

INSPIRED SUPPORT

Safeguarding Policy



INSPIRED SUPPORT

Effective from:	September 2022	Review Date:	September 2025
Approved by:	G. R. Lamb	Designation:	Director

Inspired Support's Autism Consultant and Deputy Safeguarding Lead receives email updates from Skills for Care, 39 Essex Chambers and the Social Care Institute for Excellence and will update this policy as needed prior to the review date.

Safeguarding Vulnerable Adults Policy

Contents	Page Number
Purpose and aim of the policy	2
1. Context	2-3
2. Key principles of adult safeguarding	3-4
3. Legal framework	4-6
4. The role of staff and volunteers	6
5. Training and Development	7
6. Definition of abuse	7
7. Duty of care	7
8. Whistleblowing	7-8
9. Principles in information sharing	8-10
10. Record keeping and GDPR	10-11
11. Roles and responsibilities	11-15
12. The role of key individual agencies	15
13. Complaints procedure	16
14. Holidays, trips and activities	16
15. Health and safety	16
16. Behaviour	16
17. Medication	16
18. Equality, Diversity and Inclusion	16
Appendix 1 – Table of contents	17
Appendix 1 – Definition of abuse and neglect	18-29
Appendix 2 – Safeguarding internal alert (whistle blowing) notification	30
Appendix 3 – Safeguarding internal alert (whistle blowing) discussion record	31
Appendix 4 – Safeguarding report	32-33
Appendix 5 – Local Safeguarding Authority contact details	34
Appendix 6 – Internal Procedure for Safeguarding	35

Purpose and aim of the policy

Inspired Support is committed to safeguarding and promoting the welfare of children, young people and vulnerable adults, engaged in the breadth of its activities.

The safeguarding policy aims to provide clear direction about expected understanding of, dealing with and responding to safeguarding issues.

The policy also aims to make explicit Inspired Support's commitment to the maintenance and development of good practice and sound procedures. The purpose of the policy is, therefore, to ensure that safeguarding concerns and referrals are handled sensitively, professionally and in ways that appropriately support the particular needs of an individual's wellbeing.

The safeguarding of the people in our care is the single most important aspect of our work.

Inspired Support fully recognises the contribution it can and should make to safeguard and support people in its care.

There are three key elements to our safeguarding policy:

All adults have the right to be safe from harm and should be able to live free from fear of abuse, neglect and exploitation.

1. **Prevention** (enhanced DBS which is renewed every three years, small working ratios, positive atmosphere, careful and vigilant working, support to people, providing good role models, individual risk assessments where appropriate, specific risk assessments for high risk activities).
2. **Protection** (mandatory training at the point of induction, evidence of self employed workers insurance, following agreed policies and procedures, ensuring staff are trained and supported to respond appropriately and sensitively to safeguarding concerns).
3. **Support** (people and staff who may have been abused).

This policy will be reviewed every 3 years or if there are any significant changes to legislation or good practice guidelines.

This policy links into Inspired Support's other relevant policies, procedures and processes (e.g. self-employed workers policy, positive and proactive support, medication policy and referral process) and relevant legislation. In the event of a safeguarding concern, Inspired Support will follow the processes detailed in the relevant local authority's safeguarding adults policy.

1. Context

For the purpose of this document ‘adult’ means a person aged 18 years or over.

Some adults are less able to protect themselves than others, and some have difficulty making their wishes and feelings known. This may make them vulnerable to abuse. The broad definition of a ‘vulnerable adult’ referred to in the 1997 Consultation Paper ‘Who decides?’ issued by the Lord Chancellor’s Department, is a person:

“Who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation”.

The first priority should always be to ensure the safety and protection of vulnerable adults. To this end it is the responsibility of all staff to act on any suspicion or evidence of abuse or neglect (see the Public Interest Disclosure Act 1998) and to pass on their concerns to a responsible person/agency.

