

THE INTER FAITH NETWORK FOR THE UK
SAFEGUARDING CHILDREN AND VULNERABLE ADULTS POLICY

1. Purpose and scope of policy

- 1.1 The Inter Faith Network for the UK (IFN) works to promote inter faith understanding and cooperation in the UK. In order to do so it provides advice and information, holds meetings to enable sharing of information and develops resources. It also leads on the annual Inter Faith Week in England, Northern Ireland and Wales.
- 1.2 IFN does not carry out activities which are specifically for children and vulnerable adults and does not anticipate that it will have any regular or sustained contact with children or vulnerable adults. Nonetheless it is committed to proactively safeguarding and promoting the welfare of its beneficiaries, staff, trustees and volunteers, and to taking reasonable steps to ensure those who come into contact with IFN or IFN's programmes do not, as a result, come to any harm.
- 1.3 IFN has developed this policy to promote protection for all those people with whom it comes into contact, as well as staff, trustees and volunteers within IFN itself.

2. Scope of this Policy

- 2.1 This policy applies to trustees, staff, volunteers, any secondees, as well as persons carrying out activities on behalf of IFN. It also applies to agency workers, consultants, and any other persons contracted to carry out work for IFN while they are carrying out this work.

3. Key Principles

- 3.1 IFN takes with the greatest seriousness the need for children and vulnerable adults to be protected from abuse in the context of its work.
- 3.2 IFN aims to provide and sustain a safe environment for trustees, staff, volunteers and those with whom it comes into contact. This applies to the office and to those venues and contexts in which it undertakes its work, including spaces where remote working is carried out.
- 3.3 All trustees, staff, and volunteers and others as specified at paragraph 2.1 above carry a personal responsibility for safeguarding of children and vulnerable adults in the context of IFN's work and for ensuring that their actions are in accordance with the principles set out in this policy. That includes a responsibility to report any concerns if they witness, or have brought to their attention, a potential safeguarding incident or incidents that might fall within the scope of this policy.
- 3.4 Not all vulnerabilities are visible. IFN will only be in a position to respond to vulnerability if this is brought to its attention by the person who understands themselves to be vulnerable or a representative of that person.
- 3.5 IFN will investigate any allegations relating to safeguarding, regardless of whether the matter has been raised formally or informally.

4. **Member bodies**

IFN has member bodies which are the constitutional members of the IFN charitable company. They receive information from IFN and are invited to its annual meetings and other meetings throughout the year. Member bodies can publicise that they are IFN member bodies. They do not receive grant funding from IFN. IFN expects that the principles it shares with its member bodies mean that they will fully support the values and commitments set out in this policy.

5. **Partner Organisations**

5.1 IFN sometimes partners with other organisations to run joint projects using shared resources (including staff time, branding and intellectual property). Where this is the case, the provisions around working with partners set out in paragraph 2 of the safeguarding procedures set out in the Appendix will be followed. The same provisions will be complied with irrespective of whether or not the partner organisation is also a member body.

6. **What is safeguarding?**

Safeguarding is about embedding practices throughout the organisation to ensure the protection of children and vulnerable adults wherever possible and dealing sensitively and appropriately with the situation should any incident arise which places a child or vulnerable adult at risk or in which a child or vulnerable adult has suffered abuse.

7. **What is abuse?**

7.1 Abuse can be caused by those inflicting harm or those who fail to act to prevent harm. Abuse is not restricted to any socio-economic group, gender or culture.

7.2 Abuse can take a variety of forms, for example:

- Physical abuse
- Sexual abuse
- Emotional abuse
- Psychological abuse
- Neglect
- Radicalisation
- Financial abuse¹

7.3 Discriminatory practices can also be abusive but go beyond the scope of this particular policy.

¹ <https://londonadass.org.uk/wp-content/uploads/2019/05/2019.04.23-Review-of-the-Multi-Agency-Adult-Safeguarding-policy-and-procedures-2019-final-1-1.pdf>

8. What is 'safeguarding' of children?

Definition of 'child'

8.1 A child is defined as 'anyone who has not yet reached their 18th birthday. The fact that a child has reached 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital or in custody in the secure estate, does not change their status or entitlements to services or protection.'²

8.2 Safeguarding children is defined as³:

- protecting children from maltreatment;
- preventing impairment of children's health or development;
- ensuring that children are growing up in circumstances consistent with the provision of safe and effective care; and
- taking action to enable all children to have the best outcomes.

