to be alert and make timely responses to concerns.

The Abbey's approach to safeguarding is both proactive and reactive, and the Abbey is committed to safeguarding best practice which includes:

- Procedures to prevent, identify, respond to and report concerns
- Designated safeguarding staff
- Codes of safe practice
- Safer recruitment procedures
- Contextualised safeguarding training
- Multi agency working.

The following legislation and guidance underpins this policy and safeguarding practice at the Abbey: The Children Act 2004, the Care Act 2014, Care Act Guidance 2020, Promoting a Safer Church 2017, Practice Guidance: Safer Recruitment 2016, Working Together to Safeguard Children 2018 and The Children and Social Work Act 2017. Links to all guidance and legislation can be found in Appendix A.

The Abbey's approach to safeguarding is to mitigate risk of harm to anyone. This is underpinned by definitions from Working Together to Safeguard Children 2018, where safeguarding and promoting the welfare of children is defined as:

- Protecting children from maltreatment
- Preventing impairment of children's health or development
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best outcomes.

Our approach is also informed by the Care Act 2014, which defines safeguarding adults as protecting an adult's right to live in safety, free from abuse and neglect

### Guiding principles

The principles below will guide all elements of safeguarding activity delivered by those at all levels within Westminster Abbey (including St Margaret's Church):

- Pastoral care which is respectful and informed
- Timely safeguarding action, with advice sought and action taken within 24 hours
- The involvement of others on a need to know basis only

- Proactive prevention and the early identification and management of actual or potential risks
- The active commitment of all in promoting and keeping our community safe.

Safeguarding children, and adults at risk of harm is the responsibility of everyone and an essential component of our mission and ministry. This document demonstrates and guides all those who work at Westminster Abbey on the part that they need to play in order to ensure that the Abbey is a safe environment for everyone. Westminster Abbey Choir School has its own Safeguarding Policy and procedures that are informed by and consistent with those contained in this document and, additionally, ensure compliance with all relevant legislation and statutory guidance.

Throughout this policy the following definitions will be followed;

- A child is defined in law as anyone under the age of 18.
- An 'adult at risk' is someone aged 18 or over who is unable to look after their own well-being, property, rights or other interests, is at risk of harm (either from another person's behaviour or from their own behaviour), and/or is more vulnerable to being harmed than other adults because they have a disability, mental disorder, illness or physical or mental infirmity.

## Safeguarding procedures and practices

### Code of safer working practice

This code is provided during their induction to all at Westminster Abbey to follow when working and volunteering with children and adults. The code represents the behaviours which constitute safe practice. As such it will assist those working with children and adults at risk to do so safely and responsibly, enabling them to monitor their own standards of integrity and good practice.

All staff and volunteers should:

- Treat all children and adults with respect and dignity, keeping your own words, attitude and body language respectful;
- Actively communicate with children and adults at risk and involve them in planning and running relevant activities where possible;
- Avoid being alone with a child (wherever possible there should be two safely recruited adults with each child or group of children);
- Provide pastoral care in public spaces and not in own homes;
- Conduct home visits only when signed off by line managers and risk-assessed with the Abbey Safeguarding Officer;
- Sustain a culture where staff (paid and voluntary), children and adults at risk feel comfortable to point out inappropriate attitudes and behaviour in each other;

- Make it clear who someone can speak to about a personal concern, and be proactive in addressing concerns and allegations;
- Never use illicit drugs, abuse prescription medication, or consume alcohol when responsible for a child or adult at risk;
- Keep any physical contact specific to the needs of the activity and always seek permission from the person first;
- Obtain consent for any photographs/videos to be taken, shown or displayed;
- Never take any photos or videos on personal devices;
- Act in accordance with the guidance on communicating electronically and the social media policy, avoiding inappropriate on-line friendships;
- Never use rough play, sexually provocative words and games, or any forms of physical punishment;
- Never 'scapegoat', ridicule or reject a child, group or adult or allow others so to do;
- Avoid showing favouritism to any one child, adult or group or doing anything to reinforce any inappropriate behaviours;
- Never give lifts to children on their own or on your own or allow unknown adults access to children;
- Never share sleeping accommodation with children, or give or accept invitations to visit a home alone;
- Always operate within the Abbey's principles, procedures and guidelines, clarifying these when unsure;  
Not accept or give any cash or monetary gifts, which could be open to misinterpretation as an inducement to inappropriate action.

The list above sets clear expectations of behaviour and codes of practice which serve to reduce the possibilities of positions of trust being intentionally or unintentionally abused or misused, or false accusations being made. It is not comprehensive, and it must be interpreted in the context of the broader principles set out above.

### Safeguarding Governance

The Abbey's safeguarding governance ensures accountability, best practice and quality assurance across its safeguarding processes. The structure is made up of three groups who meet regularly. This structure also ensures internal and external scrutiny and challenge of safeguarding processes.