For purposes of ensuring consistent and widely understood terminology, these policy and procedures will use the phrase ‘Vulnerable Adults’ to identify those eligible for interventions within the procedures.

2. Key Principles of Adult Safeguarding

The Care Act 2014 sets out six key principles of adult safeguarding: empowerment, prevention, proportionality, protection, partnership and accountability. Inspired Support recognises each and all of these principles in all of the work that we do. We believe in the principles of “making safeguarding personal” in that safeguarding should always be about the individual: it must be person led, focused on real outcomes and should always endeavour to empower people to make their own choices.

The guidance broadly describes the real life meaning of these six principles as follows:

Principle	How the principle may sound in practice
Empowerment – People being supported and encouraged to make their own decisions with informed consent.	“I am asked what I want the outcomes to be 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 – The least intrusive response should be identified and must be appropriate to the risk presented.	“I am sure the professionals will work in my interest and they will only get involved as much as needed”.

Protection – Support and representation for those in greatest need.	“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 – 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 – Being accountable and transparent about safeguarding practices that are used to support people.	“I understand the role of everyone involved in my life and so do they”.

3. Legal framework

Inspired Support provides adult day services in Gateshead and Newcastle, providing services to people from all nearby North East local authority areas. Each local authority has its own safeguarding adults multi-agency procedural framework/interagency policy in place to ensure a consistent approach in responding to allegations of abuse. When allegations of abuse are made or where the risk of abuse is identified, the framework offers guidance to staff about the process which should be followed.

These guidelines are designed to identify the roles and responsibilities of workers/volunteers within this process. The Safeguarding Adults Procedural Framework/ Interagency Policy should be read in conjunction with these guidelines. It outlines relevant pieces of legislation, good practice guidance, definitions and categories of abuse and documentation in relation to Safeguarding Adults.

The legislation below has informed the content of the policy and procedures:

Care Act 2014 and Statutory Guidance issued under the Act

This sets out rules and guidance on all aspects of safeguarding and repeals the No Secrets guidance (2000). The content of the Act informs the major parts of this policy.

Mental Capacity Act 2005 (MCA)

The MCA 2005 was enacted to protect individuals and their freedoms. It empowers individuals to retain freedom of choice and, when choices cannot freely be made, it seeks to make sure that decisions are taken in the individual’s best interests. Any decision taken on behalf of an individual who lacks capacity to make a specific decision must be based on their wishes so far as is possible. Best interest rules must be followed when making decisions for an adult who lacks capacity.

The Act is also a useful guide to interactions with people who may lack capacity. Everyone working with someone who might be considered to be vulnerable must have a working knowledge of the Act. The Act also complements Inspired Support’s other

policies and its ethos. Therefore, it is included here both for information purposes and to note that Inspired Support's staff/volunteers will act within its principles at all times.

Part 1 of the Mental Capacity Act 2005

The Principles outlined in the Mental Capacity Act are:

- A person must assume to have capacity unless it is established that he/she lacks capacity.
- A person is not to be treated as unable to make a decision unless all practicable steps to help him/her make the decision have been taken without success.
- A person is not to be treated as unable to make a decision merely because he/she makes an unwise decision.
- An action taken, or decision made, under this Act for, or on behalf of a person who lacks capacity, must be done, or made, in his/her best interests.
- Before the action is undertaken, or the decision is made, regard must be had to whether the purpose for which it is needed can be as effectively achieved in a way that is less restrictive of the person's rights and freedom of action.

People who lack capacity

- For the purposes of this Act, a person lacks capacity in relation to a matter if, at the material time, they are unable to make a decision for themselves in relation to the matter because of an impairment of, or a disturbance in the functioning of the mind or brain.
- It does not matter whether the impairment or disturbance is permanent or temporary.
- A lack of capacity cannot be established merely by reference to –
 - A person's age or appearance, or
 - A condition of theirs, or an aspect of their behaviour, which might lead others to make unjustified assumptions about their capacity.