9. What is safeguarding of vulnerable adults?

Definition of 'vulnerable adult'

9.1 The Department for Health defines a vulnerable adult as:

Any adult (aged 18 or over) who:

- has care and support needs (these include health needs)
- is experiencing, or is at risk of, abuse or neglect; or
- is unable to protect themselves because of their care and support needs.⁴

They may have:

- a mental illness;
- a physical disability;
- a learning disability;
- is frail or has a condition or issue that affects their ability to keep themselves safe from harm or abuse; or

²https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/779401/Working_Together_to_Safeguard-Children.pdf

³ Op.Cit.

⁴ Department of Health. *No secrets: Guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse*. DoH, 2000.

- be otherwise in need of additional assistance to protect themselves from harm or exploitation, for example, due to social factors such as poverty, displacement or lack of services and support.
- 9.2 Whether an adult is at risk or not is something which can change with their circumstances – it is not fixed.⁵ It can also be linked to such factors as harassment or bullying which are covered by other IFN policies.
- 9.3 Vulnerability is not to be understood as an impairment or lowered ability.
10. **Key roles**
- 10.1 As noted in paragraph 1 (above) safeguarding is the responsibility of all trustees, members of staff and volunteers.
- 10.2 IFN's Trustees have the ultimate responsibility for ensuring that IFN acts in the best interests of its beneficiaries and any people who come into contact with IFN. The Trustees must have oversight of IFN's safeguarding and risk management policies and procedures and should oversee IFN's handling of safeguarding reports. The Trustees also have responsibility for deciding whether any serious incident reports need to be made to the Charity Commission in relation to safeguarding incidents in accordance with paragraph 12 of the safeguarding procedures. The Trustees shall appoint one of their number to act as Safeguarding Trustee. The role of the Safeguarding Trustee will be to act as the first point of contact on the board for the Designated Safeguarding Lead, but the appointment of a Safeguarding Trustee will not detract from the fact that all of the Trustees share collective responsibility for safeguarding within IFN.
- 10.3 IFN shall ensure that it has a Designated Safeguarding Lead (DSL) – normally a member of staff - to deal with all instances involving safeguarding that arise within IFN.
- 10.4 The DSL will respond to all child and vulnerable adult protection concerns and enquiries, following the procedure set out in the appendix to this document. They shall make any necessary reports to statutory agencies and will keep records of any action taken in response to safeguarding concerns.
- 10.5 The DSL is responsible for ensuring that IFN's policy reflects changes to legislation and is kept up to date in relation to best practice when the policy is reviewed.
- 10.6 The DSL is responsible for ensuring that trustees, members of staff and volunteers have appropriate training in the application of the policy on an annual basis and will review the position annually.
- 10.7 The DSL shall monitor the overall trend of any safeguarding concerns and report annually (or more frequently, as appropriate) to the trustees. While all the trustees have a collective responsibility for safeguarding, the Safeguarding Trustee will usually be the first point of contact on the board for the DSL.
- 10.8 In the absence of the DSL the Executive Director will deal with instances involving safeguarding, in the first instance, following the procedure set out in the Appendix as set out

⁵ <https://knowhow.ncvo.org.uk/safeguarding/steps-to-a-safer-organisation/understanding-the-risks/understanding-the-risks#section-1>

in Annex A. If the Executive Director is the DSL or acting DSL, another senior member of staff will be designated to cover in their absence.

10.9 The contact details for the DSL, Executive Director and Safeguarding Trustee are set out in paragraph 13 of the Procedures.

11. **Other relevant policies**

11.1 The following of IFN's policies are also of relevance to the ways in which IFN embeds an organisational culture in which beneficiaries, staff and anyone else who comes into contact with IFN are kept safe:

11.1.1 Anti-bullying and Harassment Policy;

11.1.2 the Risk Register;

11.1.3 Social Media Policy;

11.1.4 Disciplinary Procedures;

11.1.5 Complaints Policy.

12. **Review of policy**

This policy and procedure will be reviewed annually, giving due consideration to legislative changes, or more frequently if necessary to reflect learnings which emerge following incidents which are dealt with under this policy. A report on the position, and any newly required material, will be prepared by the DSL.