Safeguarding Case Review	<ul style="list-style-type: none"> <li>• Review new and ongoing cases and risk management</li> <li>• Ensure appropriate actions, follow up and referrals are made</li> <li>• Ensure individuals (external and staff) are supported appropriately</li> <li>• Record lessons learned and best practice</li> </ul>
Serious Case Management group/ Core Group	<ul style="list-style-type: none"> <li>• Review and determine action on high level cases which require a senior leadership group approach, ensuring that the interests of victims are at the centre of the decisions taken</li> <li>• Involve legal and communications teams as necessary</li> </ul>
Safeguarding Action Group	<ul style="list-style-type: none"> <li>• Use a data driven approach to suggest and implement changes to delivery, policy and procedure</li> </ul>

	<ul style="list-style-type: none"> <li>• Review actions and disseminate guidance to teams where necessary, ensuring clear communication about safeguarding processes</li> <li>• Review staff/volunteer training needs</li> </ul>
Safeguarding Reference Group	<ul style="list-style-type: none"> <li>• Provide an independent and objective view of safeguarding across the Abbey.</li> <li>• Undertake strategic governance and scrutiny (test and challenge) of safeguarding processes, procedure and implementation</li> <li>• Review updated risk register/action tracker/audit responses and other outputs from the Safeguarding Action Group</li> <li>• Discuss relevant changes in law and legislation and lessons learned from high-level cases and related reviews (e.g. IICSA, the Independent Inquiry into Child Sexual Abuse), and determine the implications for Abbey policy and procedure</li> <li>• Ensure emerging national policy and best practice are identified and adopted</li> </ul>

## Safer recruitment

Safer recruitment practices form part of a system of checks and balances which will minimise the possibility of appointing inappropriate individuals to work at the Abbey.

Appointments to all roles within Westminster Abbey should be in accordance with the Abbey's Recruitment policy, which takes account of the Church of England's 'Promoting a Safer Church' (2017), and 'Safeguarding Recruitment Policy and Practice Guidance' (2014). Each appointment to both paid and voluntary posts should be subject to a recruitment process, vetting checks and a probationary period of at least six months. Good appointment and support processes will include:

- Clarity about what the post involves and the kind of person to occupy it (role description / person specification)
- Application via application forms and not CVs
- Safer recruitment trained staff member on all interview panels
- Completion of confidential declaration forms enabling information to be openly explored
- Consistent interviewing and assessment methods, where identity is verified (by seeing photographic evidence i.e. a passport or new-style driving licence)
- Requesting appropriate, specific references to ascertain a person's suitability for the role
- DBS checks (see following section) at the appropriate level on all staff and volunteers before they start their roles
- Clear and thorough risk assessments to enable 'safe' appointments to be made where necessary
- Using a Volunteer Agreement and Code of Conduct to guide best practice
- Provision of appropriate means of induction, supervision, training and ongoing support.

Those appointing to both paid and voluntary posts should use the recruitment process as an opportunity to satisfy themselves that the person has the knowledge, skills, experience and integrity for the work.

Where individual are contracted to the Abbey, the Abbey should satisfy itself through contractual agreements that organisations have carried out adequate safer recruitment processes.

Children (under the age of 18) volunteering or undertaking work experience must never be left alone with responsibility for a child / group of children or adults at risk and should be supervised at all times. Safer Recruitment principles should still be applied, and one of the references must be provided by their Head Teacher / Head of Year. They must also count as a child in any ratios of adults to children when involved in children's work.

DBS processes are conducted by the Abbey's HR department. DBS returns will be renewed every 5 years, and the level of DBS will be dependent on the role and its involvement with children and vulnerable people.

#### Disclosure and barring services (DBS)

The DBS is responsible for processing applications for criminal record checks (DBS disclosures) and for assessing whether the individuals concerned are a danger to children or adults at risk or are/should be legally prevented from working or volunteering with these groups.

There is a legal duty to refer to the DBS, for consideration for potential barring, anyone that has been employed by, or volunteered for, the Abbey, where allegations have been received, referred to the appropriate authorities and found to have substance.

A protocol for 'Managing Offenders' must be completed for all those with cautions or convictions. A risk assessment should be completed with those who may potentially present a risk. These assessments will be prepared by the ASO in consultation with HR, and where applicable constraints will be put in place to protect both vulnerable groups and the (alleged) offenders, including provision for pastoral care. These agreements are to be reviewed regularly to ensure that they remain appropriate and are being adhered to.

## Safeguarding roles and responsibilities

### **Dean and Chapter Safeguarding Lead**

The Dean has overall responsibility for all safeguarding policy and its implementation across Westminster Abbey, including St Margaret's Church, Westminster Abbey Choir School and the Abbey's ancillary buildings and grounds. The Dean works closely with the Abbey Safeguarding Officer to ensure that consistent and up-to-date standards, policy and practice are in place at all times.

### **The Abbey Safeguarding Officer (ASO)**

The ASO is responsible for ensuring through the provision of specialist advice, support, training and monitoring that Abbey safeguarding policy and procedures are up-to-date and are being effectively implemented. The ASO is responsible for the timely and effective management of any concerns about risks of harm to or by anyone in the Abbey community. The ASO's role is also to ensure that these are reported appropriately both to the statutory agencies and to the Dean and Chapter.

### **Independent Chair of the Safeguarding Reference Group (SRG)**

This external expert leads the SRG and provides independent advice as necessary.

### **Diocese of London Safeguarding Advisor**

Professional safeguarding advice is provided, as necessary, to those fulfilling the safeguarding roles listed above, by one or more named members of the London Diocesan Safeguarding team.

### **Westminster Local Authority**

Westminster has local safeguarding partnerships for children adults. The core objectives of these is to coordinate local work to safeguard and promote the welfare of children and adults at risk and to ensure the effectiveness of what the member organisations do individually and together.