The Act also introduced Independent Mental Capacity Advocates who can be appointed if circumstances warrant an independent voice for someone considered to lack capacity.

Deprivation of Liberty Safeguards, Code of Practice 2008

This sets out key provisions for the protection of those in some residential settings and hospitals who are deemed not to have capacity. It is a set of safeguards which ensure individuals are not unnecessarily deprived of their freedoms. Should a situation arise where a deprivation of liberty is required, such as to fulfil medical treatment, it must usually be authorised by the Local Deprivation of Liberty Team or, ultimately, the Court of Protection.

Safeguarding Vulnerable Groups Act 2006

The purpose of this Act is to prevent harm from occurring to adults at risk by preventing those who may cause harm from being employed or volunteering in roles where they are in contact with them. The Act introduced the Criminal Records Bureau check (CRB), which was replaced by the Disclosure and Barring Service (DBS) in 2012. The DBS undertakes basic, standard and enhanced checks in order to ensure that people who work with adults at risk are safe to do so. Basic DBS Checks can be obtained from the gov.uk website and Enhanced Checks can be obtained directly from DBS Check Online.

A DBS check will be sought for everyone who will work with adults in our care, or adults at risk with whom we come into contact through our charity.

The Human Rights Act 1998

This gives legal effect in the UK to the fundamental rights and freedoms contained in the European Convention on Human Rights (ECHR). The Act applies to all public authorities, such as central government departments, local authorities and NHS Trusts, and other bodies performing public functions, such as private companies operating prisons. These organisations must comply with the Act, and an individual's human rights, when providing a service or making decisions that have a decisive impact upon an individual's rights. The Care Act extends the scope of the Human Rights Act. This incorporates registered care providers, both residential and non-residential, providing care and support to an adult, or support to a carer, where the care and support is arranged or funded by the Local Authority, including Direct Payment situations (Local Government Association, 2014). It does not incorporate entirely private arrangements concerning care and support.

Although the Act does not apply to private individuals or companies, except where they are performing public functions, public authorities have a duty to promote the human rights of individuals and this entails a duty to stop people or companies abusing an individual's human rights. For example, a public authority that knows an adult is being abused by their privately funded carer has a duty to protect the adult from inhuman or degrading treatment.

The Human Rights Act covers everyone in the United Kingdom, regardless of citizenship or immigration status. Anyone who is in the UK for any reason is protected by the provisions of the Human Rights Act.

The Public Interest Disclosure Act 1998 (PIDA)

This created a framework for whistleblowing across the private, public and voluntary sectors. The Act provides almost every individual in the workplace with protection from victimisation when they raise genuine concerns about malpractice in accordance with the Act's provisions. All organisations must have a Whistleblowing Policy in place.

Protection of Freedoms Act 2012

This Act brought together the agencies which now undertake DBS checks and issue certificates.

The Equality Act 2010

The principles of the Equality Act 2010 underpin this policy: it covers everyone in Britain and protects people from discrimination, harassment and victimisation.

4. The role of workers and volunteers

The directors are accountable for ensuring that Inspired Support has clear and effective policies and procedures in place and that they comply with legislation and good practice guidelines. All workers and volunteers working on behalf of Inspired Support have a duty to promote the welfare and safety of vulnerable adults.

Workers and volunteers may receive disclosures of abuse and observe vulnerable adults who are at risk. This policy will enable workers/volunteers to make informed and confident responses to specific adult protection issues.

5. Training and Development

Inspired Support's Designated Safeguarding Leads receive training relevant to their role. The organisation also ensures that all of its employed and self-employed workers receive mandatory safeguarding training through the induction process and all workers (whether employed or self-employed) will be responsible for completing their training updates as required and Inspired Support's unique and effective approach to informal supervision will enable workers and sub contractors to develop further safeguarding awareness. The directors will keep a record of training and training updates for each worker.

6. Definition of abuse?

"Abuse is a violation of an individual's human and civil rights by any other person or persons" and may result in significant harm to, or exploitation of, the person subjected to the abuse.