February 2021

Procedure**1. Prevention****Safeguarding at IFN premises**

- 1.1 IFN will seek to minimise the opportunity for abuse at its premises and venues at which it holds events.
- 1.2 For example, if IFN is aware that a child or a person who may be a vulnerable adult will be visiting the Office, the DSL and/or Executive Director shall be made aware of this and an assessment of need shall be done. If the DSL and/or Executive Director are/is not content such a visit shall not take place. If for any reason it is deemed such a visit is not practicable then the parties involved shall be informed and a way forward discussed.
- 1.3 Where a child is met at the IFN office or elsewhere this should be in the company of their parent or guardian. If IFN is aware that an adult whom it has reason to believe is a vulnerable adult will be met at the IFN office, the DSL will consider whether IFN should suggest that the adult is accompanied by another appropriate adult (for example, a relative, friend or social worker) and wherever possible, they should be met in a public area at the IFN office where at least two IFN representatives are present.
- 1.4 Where IFN is occupying a suite of rooms – for example to run an event:
- Before the event takes place the DSL, or another appointed member of staff, shall make an assessment of the spaces available to identify potential safeguarding issues and how best to manage these.
 - A register of the meeting and registers of workshops shall be kept. If a person is missing from the whole group or a workshop the DSL or other designated member of staff shall be informed at the first opportunity and action taken to ensure that the person is safe.
 - The DSL or appointed member of staff shall periodically walk around the premises to ensure that all spaces are safe.
- 1.5 If it becomes known to IFN staff that a person or persons attending an event may pose a possible safeguarding risk, the DSL must be informed and a risk assessment will take place in relation to the individual's attendance at the event. If it is concluded that the individual should be allowed to attend the event, suitable steps shall be taken and boundaries shall be imposed to safeguard other attendees depending on the situation. Wherever possible, advice will be sought from safeguarding experts, for example from the local safeguarding board, before an individual who has been convicted as having harmed children or vulnerable adults is permitted to attend an event at which children or vulnerable adults are expected to be present.

Safeguarding in online settings

- 1.6 IFN uses a wide variety of digital media to help it carry out its work. This includes platforms like Zoom which enable two or more people to communicate with one another in real time

using audio and/or video ('online meetings'); social media platforms; its websites; email; and occasionally instant messaging apps.

Online meetings

- 1.7 IFN uses platforms such as Zoom in some situations in order to be able to work with others and link member and non-member bodies. In such contexts the safeguarding principles set out in this policy apply. This section of the policy relates specifically to online communication which enables multiple persons to communicate see/hear one another in real time.
- 1.8 Types of online abuse include, for example: sharing inappropriate content, whether publicly or privately; online bullying and intimidation; and collecting data so that someone can be contacted outside of the meeting and subsequently groomed.
- 1.9 The following protective processes shall be followed:
- All meetings shall have unique meeting codes and passwords that are shared with participants and no other party; codes will be sent out no more than one day before such a meeting.
 - Participants' contact details will not be shared without consent, as set out in the Data Protection Policy.
 - The Chat facility for private personal chat options shall be disabled in a situation where there are children or young people participating or an adult where there is a known vulnerability.
 - Screen sharing shall not be allowed unless pre-arranged.
 - The meeting host shall disconnect immediately any person who starts to behave in ways that they deem abusive or likely to be experienced as abusive.
 - If behaviour that appears to be abusive is evident this shall be reported following the procedures set out in this policy, whether this relates to persons on the call or something that happens within sight of participants on the call.
 - When using Zoom for meetings, participants may need to be reminded that if their children appear online this is their responsibility.
 - If children or vulnerable adults will attend the online meeting, where possible, at least two adult employees of IFN shall be present in the online meeting.

Remote working

- 1.10 IFN's trustees, staff and volunteers sometimes work from home using remote working. IFN recognises that people can be at risk of harm in their own homes, for example, through domestic violence and encourages all IFN representatives to be aware of this risk and to report any concerns about the wellbeing of their colleagues/fellow volunteers whilst remote working to the DSL. IFN will arrange for some IFN representatives to receive training on how to recognise potential indicators of abuse whilst home working.

Social media

- 1.11 Social media is primarily used by IFN to share information with the public as a form of broadcast media. While IFN does sometimes like/share/retweet posts from other bodies, its Social Media Policy and Statement of Use is clear that it ought not usually be used in a conversational manner or for personal interaction.
- 1.12 Sometimes, however, it is necessary to contact people/organisations through social media where no other method of contact exists. Usually, Direct Message/Messenger is used for this purpose, which is not public. Where this is the case, the same principles set out for email below should be followed, including where IFN may receive a message which raises concern or contains allegations of abuse.