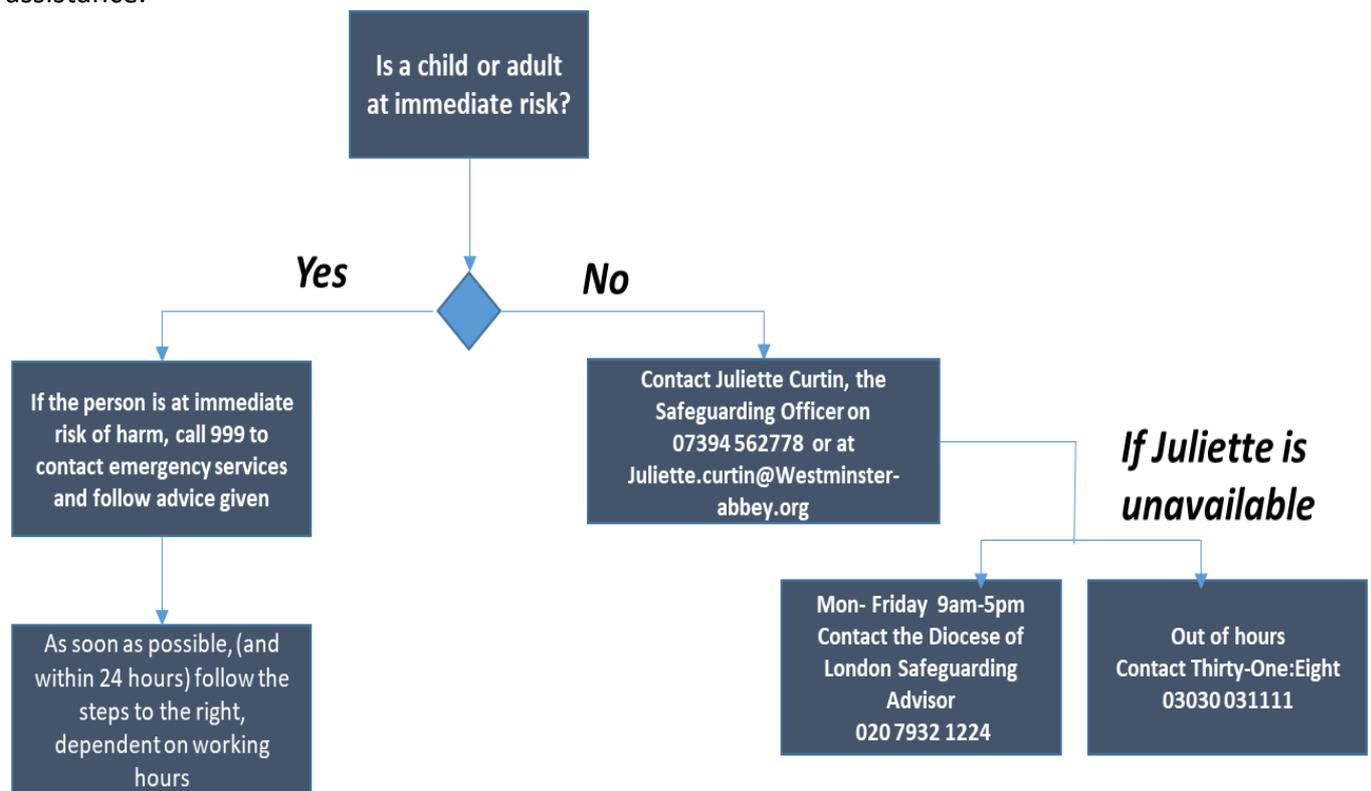
A full list of these contact details and other important contact information can be found in Appendix B.

## Who to contact if you have a concern

Concerns about children and adults at risk will be diligently and promptly responded to, recognising the sensitivity it may hold for those involved. All concerns should be reported immediately where possible, but in any case within 24 hours. Concerns should be documented on the safeguarding form found in Appendix C.

- Where there is a concern which arises Monday to Friday 9am- 5pm, this should be reported to the Abbey Safeguarding Officer.
- In the event that the Abbey safeguarding officer is not available Monday- Friday (9am-5pm) contact the Diocese of London Safeguarding Advisor on 020 7932 1224
- Out of hours advice can be sought from the Thirtyone:eight helpline on 0303 003 1111
- If there is immediate risk to an individual, emergency services should be called on 999 without delay.

The following flow chart sets out the process you should follow and from whom you can seek assistance.



**Email a completed safeguarding concern form (within 24 hours) to [safeguarding@Westminster-abbey.org](mailto:safeguarding@Westminster-abbey.org)**

## Confidentiality and information sharing

This policy takes into account ‘Information Sharing: advice for practitioners providing safeguarding services (2018)’, which reflects the ‘Data Protection Act 2018.’

Confidentiality is an important principle that enables people to feel safe in sharing their concerns and to ask for help. However, the right to confidentiality is not absolute. Sharing relevant information with the right people at the right time is vital to good safeguarding practice.

- Information will only be shared on a ‘need to know’ basis.
- In respect of adults, informed consent should be obtained, but if this is not possible and others are at risk of abuse or neglect, it may be necessary to override the requirement
- It is inappropriate to give assurances of absolute confidentiality in cases where there are concerns about abuse, particularly in those situations when others may be at risk.

Any disclosure must be treated with sensitivity. The first priority should always be to ensure the safety and protection of the individuals involved and the staff/volunteer who has been the first point of contact. “Where a vulnerable person is judged to be at risk of significant harm or an adult is likely to harm themselves or others, usually it will be legally possible, appropriate and highly desirable to disclose relevant information to the public authorities for the sake of protecting that vulnerable person” (Promoting a Safe Church, 2017). All concerns therefore should in the first instance be passed to the Abbey Safeguarding Officer within 24 hours.

Regarding adult safeguarding, it is appropriate to ascertain the wishes of the adult at risk as to what they want to do about the situation, explaining the boundaries of confidentiality. However, care should be taken in telling the adult at risk what you are going to do, if it could make them more vulnerable or at further risk.

The Abbey safeguarding Officer will need to consider whether it is appropriate to inform a child’s parent/carer of any suspected abuse. In some circumstances this may increase the risk of harm to the child and jeopardise any future police investigations.