It is important to note that:

- Abuse may consist of a single act or repeated acts.
- Abuse can be intentional or unintentional or result from a lack of knowledge
- Abuse can be an act of neglect, an omission or failure to act.
- Abuse can cause harm temporarily or over a period of time.
- Abuse can occur in any relationship.
- Abuse can be perpetrated by anyone, individually or as part of a group or organisation.
- Some forms of abuse are crimes.

Information about forms of abuse can be found in appendix 1.

7. Duty of Care

It is considered part of the 'Duty of Care' that workers are responsible for bringing to the attention of their line manager, suspicions or allegations of abuse of any vulnerable adult in their care. Failure to act could imply a member of staff's agreement to the abuse and Inspired Support has a whistle-blowing policy in place to encourage good practice and deter poor practice and serious malpractice.

8. Whistle-blowing

Whistle-blowing is a process that enables all workers to raise serious concerns and to have these concerns properly addressed. There may be allegations or concerns of abuse which implicate a worker. A worker may have concerns about the conduct or behaviour of a colleague. Despite working closely together or even socialising outside of work, the Duty of Care necessitates the matter being raised, in accordance with the Safeguarding Adults Procedures.

Front-line workers are often the first to see or suspect misconduct, but are often worried about raising concerns. Any concerns that are raised will be taken seriously, and both the alerter and the alleged perpetrator will be protected through the investigative process as far as possible and sensitive information regarding the concern will be shared with other mentors on a strict need to know basis as per principle 4 in information sharing.

It is recognised that whistle-blowing is often seen in a negative light and that this negativity has been perpetuated for many years. Consequently it is difficult for workers to see the positives but this needs to be encouraged. A good starting point is to ensure open, honest and effective communication and where this is the case, workers should begin to feel more confident and positive about coming forward with ideas, thoughts, suggestions and concern.

The Whistle-Blowing Policy which is available to all and is designed to support workers to come forward with their concerns, and relay confidence that they will be supported throughout the process. Appendix 2 and 3 contains examples of an internal alert form and subsequent record of discussion form. All workers need to, therefore, be aware of Inspired Support's Whistle-Blowing Policy.

9. Principles in Information Sharing

When sharing information, Inspired Support acts at all times within all legislative, common law and other related provisions concerning information processing and sharing including, but not limited to, the Data Protection Act 2018 and General Data Protection Regulations. Workers, Trustees and volunteers must be mindful of, and act within, the rules set out in our Data Protection Policy. We also use the Caldicott Principles as a guide to good practice when determining the sharing of information in connection with safeguarding concerns. These principles are as follows:

Principle 1 – Justify the purpose(s) for using confidential information

Every proposed use or transfer of personal confidential data within or from an organisation should be clearly defined, scrutinised and documented. Continuing uses should be regularly reviewed by an appropriate guardian.

Principle 2 – Don't use personal confidential data unless it is absolutely necessary

Personal confidential data items should not be included unless it is essential for the specified purpose(s). The need for individuals to be identified should be considered at each stage of satisfying the purpose(s).

Principle 3 – Use the minimum necessary personal confidential data

Where use of personal confidential data is considered to be essential, the inclusion of each individual item of data should be considered and justified. This is so that the minimum amount of personal confidential data is transferred or accessible as is necessary for a given function to be carried out.

Principle 4 - Access to personal confidential data should be on a strict need-to-know basis

Only those individuals who need access to personal confidential data should have access to it, and they should only have access to the data items that they need to see. This may mean introducing access controls or splitting data flows where one data flow is used for several purposes.

Principle 5 - Everyone with access to personal confidential data should be aware of their responsibilities

Action should be taken to ensure that those handling personal confidential data are made fully aware of their responsibilities and obligations to respect patient confidentiality.

Principle 6 – Understand and Comply with the law

Every use of personal confidential data must be lawful. Every organisation should have someone who handles personal confidential data and is responsible for ensuring that the organisation complies with legal requirements.