Instant messaging

- 1.13 IFN does not have its own dedicated instant messaging accounts (e.g. on WhatsApp), however many of the platforms it uses include an instant messaging function, such as Zoom, Skype, Facebook, Twitter, Instagram, Google Mail etc. and IFN staff members may have their own instant messaging accounts.
- 1.14 By the open nature of some of these platforms, it is not always possible to determine the identity – including the age – of those who one interacts with. As a rule, IFN staff, trustees and volunteers should only use the IFN accounts to interact with known persons, and not use them to interact with children or vulnerable adults. They should also not use their personal accounts to interact with any children or vulnerable adults whom they have come into contact with through their work for IFN.
- 1.15 If anyone – including a child or vulnerable adult – makes contact with an IFN staff member, Trustee or volunteer using Instant Messaging and a message raises concern or contains allegations of abuse, the same principles shall be followed as set out for email below.

Email

- 1.16 IFN uses email regularly as part of its work, and this may include corresponding with children or vulnerable adults.
- 1.17 Where a representative of IFN is in email correspondence with a child as part of their work with IFN, he/she should, where possible, copy the email address of the adult through whom the child got involved in the IFN project (for example, their parent or teacher) into their email correspondence with the child. Where a representative of IFN is in email correspondence with a vulnerable adult who was introduced to IFN through their social worker or other similar professional, IFN should discuss with the relevant professional whether it would be appropriate to keep them copied in correspondence.
- 1.18 Where IFN receives an email which raises concern or contains allegations of abuse, this shall be reported as set out in paragraph 3 below (note that copying in the email address above does not constitute reporting the incident).
- 1.19 If there is a complaint that someone has contacted a child or vulnerable adult through any medium and is alleged to have been abusive or sought to engage them in inappropriate behaviours this shall be reported as set out in paragraph 3 below.

Recruitment

- 1.20 Safer recruitment practices shall be followed to ensure that:
- (a) applicants have two referees who are not family members;
 - (b) gaps in employment history are explained;
 - (c) candidates are interviewed and attitudes towards safeguarding are discussed during the interview; and
 - (d) there is the opportunity for candidates to disclose confidentially any unspent criminal convictions or child protection investigations or disciplinary procedures they have on their record.

DBS and other checks

- 1.21 Where IFN members of staff lead on projects that are designed to involve children or vulnerable adults or for another reason are likely to work directly with children or vulnerable adults in their IFN role they must obtain a Basic DBS Check (or the highest level of DBS check available if a role is eligible for a standard or enhanced DBS check or an enhanced DBS check with a check of the barred list). Where trustees and/or volunteers are involved in such projects and there is likely to be regular, sustained or unsupervised contact they must obtain a Basic DBS Check (or the highest level of DBS check available if a role is eligible for a standard or enhanced DBS check or an enhanced DBS check with a check of the barred list).
- 1.22 Where an IFN trustee, member of staff or volunteer has an existing DBS certificate for another organisation, enhanced or otherwise, a judgement shall be made by the DSL as to whether an additional check is required; e.g. if a certificate was obtained for working with children and the project is with vulnerable adults, or vice versa, a check would normally be made. When considering whether to rely on a previous DBS check, IFN will consider the extent to which the individual will work directly with children and vulnerable adults and the length of time which has elapsed since the certificate was issued. Where the individual has signed up to the DBS Update Services, IFN will check to see whether anything has changed since the certificate was issued.

2. Working with partner organisations

- 2.1 Where IFN carries out projects that are designed to involve children or vulnerable adults or are otherwise likely to involve direct work with children or vulnerable adults in partnership with other organisations:
- 2.1.1 IFN expects that the partner organisation will have in place appropriate safeguarding policies and procedures and this will be a condition in the written partnership agreement;
 - 2.1.2 IFN will require any staff, volunteers, trustees or directors from the partner organisation who are likely to have regular, sustained and unsupervised contact with children or vulnerable adults as part of a joint project with the IFN to have the highest level of DBS Check available for the role.

- 2.1.3 The written 'partnership agreement' or equivalent must also include a process for how safeguarding matters which may arise on the joint project will be coordinated/dealt with by IFN and the partner organisation.
- 2.1.4 IFN will ensure that each partner organisation has appointed a representative who will be responsible for promptly reporting to IFN's DSL any safeguarding concerns that arise in the context of the partnership.
- 2.2 When a partner organisation reports a safeguarding incident, the matter will be referred to the DSL. If necessary, further information will be sought about the incident, for example the partner organisation may be asked to clarify various details. The DSL will monitor the situation, keeping in touch with the partner organisation and will keep a record of the action taken by both IFN and the partner organisation to resolve the situation. Depending on the nature of the incident, it may be reported to the trustees and/or Charity Commission. The next steps will depend upon the nature of the incident and the partner organisation's response to it, but they may include suspending the partnership agreement immediately until more information is provided.
- 2.3 These provisions relating to partnership organisations will apply equally to all partners irrespective of whether or not the partner is also a member body.