## Responding to concerns and disclosures

If someone tells you about abuse, neglect or harm, your role is to respond sensitively and inform the Abbey Safeguarding Officer within 24 hours.

In emergency situations (where you believe that that someone will be further harmed if left in their current situation) contact the police, ambulance or social services immediately and inform the Abbey Safeguarding Officer as soon as possible but always within 24 hours. Make a record immediately afterwards and always let the police know all that you have seen and done in responding to the situation.

Do:

- Thank the person concerned for telling you;
- Assure them you are taking them seriously;
- Reassure them they are not to blame;
- Stay calm, as the person concerned is likely to be anxious and need reassuring;
- Listen attentively and accept what is being said – your role is to pass on the concern;
- Let the person tell you in their own words – avoid making any assumptions or suggesting explanations;
- Let them know that you have a duty to speak to the Abbey Safeguarding Officer about the situation and that their concerns may have to be shared with others who could have a part to play in protecting them;
- Reassure them that they will be informed about what will happen next;
- Explain that you will try to take steps to protect them from further harm;
- After the event record what was said and/or seen using their own words or actions.

Do Not:

- Press for more details – someone more appropriate may do this at a later point;
- Be judgmental, jump to conclusions or voice your own opinion;
- Promise to keep secrets or maintain unconditional confidentiality;
- Ask leading questions;
- Discuss the information with anyone who does not need to know;
- Attempt to deal with the problem alone, or try to investigate it.

## Whistleblowing and managing allegations against staff

This section outlines guidance and recommendations regarding whistleblowing and raising concerns in line with the Abbey's Concerns at Work (Whistleblowing) Policy.

Staff must acknowledge their individual responsibility to bring matters of safeguarding concern to the attention of the Abbey Safeguarding Officer or the Dean. All staff and volunteers have the responsibility for raising concerns about unacceptable practice or behaviour.

Staff and volunteers may experience the following concerns when contemplating whistleblowing, which will need to be overcome:

- A chain of events which spirals
- Disrupting ongoing work or projects
- Fear of getting it wrong
- Fear of repercussions or damaging careers
- Fear of not being believed.

As a whistle-blower you should voice your concerns, suspicions or uneasiness as soon as you feel you can. The earlier a concern is expressed, the easier and sooner action can be taken.

- Try to pinpoint exactly what practice is concerning you and why.
- Approach the Abbey Safeguarding Officer (ASO).
- If your concern is about the ASO or the Dean, contact the Receiver General.
- Make sure you get a satisfactory response - don't let matters rest.
- Investigations will be carried out by the ASO, with the support of HR where necessary.
- As best practice you should put your concerns in writing, outlining the background and history, giving names, dates and places where you can.
- A member of staff is not expected to prove the truth of an allegation, but you will need to demonstrate sufficient grounds for the concern.
- You should be given information on the nature and progress of any enquiries.
- The Abbey has a responsibility to protect you from harassment or victimisation.

- No action will be taken against you if the concern proves to be unfounded as long as it was raised in good faith.
- You will be offered the support you need to deal with any safeguarding concerns

If a whistle-blower approaches you on a matter of safeguarding, you should ask them to speak directly to the ASO as above.

## Spiritual Abuse

Within faith communities harm can be caused by the inappropriate use of religious belief or practices. This can include the misuse of the authority of leadership, penitential discipline, oppressive teaching, or intrusive healing and deliverance ministries, which may result in both adults at risk and children experiencing physical, emotional, or sexual harm.

The Abbey will avoid any practice which could be seen as an attempt to 'force' religious values or behaviours onto vulnerable people. Additionally, spiritual abuse may include attempts to direct what people believe and do, and to deny choices.

## General Guidance on Safeguarding

Further details on categories of abuse and signs to watch for is included in Appendix D.

## Appendix A - Legislation and guidance

[The Children Act 2004](#)

[Care Act 2014](#)

[Care Act Guidance 2020](#)

[Promoting a Safer Church 2017](#)

[Practice Guidance: Safer Recruitment 2016](#)

[The Children and Social Work Act 2017.](#)

[Working Together to Safeguard Children 2018](#)

[Information Sharing: advice for practitioners providing safeguarding services \(2018\)](#)

[Equality Act 2015](#)

## Appendix B - Safeguarding contact information

### **Westminster Abbey safeguarding contacts**

#### Abbey Safeguarding Officer

Juliette Curtin                      07394 562778

[juliette.curtin@westminster-abbey.org](mailto:juliette.curtin@westminster-abbey.org)

#### Independent Chair

Peter Spindler                      07765 220963

[Peter@pspindlerassociates.com](mailto:Peter@pspindlerassociates.com)

### **Diocese of London**

Safeguarding Team                020 7932 1224

[Safeguarding@london.anglican.org](mailto:Safeguarding@london.anglican.org)

### **Local Authority contact information**

#### Children's Social Care (Westminster)

Children and Family Services 020 7641 4000.

Out of hours (after 5pm and weekends) 020 7641 2388

[Accesstochildrensservices@westminster.gov.uk](mailto:Accesstochildrensservices@westminster.gov.uk).

#### Local Authority Designated Officer (LADO)

Westminster Access Team 020 7641 4000

Out of hours (after 5pm and weekends) 020 7641 6000

[Accesstochildrensservices@westminster.gov.uk](mailto:Accesstochildrensservices@westminster.gov.uk).