Principle 7 - The duty to share information can be as important as the duty to protect customer confidentiality

Health and social care professionals should have the confidence to share information in the best interests of their customers within the framework set out by these principles. They should be supported by the policies of their employers, regulators and professional bodies.

Principle 8 – Inform customers about how their confidential information is used

A range of steps should be taken so that customers can have clear expectations about how and why their confidential information is used, and what choices they have about this. These steps will vary depending on the use: as a minimum, this should include providing accessible, relevant and appropriate information – in some cases, greater engagement will be required.

Inspired Support recognises that safeguarding vulnerable adults raises significant issues in relation to information sharing, especially when trying to balance an adult's right to free choice, including the choice about sharing of information, with the responsibility to keep people safe. Inspired Support recognises that adults who have capacity are free to make certain choices which objectively could be considered as abuse or neglect, and they may object to further sharing of information. However, it is also recognised that there might be circumstances where, despite the choices made by the adult, information can be shared in the context of safeguarding.

If an issue arises where there is a serious conflict between safeguarding an adult and that adult's rights to consent, either to the behaviour or the sharing of information, then the Inspired Support will seek legal advice.

Inspired Support recognises that where:

- There is a real risk of harm,
- There is a risk of harm to the wellbeing and safety of the adult or others,
- Other adults or children could be at risk from the person causing harm,
- It is necessary to prevent crime or if a crime may have been committed, or,
- The person lacks capacity to consent.

The safety of the adult must be considered to be paramount and a report should be made either in an emergency via 999/101 or to the relevant LA Adult Help Desk. Agencies can be asked to deal with the matter in confidence and Inspired Support recognises that the police and local authority adult safeguarding team (MASH) are trained to deal with such disclosures in line with all relevant statutory and common law rules. As set out above, Inspired Support recognises that there are circumstances where adults may disclose that they are being abused or neglected, but they may not want it to be reported. If a volunteer, staff member or Trustee finds themselves in this situation, they should tell the person that they must raise the concern in confidence with the designated safeguarding person soon as possible.

10. Record Keeping and GDPR

All personal information regarding a vulnerable adult, including that which identifies them, will be retained in line with Inspired Support's Record Keeping and GDPR and Data Protection Policy. All written records will be kept in a secure area and system which is access controlled. All records will also be destroyed in line with our records management policy. We will ensure that access is available for those who need to know, but for all others it will remain absolutely confidential. For full information about data protection, please see our data policies and procedures.

Good record keeping is an essential part of the accountability and maintaining proper records is vital to an individual's safety. If records are inaccurate, future decisions may be wrong and harm may be caused to the individual. Where an allegation of abuse is made, all organisations have a responsibility to keep clear and accurate records. It is fundamental to ensure that evidence is protected, and records show what action has been taken, what decisions have been made, and why.

It is equally important to record when actions have not been taken and why. For example, if an adult with care and support needs with mental capacity chooses to make decisions that professionals consider to be unwise.

Inspired Support will ensure that the following key questions are answered, and abided by, when determining what information to record, store and share:

- What information do workers need to know in order to provide a high-quality response to the adult concerned?
- What information do workers need to know in order to keep adults safe under Inspired Support's duty to protect people from harm?
- What information is not necessary?
- What is the basis for any decision to share, or not share, information with a third party?

It is unlawful to disseminate defamatory information in any media including internet sites (see E-Safety policy for further information including specific legislation). All personal

and sensitive information regarding mentors and volunteers will be retained in line with Inspired support's Record Keeping and GDPR and Data Protection Policy, and Inspired Support's Whistle blowing policy.

11. Roles and Responsibilities

It is the legal responsibility and duty of care of every member of staff to respect the rights of individuals and protect them from harm at all times. The ADASS (Association of Directors of Adult Social Services) gives clear guidelines on the thresholds of harm and neglect with each level initiated providing a graduated response according to the perceived level of risk.