3. **Procedure in the event of a disclosure of possible abuse**

- 3.1 Safeguarding concerns include any behaviour or action which is or is likely to have a detrimental impact on the physical or emotional well-being of any individual associated with the work of IFN. Although this includes the traditional categories of abuse (physical abuse, sexual abuse, emotional abuse, neglect, financial abuse) it also includes other harmful behaviours that may not meet the threshold of abuse but may have a detrimental impact on another individual's well-being which are set out in the Social Care Institute for Excellence's document on "Types and indicators of abuse" which is appended to these procedures.
- 3.2 All complaints, allegations or suspicions must be taken seriously and investigated.

Where the complaint, allegation or suspicion is disclosed to a member of staff who is not the DSL, the incident shall be reported to the DSL as soon as practicable. The individual who hears the initial allegation should follow the process below.

Listening to a disclosure

- 3.3 The procedure set out in paragraphs 3.5 to 3.7 (below) must always be followed when an allegation is made that a child or vulnerable adult has been abused or that there is a suspicion that a child or vulnerable adult may have been abused.
- 3.4 It is very important to remember that the person who first encounters a case of alleged abuse is not responsible for deciding whether abuse has occurred. This is a task for the professional child or adult protection agencies, following a referral from the DSL.
- 3.5 When responding to an individual making allegation disclosure of abuse:
- Make sure the individual or individuals are safe in the moment.
 - Call the emergency services if the individual is at immediate risk of harm.

- Listen carefully and calmly, offering support and reassurance but without agreeing or disagreeing with what the individual is saying. You can reassure the individual that to tell is the right thing to do.
- You might ask some minimal clarifying questions to make sure you understand properly the basic facts but you must not ask leading questions or seek to carry out your own investigation.
- Explain to the individual that you will pass on what they have told them to the DSL who will be best able to support them.
- Explain the boundaries of confidentiality – never agree to keep a secret and find an early opportunity to explain that you will need to share the information with the DSL.
- As soon as possible record in writing what was said using the individual's own words whenever possible. If appropriate in the circumstances (having regard to the individual's age, capacity and mental state), you might make some written notes during the disclosure and ask the individual to confirm they are accurate but this may not always be appropriate or possible in practice, in which case the most important thing is to make a written record as soon as practicable after the disclosure.
- Ensure dates, times and persons present at the time of the disclosure are accurately recorded.
- Report the disclosure to the DSL as soon as possible.

However,

- Do not consult with persons not directly involved with the situation other than the DSL or in their absence the Executive Director.
- Do not disturb or destroy possible forensic evidence.
- Do not confront the alleged abuser or inform them of the allegation.
- Do not be judgmental or voice your own opinion.
- Do not be dismissive of the concern or ignore the allegation.
- Do not investigate or interview beyond what is necessary to establish the basic facts.
- Do not ask leading questions or assume information (that can prejudice investigation and any court proceedings).
- Do not promise confidentiality (which may conflict with the need to ensure the safety and welfare of the child or vulnerable adult).
- Do not promise particular actions will be taken.
- Do not elaborate or speculate in your notes beyond the information given.

- 12.2 If there is a serious or immediate safeguarding concern which places a child or vulnerable adult at risk, anyone can make a referral to the police or other relevant statutory agency to prevent harm.

Recording the disclosure

- 3.6 The person who heard the initial disclosure should make a full record shall as soon as possible of the nature of the allegation and any other relevant information including using the 'Initial Cause for Concern Form', Annex B.

- 3.7 Members of staff, volunteers or trustees should not include in their report their own thoughts or feelings in relation to the disclosure. Whenever possible, the record should use the words of the individual who made the disclosure.

- 3.8 The report should include:

- the date and time that the allegation was received;
- the name of the member of staff and the names of others present, including the name of the individual who made the disclosure and, where different, the name of the child or adult whom it is believed may have been abused;
- the nature of the alleged abuse or harm;
- the date, the time and the place(s) where the alleged abuse or harm happened;
- a description of any injuries observed where the alleged abuse is physical; and
- the account which has been given of the alleged abuse.