#### Adult Services (Westminster)

Adult Social Care 020 7641 2500

Out of hours (after 5pm and weekends) 020 7641 2388

Mental Health Single Point of Contact 0800 023 4650

[Adultsocialcare@westminster.gov.uk](mailto:Adultsocialcare@westminster.gov.uk)

#### Prevent Team (Radicalisation and Extremism)

Prevent Team 07817 054759

[Prevent@westminster.gov.uk](mailto:Prevent@westminster.gov.uk)

### **Other useful contacts**

NSPCC Child Protection Helpline 0808 800 5000

Childline 0800 1111

Thirty-One: Eight 0303 003 1111

Samaritans 116 123

## Appendix C - Safeguarding Form

Please send to [safeguarding@westminster-abbey.org](mailto:safeguarding@westminster-abbey.org) within 24 hours of incident.  
Safeguarding Mobile Number- 07394 562778

<b>Name of person filling out form:</b>		<b>Job Title:</b>	
<b>Department:</b>			
<b>Date of Incident/concern:</b>		<b>Time of incident/concern:</b>	
<b>Location of incident/concern:</b>			
<b>Full name of individual involved:</b>			
<b>Further information:</b>	<b>Age</b>	<b>Gender</b>	<b>Phone Number</b>
			<b>Address</b>
<b>If the individual is part of a group / organisation, please detail (name / contact information):</b>			
<b>Names and contact details of witnesses:</b>			
<b>Description of incident/concern and action taken:</b> <i>[please use additional pages if necessary]</i>			

## Appendix Di – Protecting children from abuse

### How might a child be harmed?

Children can be harmed in many ways. Maltreatment of a child occurs where their health, physical, emotional, intellectual, sexual, spiritual or social development is damaged by other people. All abuse is a betrayal of trust and a misuse of relationships and power. Church communities must be particularly vigilant to identify the inappropriate use of any religious belief or practice which may harm somebody spiritually, emotionally or physically. Abuse can be an act of commission, such as sexual abuse, or omission, such as neglect or failure to protect or report.

Child abuse affects girls and boys, babies and young people of all ages up to 18, including children with learning difficulties, children with physical disabilities and children from all kinds of family backgrounds. It can occur in all cultures, religions and classes. Research shows that disabled children are more vulnerable. Abuse may be happening in the home, in the Abbey precincts or in peer relationships.

Digital technology such as the internet and mobile phones are being increasingly used as a medium for abuse. Amongst their peers, children may experience 'sexting' or be enticed to take or send explicit photographs of themselves. With adults it may also take the form of the production and distribution of photographs or videos displaying abusive images of children. Children can be entrapped by these practices.

### Who might harm a child?

Children may be abused in a family, institutional or community setting by those known to them, or, more rarely, by a stranger. They may be abused by an adult or adults, or by another child or children, including bullying and abuse through the use of digital technology. Someone may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Most child abuse (circa 70%) is perpetrated by an adult, male or female, who is well known to the child, often a family member. Such trusted adults may be in the child's community; they may be trusted professionals, leaders or members of a child's church.

### What is the impact on children?

Abuse can result in a child suffering significant harm and the need for court proceedings to safeguard their welfare. Abuse prevents children from achieving their full potential and undermines their dignity and rights. It can be educational, emotional, psychological and relational. The harm it causes can affect children both while it is happening and in later life. Reports of historic abuse are therefore to be responded to with the same diligence. When abuse occurs within the context of a church or is perpetrated by a church member, it may affect the person's faith and spiritual development.

Children may suffer both directly and indirectly if they live in households where there is domestic abuse. Domestic abuse includes any incident of threatening behaviour, violence or abuse between adults or young people, who are or who have been intimate partners, family members or extended family members, regardless of gender and sexuality. Domestic abuse will always involve at least indirect emotional abuse of any children in the household, and there may also be direct abuse of them.

### Categories, signs and definitions of abuse

There are four categories of abuse described in "Working Together to Safeguard Children", (2013) from which the following definitions are taken.

## Physical abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces illness in, a child.

<b>PHYSICAL ABUSE</b>	
<b><i>Physical Signs</i></b>	<b><i>Behavioural Signs</i></b>
<p>Bruises, black eyes and broken bones are obvious signs of physical abuse, but they are not the only ones. Other signs include:</p> <ul style="list-style-type: none"> <li>• injuries that the child cannot explain or explains unconvincingly</li> <li>• untreated or inadequately treated injuries</li> <li>• injuries to parts of the body where accidents are unlikely, such as thighs, back, abdomen</li> <li>• bruising which looks like hand or finger marks</li> <li>• cigarette burns, human bites, scalds and burns</li> </ul>	<p>Sometimes if a child is being physically abused they may show changes in behaviour, such as:</p> <ul style="list-style-type: none"> <li>• becoming sad, withdrawn or depressed</li> <li>• having trouble sleeping</li> <li>• behaving aggressively or being disruptive</li> <li>• showing fear of certain adults</li> <li>• showing lack of confidence and low self-esteem</li> <li>• using drugs or alcohol</li> </ul>

## Sexual abuse

Sexual abuse involves forcing or enticing a child to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

<b>SEXUAL ABUSE</b>	
<b><i>Physical Signs</i></b>	<b><i>Behavioural Signs</i></b>
<ul style="list-style-type: none"> <li>• pain, itching, bruising or bleeding in the genital or anal areas</li> <li>• genital discharge or urinary tract infections</li> <li>• stomach pains or discomfort walking or sitting sexually transmitted infections</li> </ul>	<ul style="list-style-type: none"> <li>• a marked change in the child's general behaviour. For example, they may become unusually quiet and withdrawn, or unusually aggressive. Or they may start suffering from what may seem to be physical ailments, but which can't be explained medically</li> <li>• a young person may refuse to attend school or start to have difficulty concentrating so that their schoolwork is affected</li> </ul>

	<ul style="list-style-type: none"> <li>• they may show unexpected fear or distrust of a particular adult or refuse to continue with their usual social activities</li> <li>• they may start using sexually explicit behaviour or language, including behaviour or language which is not appropriate for their age</li> <li>• the child may describe receiving special attention from a particular adult, or refer to a new, “secret” friendship with an adult or young person</li> </ul>
--	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

### Neglect

Neglect is the persistent failure to meet a child’s basic physical and/or psychological needs, likely to result in the serious impairment of the child’s health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- protect a child from physical and emotional harm or danger;
- ensure adequate supervision (including the use of inadequate care-givers);
- ensure access to appropriate medical care or treatment.