Where an allegation arises from suspicions of abuse, the worker who first becomes aware of the allegation, the 'Alerter,' must bring this immediately or as soon as practically possible to the attention of a Designated Safeguarding Lead (directors).

The Designated Safeguarding Lead will ensure that any reported incidents of abuse follow the Local Authorities Safeguarding Adults Procedural Framework/Interagency Policy, and will contact the relevant Local Authority on day 1 in order to ascertain whether the abuse meets criteria. The Designated Safeguarding Lead will respond to the alerter within 24 hours of reporting the abuse.

Designated Safeguarding Leads are:

- Richard Lamb (07825 958024)
- Stu Herring (07531 906026)

In the absence of both of the Designated Safeguarding Leads, the deputy Designated Safeguarding lead should be contacted:

- Mel Winship (07956 327276)

Procedure in the event of a disclosure

A disclosure happens when:

- a. The adult communicates that they have been (or are worried they may be) abused or neglected, or
- b. Any other person reveals that they have seen an incident of abuse or neglect, or found evidence that indicates it may be, or is occurring.

A disclosure can be verbal but can also be written. It can relate to abuse that is happening now, may happen in the future or has happened in the past (historical).

Disclosing can be very traumatic for the adult, and often they will have spent some time thinking about whether or not to tell someone what has happened, is happening or what they are worried about. One of the barriers to disclosing can be the fear that nothing will happen, that they will not be believed or that the abuse will get worse because they have told someone. It is important that all of these potential fears are recognised and allayed by the response to the disclosure.

The first person becoming aware of potential abuse does not have the responsibility to make a judgment about the validity of allegations or the seriousness of such, but must respond to these allegations. If the alerter goes directly to the local authority, their timeframes will be followed. If the alerter makes those allegations known to the Designated Safeguarding Lead, they will contact the local authority on day 1, for their guidance, and respond to the alerter within 24 hours. When presented with an allegation or suspicion of abuse, the alerting member of staff should assess whether anyone is at risk or is in immediate danger then take any reasonable steps within their role to protect any person who may be at immediate risk or harm,

It is important that vulnerable adults are protected from abuse. All complaints, allegations or suspicions must be taken seriously and any concerns should be reported immediately to the designated safeguarding lead verbally in the first instance, and this must then be followed up with a written account of the concern outlining any evidence to support the concern. This procedure must be followed whenever an allegation of abuse is made or when there is a suspicion that a vulnerable adult has been abused, and promises of confidentiality should not be given as this may conflict with the need to ensure the safety and welfare of the individual.

When producing and submitting a written account, an alerter should remember the following:

- Complete a safeguarding report within 24 hours to ensure that detailed information, events or facts are not forgotten (see appendix 4).
- Only include factual information including dates/times. Do not include personal views or feelings or make any personal judgments or assumptions. If it is felt necessary to include personal views, ensure that this is clearly indicated in the account and state the reason(s) why.
- Write down the setting and whether anyone else was present.
- If recounting a disclosure, try to write down exactly what the person said, using their words.
- If writing by hand, ensure that the handwriting is legible.
- If support is needed in writing the account, the Alerter should ask the Designated Safeguarding Lead.
- Sign the account, date and time it.
- Give the written account to the person to whom the concerns need to be reported (do not ask anyone else to do this).
- Be aware that any written account may be required later as part of a legal action.

Written accounts about concerns and disclosures of abuse are strictly confidential. Such information should only be entered into a record book or file which is inaccessible to the perpetrator or to those who do not need or have right to the information. It is the responsibility of the person receiving the written account to file it appropriately and in line with Data Protection, taking into account Inspired Support's confidentiality and filing procedures.

Responding to an allegation

Any suspicion, allegation or incident of abuse must be reported to a member of staff or volunteer as appropriate.

The nominated member of staff/volunteer shall telephone and report the matter to the appropriate local adult social services duty social worker, and the local authority timeframes will be followed. A written record of the date and time of the report shall be made and the report must include the name and position of the person to whom the matter is reported. The telephone report must be confirmed in writing to the relevant local authority adult social services department within 24 hours. (See Appendix 5 for relevant local authority contact details).