4. Other safeguarding concerns

- 4.1 All IFN representatives should be conscious of the fact that safeguarding concerns will not only arise following disclosures. If an IFN representative has reason to be concerned about any child or vulnerable adult involved in an IFN project then this should be referred to the DSL as a safeguarding concern in the same way as a disclosure using the Initial Cause for Concern form at Annex B. Any IFN representatives who are likely to have direct contact with children or vulnerable adults as a result of their role should receive training on how to spot potential signs of abuse in order to help them identify any safeguarding concerns.

5. Next steps to be taken by the DSL

- 5.1 On notification of a safeguarding incident, the DSL shall consider the circumstances and decide whether further information gathering is required or what other action to take. The DSL will ensure that all concerns are properly recorded and records kept securely and confidentially in accordance with IFN's Data Protection Policy. The DSL shall liaise with statutory safeguarding bodies as required.

- 5.2 Where a disclosure has been made, the DSL should explain their role to the child or vulnerable adult and, where appropriate, let them know what action they will have to take in response to the disclosure.

- 5.3 The DSL should assure the child or vulnerable adult that they will keep them informed of any action to be taken and why. The child's or vulnerable adult's involvement in the process of

sharing information should be fully considered and their wishes and feelings taken into account.

- 5.4 The DSL shall take steps to ensure that the individual who made the disclosure has access to appropriate ongoing support. They should also offer support to the IFN representative who heard the initial disclosure.

6. Where members of staff, volunteers or trustees have concerns about another member of staff, volunteer or trustee

There may be times when a member of staff, volunteer or trustee has a concern about the behaviour of another member of staff, volunteer or trustee regarding a child or vulnerable adult. This might, for example, occur when contact is kept with the child or vulnerable adult longer than expected after an event or involves an exchange of personal details. In such cases the issue should be raised with the Designated Safeguarding Lead (DSL) or the Executive Director if it refers to the DSL.

7. Responding to a disclosure relating to abuse allegedly perpetrated by an IFN representative

- 7.1 Any suspicion of or disclosure about abuse allegedly perpetrated by an IFN representative received by trustees, staff, volunteers or others working on behalf of IFN must be reported to the DSL on the same working day where possible and not later than the next working day. In the absence of the DSL, or if the report is about the DSL, the report shall be made to the Executive Director. They may, if necessary, be contacted out of hours or during Annual leave periods or TOIL.

- 7.2 In responding to a disclosure about abuse allegedly perpetrated by an IFN representative, the IFN will take robust steps to respond to the disclosure. IFN will report the disclosure to the police or other statutory authority, as appropriate. Where this is the case, a written record of the date and time of the report shall be made. The telephone report must be confirmed in writing to the relevant local authority Social Services department within 24 hours. The individual who is the subject of the disclosure will also be subject to internal disciplinary action in accordance with IFN's Disciplinary Policy.

8. Confidentiality

- 8.1 Safeguarding children and vulnerable adults raise issues of confidentiality which should be clearly understood by all. Disclosures may only be reported to the Designated Safeguarding Lead or, if it is about the DSL, or if the DSL is not available, to the Executive Director.

- 8.2 Trustees, staff, and volunteers have a responsibility to share relevant information about the protection of children and vulnerable adults with other professionals exploring alleged abuse.

- 8.3 Trustees, staff and volunteers are bound by data protection legislation. All personal information regarding a child or vulnerable adult will be kept confidential except when it is suspected that a child under 18 years is the victim of abuse. In the latter case, such information will only be shared with the appropriate statutory bodies.

- 8.4 However, confidentiality will never be a barrier to good safeguarding practice. If a child or vulnerable adult confides in a member of staff, volunteer or trustee and requests that the information is kept secret, it is important that person tells the child or vulnerable adult sensitively that he or she has a responsibility to refer cases of alleged abuse to the DSL for

the child's or vulnerable adult's own sake. Within that context, the child or vulnerable adult should be assured that the matter will be disclosed only to people who need to know about it.