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

<b>NEGLECT</b>	
<b><i>Physical Signs</i></b>	<b><i>Behavioural Signs</i></b>
<ul style="list-style-type: none"> <li>• abandonment</li> <li>• unattended medical needs</li> <li>• consistent lack of supervision</li> <li>• constant hunger, inappropriate dress, poor hygiene</li> <li>• lice, distended stomach, emaciated</li> <li>• inadequate nutrition</li> </ul>	<ul style="list-style-type: none"> <li>• regularly displays fatigue or listlessness, falls asleep in sessions</li> <li>• steals food, begs from others</li> <li>• reports that there is no carer at home</li> <li>• frequently absent or late</li> <li>• self-destructive</li> <li>• extreme loneliness and need for affection</li> <li>• school dropout (adolescents)</li> </ul>

### Emotional abuse

Emotional abuse is the persistent emotional maltreatment of a child which causes 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 in so far as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or ridiculing what they say or how they communicate.

Emotional abuse may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child’s developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may also involve: seeing or hearing the ill-treatment of another, for example in domestic violence situations; serious bullying (including cyber-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 maltreatment of a child, but it may occur as the sole or main form of abuse.

<b>EMOTIONAL ABUSE</b>	
<b><i>Physical Signs</i></b>	<b><i>Behavioural Signs</i></b>
<ul style="list-style-type: none"> <li>• speech disorders</li> <li>• delayed physical development</li> <li>• substance abuse</li> <li>• ulcers, severe allergies</li> </ul>	<ul style="list-style-type: none"> <li>• habit disorder (sucking, rocking, biting)</li> <li>• antisocial, destructive behaviour</li> <li>• passive and aggressive behavioural extremes</li> <li>• delinquent behaviour (especially adolescents)</li> <li>• neurotic traits (sleep disorders, inhibition of play)</li> <li>• developmentally delayed</li> </ul>

**Why children don’t tell and adults don’t act?**

It is commonly believed that a child or young person would resist abuse at all costs or immediately tell a trusted adult. In fact children usually need to overcome a number of barriers which may be emotional or intellectual but are very real for them. The majority of children don’t tell because often they:

- are scared because they have been threatened;
- believe they will be taken away from home and put in care;
- believe they are to blame;
- think it is what happens to all children;
- feel embarrassed and guilty;
- do not want the abuser to get into trouble;
- have communication or learning difficulties;
- do not have the vocabulary to explain what happened;
- are afraid they won’t be believed.

All of us have a natural revulsion upon hearing that someone has maltreated a child, especially if it is someone we know, and we must resist our inclination to dismiss its possible truth in favour of a more comfortable rationale. The reasons adults do not share their concerns about children may be because we:

- find it hard to believe what we are seeing or hearing;
- cannot believe that someone we know may have behaved in this way;
- fear we might ‘get it wrong’ or make it worse;
- fear the consequences of getting it wrong – for the child, young person, their family and/or for ourselves;
- simply ‘don’t want to be involved’;
- believe we do not have the information about what to do or who to contact.

## Appendix Dii – Safeguarding adults at risk

### When is an adult at risk of abuse or neglect?

Government guidance says safeguarding duties apply to an adult who:

- has needs for care and support (whether or not the local authority is meeting any of those needs);
- is experiencing, or at risk of, abuse or neglect;
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

Within faith settings it is also recognised as applying to a person who has recently suffered personal adversity making them in particular need of pastoral support.

Some of the factors that may increase the risk of abuse or neglect include:

- sensory or physical disability or impairment
- learning disability
- physical illness
- chronic or acute mental ill health (including dementia)
- addiction to alcohol or drugs
- permanent or temporary reduction in physical, mental or emotional capacity through life events such as bereavement / loss, abuse or trauma.

Mistreatment or abuse can occur in any relationship and may result in harm or exploitation.

The aims of adult safeguarding are to:

- prevent harm and reduce the risk of abuse or neglect to adults with care and support needs;
- stop abuse or neglect wherever possible;
- safeguard adults in a way that supports them in making choices and having control about how they want to live;
- promote an approach that concentrates on improving life for the adults concerned;
- raise public awareness so that communities as a whole, alongside professionals, play their part in preventing, identifying and responding to abuse and neglect;
- provide information and support in accessible ways to help people understand the different types of abuse, how to stay safe and what to do to raise a concern about the safety or well-being of an adult;
- address what has caused the abuse or neglect.

The Government has also set out six key principles that underpin all adult safeguarding work and have used 'I' statements (what I would like to happen) as an example for each principle. These in turn provide a good set of principles for office holders, employees and volunteers to consider, when working with adults at risk.

#### **Empowerment**

People should be supported and encouraged to make their own decisions and informed consent.

"I am asked what I want as the outcomes from the safeguarding process and these directly inform what happens."

#### **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."

## **Proportionality**

We should make the least intrusive response appropriate to the risk presented.

“I am sure that the professionals will work in my interest, and they will only get involved as much as needed.”

## **Protection**

Those in greatest need should receive support and representation.

“I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want.”

## **Partnership**

Local solutions should be provided 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 and with me to get the best result for me.”

## **Accountability**

There is a need for accountability and transparency in delivering safeguarding.

“I understand the role of everyone involved in my life and so do they.”

## [How do I know if it is neglect or abuse?](#)

This next section considers the different types and patterns of abuse and neglect and the different circumstances in which they may take place. This is not intended to be an exhaustive list but an illustrative guide as to the sort of behaviour which could give rise to a safeguarding concern.

We should not limit our view of what constitutes abuse or neglect, as they can take many forms and the circumstances of the individual should always be considered. Exploitation, in particular, is a common theme in the following list of the types of abuse and neglect.

## [Who might mistreat or abuse an adult at risk?](#)

Anyone can perpetrate abuse or neglect, including:

- spouses/partners
- other family members
- neighbours
- friends
- acquaintances
- local residents
- people who deliberately exploit adults they perceive as vulnerable to abuse
- paid staff or professionals and volunteers
- strangers.

While a lot of attention is paid, for example, to targeted fraud or internet scams perpetrated by complete strangers, it is far more likely that the person responsible for abuse is known to the adult and is in a position of trust and power. Abuse can happen anywhere: for example, in someone’s own home, in a public place, in hospital, in a care home or in college. It can take place when an adult lives alone or with others.

## **Self-neglect**

There is no single definition of self-neglect. However, the Care Act makes clear it comes within the definition of abuse or neglect, if the individual concerned has care and support needs and is unable to protect him- or

herself. The Department of Health has defined it as ‘... a wide range of behaviour neglecting to care for one’s personal hygiene, health or surroundings and includes behaviour such as hoarding’.

### Categories of abuse and neglect

Ten general categories of abuse have been identified, with an additional eleventh – spiritual abuse – discussed earlier in this document. Any or all of these may be carried out as the result of deliberate intent and targeting of adults, negligence or ignorance. The examples of abuse and possible indicators are taken from The Social Care Institute for Excellence (SCIE) ‘At a glance guide 69: Adult safeguarding: Types and indicators of abuse’ published in January 2015.

#### Physical abuse

Types of physical abuse

- Assault, hitting, slapping, punching, kicking, hair-pulling, biting, pushing
- Rough handling
- Scalding and burning
- Physical punishments
- Inappropriate or unlawful use of restraint
- Making someone purposefully uncomfortable (e.g. opening a window and removing blankets)
- Involuntary isolation or confinement
- Misuse of medication (e.g. over-sedation)
- Forcible feeding or withholding food
- Unauthorised restraint, restricting movement (e.g. tying someone to a chair).

Possible indicators of physical abuse

- No explanation for injuries or inconsistency with the account of what happened
- Injuries are inconsistent with the person’s lifestyle
- Bruising, cuts, welts, burns and/or marks on the body or loss of hair in clumps
- Frequent injuries
- Unexplained falls
- Subdued or changed behaviour in the presence of a particular person
- Signs of malnutrition
- Failure to seek medical treatment or frequent changes of GP

#### Domestic violence or abuse

Domestic violence or abuse can be characterised by any of the indicators of abuse outlined in this briefing relating to:

- psychological
- physical
- sexual
- financial
- emotional aspects.

Domestic violence and abuse includes any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those who are, or have been, intimate partners or family members regardless of gender or sexuality. It also includes so called 'honour' -based violence, female genital mutilation and forced marriage.

Coercive or controlling behaviour is a core part of domestic violence. Coercive behaviour can include:

- acts of assault, threats, humiliation and intimidation
- harming, punishing, or frightening the person
- isolating the person from sources of support
- exploitation of resources or money

- preventing the person from escaping abuse
- regulating everyday behaviour.

#### Possible indicators of domestic violence or abuse

- Low self-esteem
- Feeling that the abuse is their fault when it is not
- Physical evidence of violence such as bruising, cuts, broken bones
- Verbal abuse and humiliation in front of others
- Fear of outside intervention
- Damage to home or property
- Isolation – not seeing friends and family
- Limited access to money.

#### **Sexual abuse**

##### Types of sexual abuse:

- Rape, attempted rape or sexual assault
- Inappropriate touch anywhere
- Non- consensual masturbation of either or both persons
- Non- consensual sexual penetration or attempted penetration of the vagina, anus or mouth
- Any sexual activity to which the person lacks the capacity to consent
- Inappropriate looking, sexual teasing or innuendo, or sexual harassment
- Sexual photography or forced use of pornography or witnessing of sexual acts
- Indecent exposure.

##### Possible indicators of sexual abuse:

- Bruising, particularly to the thighs, buttocks and upper arms and marks on the neck
- Torn, stained or bloody underclothing
- Bleeding, pain or itching in the genital area
- Unusual difficulty in walking or sitting
- Foreign bodies in genital or rectal openings
- Infections, unexplained genital discharge, or sexually transmitted diseases
- Pregnancy in a woman who is unable to consent to sexual intercourse
- The uncharacteristic use of explicit sexual language or significant changes in sexual behaviour or attitude
- Incontinence not related to any medical diagnosis
- Self-harming
- Poor concentration, withdrawal, sleep disturbance
- Excessive fear/apprehension of, or withdrawal from, relationships
- Fear of receiving help with personal care
- Reluctance to be alone with a particular person.

#### **Emotional or psychological abuse**

##### Types of psychological or emotional abuse:

- Enforced social isolation – preventing someone accessing services, educational and social opportunities and seeing friends
- Removing mobility or communication aids or intentionally leaving someone unattended when they need assistance
- Preventing someone from meeting their religious and cultural needs
- Preventing the expression of choice and opinion
- Failure to respect privacy
- Preventing stimulation, meaningful occupation or activities

- Intimidation, coercion, harassment, use of threats, humiliation, bullying, swearing or verbal abuse
- Addressing a person in a patronising or infantilising way
- Threats of harm or abandonment
- Cyber bullying.