- 8.5 Where possible, consent should be obtained from the child or vulnerable adult before sharing personal information with third parties. In some circumstances obtaining consent may be neither possible nor desirable as the safety and welfare of the child or vulnerable adult is the priority.
- 8.6 Safeguarding issues are highly sensitive and staff who receive information about children, vulnerable adults or their families in the course of their work should share that information only within appropriate professional contexts.
- 8.7 Wherever possible, confidential information will not be passed to statutory agencies without the consent of the owner. There may be times, however, when disclosing confidential information without consent is necessary to safeguard a child or vulnerable adult or because the information suggests that there is a risk to others. If this is the case, information will be passed to the appropriate statutory agency by the DSL, making it clear that consent has not been sought and why, or that consent has been refused. The reasons for the disclosure without consent must be recorded and stored securely by the DSL.
- 8.8 When dealing with a safeguarding incident which relates to a vulnerable adult (rather than a child) the DSL should be conscious of the need to take into account the adult's views and wishes when making decisions about how to support them. The legal circumstances in which information about an adult can be shared without their consent are narrower than in relation to children. If a vulnerable adult refuses to consent to the DSL sharing their information (for example, by making a referral to Adult Social Services) in circumstances where the DSL considers that this would be appropriate, the DSL should consider taking advice on the situation, for example, legal advice or contacting the local authority to explain the situation on a no names basis.

9. **Retention of records**

The DSL shall keep secure all paper work from safeguarding cases, for a period of five years. After such time they will be securely disposed of. Where the DSL changes, the newly designated DSL shall be briefed on any materials held and any ongoing actions.

10. **Notification of the Board**

The Board shall be informed at its next meeting that a safeguarding incident has been reported. This notification shall only be in general terms and confidential information should not be disclosed.

11. **Escalating concerns**

If a staff member or volunteer has a safeguarding concern and considers that it has not been appropriately addressed by IFN following a report to the DSL, (and that the child, young person or vulnerable adult has not been protected) the staff member or volunteer should escalate the matter to the Executive Director. In an extreme case, if you feel that your concern has not been responded to effectively, you should contact the safeguarding Co-Chair of IFN ("**the Safeguarding Trustee**"). If you are dissatisfied with IFN's response to your concern, you may raise this with the Charity Commission in accordance with its guidance on reporting

serious wrongdoing at a charity as a worker or volunteer⁶. If you continue to have concerns about the safety of a child or vulnerable adult you should contact the police or your local authority safeguarding board.

12. **Serious Incident Reporting**

12.1 IFN is required to consider making a Serious Incident Report (SIR) to the Charity Commission if a safeguarding incident occurs in which a beneficiary is placed in harm as a result of their contact with IFN.⁷ The responsibility for deciding whether it is necessary to make a SIR rests with the trustees, and the trustees should be given sufficient information about any safeguarding incident to allow them to take this decision.

12.2 IFN is also required to consider making a Serious Incident Report to the Charity Commission with regards to a safeguarding incident relating to its partner organisations if the incident involves IFN's funds, brands or people or if the incident could otherwise have a significant impact on IFN (including on its reputation).⁸

13. **Contacts**

The Designated Safeguarding Lead is:

Name:	Dr David Hampshire
Tel:	020 7730 0410
Email:	david.hampshire@interfaith.org.uk

If the Designated Safeguarding Lead is unavailable for any reason or the DSL is implicated in the concern then the concern must be reported to the Executive Director.

The Executive Director is:

Name:	Dr Harriet Crabtree
Tel:	020 7730 0410
Email:	harriet.crabtree@interfaith.org.uk

If both the DSL and the Executive Director are either unavailable for any reason or implicated in the concern then the concern must be reported to the Safeguarding Trustee. Details are available from the IFN office.

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⁶ <https://www.gov.uk/guidance/report-serious-wrongdoing-at-a-charity-as-a-worker-or-volunteer>

⁷ Link to the Charity Commission's SIR guidance: <https://www.gov.uk/guidance/how-to-report-a-serious-incident-in-your-charity>

⁸ Link to the Charity Commission's guidance on reporting a serious incident in your charity when it involves a partner: <https://www.gov.uk/guidance/reporting-a-serious-incident-in-your-charity-when-it-involves-a-partner>

The role of key agencies in protecting children and vulnerable adults

1. The role of key agencies in protecting children

Local Authorities

- 1.1 The Children's Act 1989 gives Local Authority Social Services the primary responsibility for the care and protection of abused children and children at risk of abuse. It is their statutory duty to ensure that there is an investigation in cases of suspected abuse or significant harm and to take action to protect the child and to promote the welfare of the child.
- 1.2 Social Services also convene Child Protection conferences and manage the Child Protection Register.
- 1.3 In all Local Authority areas there are Local Safeguarding Children Partnerships (LSCB) and Multi Agency Referral Units (marus) that ensure statutory agencies work together to protect and safeguard children.

Police

- 1.4 The concern of the Police in child protection is the welfare of the child. Their general duties are to investigate crimes; prevent offences being committed; and protect those at risk of harm. The Children's Act 1989 permits the Police to take a child into police protection where there is reasonable cause to believe that he/she would otherwise be at risk of significant harm.
- 1.5 Police and Social Services will work together where it is likely that criminal proceedings will be brought against the perpetrator of the abuse.

NSPCC

- 1.6 The NSPCC pursues its objective of identifying and preventing child abuse through consultation and cooperation with Social Services. It is identified as an 'authorised person' under the Children Act 1989.
- 1.7 The NSPCC runs a national Child Protection Helpline. This can be used to report suspected abuse of a child. The NSPCC officers are then required to respond to that.

2. The role of key agencies in protecting vulnerable adults

Local Authorities

- 2.1 All local authorities have a Safeguarding Adults Board, which oversees multi-agency work aimed at protecting and safeguarding vulnerable adults.
- 2.2 The Department of Health and Social Care's 'Care and Support Statutory Guidance' document requires that local authorities develop a local framework within which all responsible agencies work together to ensure a coherent policy for the protection of vulnerable adults at risk of abuse.

The Police

As in child protection, the Police have an important role in Safeguarding Adults where cases involve alleged criminal acts. It is the responsibility of the police to investigate allegations of crime by preserving and gathering evidence. Where a crime is identified, the police will be the lead agency and they will direct investigations in line with legal and other procedural protocols.

THE INTER FAITH NETWORK FOR THE UK

Safeguarding expression of concern form

Should you have any suspicions or concerns relating to Child Protection you can contact the Designated Safeguarding Lead, Dr David Hampshire on 020 7730 0410 or at david.hampshire@interfaith.org.uk or write to him at 2 Grosvenor Gardens, London SW1W 0DH, marking the envelope or e-mail: Strictly Confidential.

If the concern relates to the Designated Safeguarding Lead, the Executive Director should be contacted by writing to 2 Grosvenor Gardens, London SW1W 0DH or at harriet.crabtree@interfaith.org.uk, marking the item Strictly Confidential.

This Safeguarding Expression of Concern Form must be completed when there is cause for concern and given to IFN's Designated Safeguarding Lead on the same or following day as an alleged incident of abuse or a concern about possible abuse.

Details of person who it is believed/alleged may have been abused:	
Person's Name:	[]
Person's Date of Birth:	[]
Details of person reporting concerns:	
Person's Name:	[]
Post:	[]

Do these concerns relate to a specific incident/disclosure?

If YES complete Section A; If NO, omit section A and move straight to Section B

Section A	
Date and time of incident/disclosure:	[]
Location of incident/disclosure:	[]
Date this form was completed:	[]
Other persons present:	[]

Section B

Details of concern/disclosure/incident:

(What was said, observed, reported?)

[]

Action taken:

(What did you do following the incident/disclosure/concern?)

[]

Any other relevant information:

[]

Signed:

Dated:

For completion by the Designated Safeguarding Lead (DSL):

DSL Response:

[]

Action taken by DSL

[]

Rationale for decision making/actions taken:

[]

Outcome of action taken by DSL:

[]

Follow-up action by DSL:

[]

Feedback given to person reporting the concerns:

[]

Signed by DSL:
(Full Name)

Date:

Checklist for DSL:

- Concern described in sufficient detail?
- Distinguished between fact, opinion and hearsay?
- Person's own words used? (Swear words, insults or intimate vocabulary should be written down verbatim)
- Jargon free?
- Free from discrimination/stereotyping or assumptions?
- Concern recorded and passed to DSL in a timely manner?

[Tick boxes to be added]

February 2021



Types and indicators of abuse

Different forms of abuse and the signs

Evidence of any one indicator from the following lists should not be taken on its own as proof that abuse is occurring. However, it should alert practitioners to make further assessments and to consider other associated factors. The lists of possible indicators and examples of behaviour are not exhaustive and people may be subject to a number of abuse types at the same time.

The [Care and support statutory guidance](#) identifies the following ten types of abuse.

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)

Signs 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.

Signs 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

Domestic violence and abuse includes any incident or pattern of incidents 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. 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.

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 that the person lacks the capacity to consent to
- Inappropriate looking, sexual teasing or innuendo or sexual harassment
- Sexual photography or forced use of pornography or witnessing of sexual acts
- Indecent exposure

Signs 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

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

Signs 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 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, deputy, appointeeship or other legal authority
- Rogue trading – e.g. unnecessary or overpriced property repairs and failure to carry out agreed repairs or poor workmanship

Signs 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

- 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 be able to

Signs 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

- 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

Signs 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

- 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

Signs 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 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

Signs 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

- 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

Signs 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



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