Possible indicators of psychological or emotional abuse:

- An air of silence when a particular person is present
- Withdrawal or change in the psychological state of the person
- Insomnia
- Low self-esteem
- Uncooperative and aggressive behaviour
- A change of appetite, weight loss/gain
- Signs of distress: tearfulness, anger
- Apparent false claims, by someone involved with the person, to attract unnecessary treatment.

### **Financial abuse or material abuse**

Types of financial or material abuse:

- Theft of money or possessions
- Fraud, scamming
- Preventing a person from accessing their own money, benefits or assets
- Employees taking a loan from a person using the service
- Undue pressure, duress, threat or undue influence put on the person in connection with loans, wills, property, inheritance or financial transactions
- Arranging less care than is needed to save money to maximise inheritance
- Denying assistance to manage/monitor financial affairs
- Denying assistance to access benefits
- Misuse of personal allowance in a care home
- Misuse of benefits or direct payments in a family home
- Someone moving into a person's home and living rent free without agreement or under duress
- False representation, using another person's bank account, cards or documents
- Exploitation of a person's money or assets, e.g. unauthorised use of a car
- Misuse of a power of attorney or other legal authority
- Rogue trading – e.g. unnecessary or overpriced property repairs and failure to carry out agreed repairs or poor workmanship.

Possible indicators of financial or material abuse

- Missing personal possessions
- Unexplained lack of money or inability to maintain lifestyle
- Unexplained withdrawal of funds from accounts
- Power of attorney or lasting power of attorney (LPA) being obtained after the person has ceased to have mental capacity
- Failure to register an LPA after the person has ceased to have mental capacity to manage their finances, so that it appears that they are continuing to do so
- The person allocated to manage financial affairs is evasive or uncooperative
- The family or others show unusual interest in the assets of the person
- Signs of financial hardship in cases where the person's financial affairs are being managed by a court appointed deputy, attorney or LPA
- Recent changes in deeds or title to property
- Rent arrears and eviction notices
- A lack of clear financial accounts held by a care home or service

- Failure to provide receipts for shopping or other financial transactions carried out on behalf of the person
- Disparity between the person's living conditions and their financial resources, e.g. insufficient food in the house
- Unnecessary property repairs.

### **Modern slavery**

Types of modern slavery:

- Human trafficking
- Forced labour
- Domestic servitude
- Sexual exploitation, such as escort work, prostitution and pornography
- Debt bondage – being forced to work to pay off debts that realistically they never will.

Possible indicators of 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.

### **Discriminatory abuse**

Types of discriminatory abuse:

- Unequal treatment based on age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex or sexual orientation (known as 'protected characteristics' under the Equality Act 2010)
- Verbal abuse, derogatory remarks or inappropriate use of language related to a protected characteristic
- Denying access to communication aids, not allowing access to an interpreter, signer or lip-reader
- Harassment or deliberate exclusion on the grounds of a protected characteristic
- Denying basic rights to healthcare, education, employment and criminal justice relating to a protected characteristic
- Substandard service provision relating to a protected characteristic.

Possible indicators of discriminatory abuse:

- The person appears withdrawn and isolated
- Expressions of anger, frustration, fear or anxiety
- The support on offer does not take account of the person's individual needs in terms of a protected characteristic.

### **Organisational or institutional abuse**

Types of organisational or institutional abuse:

- Discouraging visits or the involvement of relatives or friends
- Run-down or overcrowded establishment
- Authoritarian management or rigid regimes
- Lack of leadership and supervision
- Insufficient staff or high turnover resulting in poor quality care
- Abusive and disrespectful attitudes towards people using the service
- Inappropriate use of restraints
- Lack of respect for dignity and privacy

- Failure to manage residents with abusive behaviour
- Not providing adequate food and drink, or assistance with eating
- Not offering choice or promoting independence
- Misuse of medication
- Failure to provide care with dentures, spectacles or hearing aids
- Not taking account of individuals' cultural, religious or ethnic needs
- Failure to respond to abuse appropriately
- Interference with personal correspondence or communication
- Failure to respond to complaints.

Possible indicators of organisational or institutional abuse:

- Lack of flexibility and choice for people using the service
- Inadequate staffing levels
- People 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
- Absence of visitors
- 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.

### **Neglect or acts of omission**

Types of neglect and acts of omission:

- Failure to provide or allow access to food, shelter, clothing, heating, stimulation and activity, personal or medical care
- Providing care in a way that the person dislikes
- Failure to administer medication as prescribed
- Refusal of access to visitors
- Not taking account of individuals' cultural, religious or ethnic needs
- Not taking account of educational, social and recreational needs
- Ignoring or isolating the person
- Preventing the person from making their own decisions
- Preventing access to glasses, hearing aids, dentures, etc.
- Failure to ensure privacy and dignity.

Possible indicators of neglect and acts of omission:

- Poor environment – dirty or unhygienic
- Poor physical condition and/or personal hygiene
- Pressure sores or ulcers
- Malnutrition or unexplained weight loss
- Untreated injuries and medical problems
- Inconsistent or reluctant contact with medical and social care organisations
- Accumulation of untaken medication
- Uncharacteristic failure to engage in social interaction
- Inappropriate or inadequate clothing.

### **Self-Neglect**

#### Types of self-neglect:

- Lack of self-care to an extent that it threatens personal health and safety
- Neglecting to care for one's personal hygiene, health or surroundings
- Inability to avoid self-harm
- Failure to seek help or access services to meet health and social care needs
- Inability or unwillingness to manage one's personal affairs.

#### Indicators of 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.