Responding appropriately to an allegation of abuse

In the event of an incident or disclosure of abuse, the alerter should:

- Take the disclosure seriously.
- Accept what they are saying.
- Make sure the individual is safe.
- Assess whether emergency services are required and if needed call them.
- Explain areas of confidentiality.
- Remain calm and try not to show shock or disbelief.
- Listen carefully to what is being said and demonstrate that they are actively listening by maintaining eye contact (if possible) and making affirmative gestures such as nodding the head.
- Don't interrupt them.
- Offer support and reassurance that they are doing the right thing in disclosing.
- Ascertain and establish the basic facts.
- Make careful notes and obtain agreement on them.
- Ensure notation of dates, time and persons present are correct and agreed.
- Take all necessary precautions to preserve forensic evidence.
- Explain the procedure to the individual making the allegation and confirm that the information disclosed will be treated seriously.
- Ask them what they want to happen next and reassure them that they will be involved in any decisions.
- Remember the need for ongoing support.

The alerter should not:

- Question their motives for disclosing.
- Interview the person or press the person for details. If there is a need to clarify something that has been said, open ended questions should be asked such as "what did you mean by that?" Care should be taken that words are not put in the person's mouth by asking leading questions such as "when you said that did you mean"?
- Stop someone who is freely recalling significant events.
- Confront the alleged abuser.
- Be judgmental or voice your own opinion.
- Be dismissive of the concern.
- Investigate or interview beyond that which is necessary to establish the basic facts.
- Disturb or destroy possible forensic evidence.
- Consult with persons not directly involved with the situation.

- Ask leading questions.
- Assume Information.
- Make promises including the promise to keep secrets or give unrealistic expectations or guarantees.
- Speculate about the outcome of the safeguarding process.
- Tell anyone that doesn't need to know.
- Ignore the allegation.
- Elaborate in your notes.
- Panic

It is important to remember that the person who first encounters a case of alleged abuse is not responsible for deciding whether abuse has occurred.

Making a record of the disclosure

A written record of the disclosure must be made as a matter of urgency as soon as possible after it is made. Where relevant all records should contain the following information:

- a. The date, time and location the disclosure was made.
- b. Who made the disclosure.
- c. The facts that have been provided.
- d. The evidence that has been seen (including any injuries or witnesses).
- e. The views and wishes of the adult.

If anyone else has additional information about the disclosure or the abuse or neglect that may have taken place, they should make their own record. All records should be legible and signed and dated by the author.

Decision

Once all information and evidence has been gathered and considered, the designated safeguarding lead must make a decision on whether or not to progress to the next stage of notification. In order to make this decision, the designated safeguarding lead must determine whether abuse or the possibility of abuse can or cannot be ruled out. The designated safeguarding lead should seek support and advice if necessary in making this decision.

When it has been determined that the adult is covered under the safeguarding adults procedures and abuse cannot be ruled out, then a decision must be taken to proceed to notification and forwarded to the safeguarding adults team.

When it has been determined that the adult is covered under the safeguarding adults procedures but abuse can be ruled out at this stage, there will be no need to proceed to notification.

12. The role of key individual agencies

Adult Social Services

The Care Act 2014 provides a clear legal framework for how local authorities and other parts of the system should protect adults at risk of abuse or neglect. Each local authority must lead a multi-agency local adult safeguarding system that seeks to prevent abuse and neglect and stop it quickly when it happens. The Care Act requires that each local authority must: make enquiries, or ensure others do so, if it believes an adult is subject to, or at risk of, abuse or neglect, and each local authority will have their own processes for doing so. An enquiry should establish whether any action needs to be taken to stop or prevent abuse or neglect, and if so, by whom.

All local authorities have a Safeguarding Adults Board, which oversees multi-agency work aimed at protecting and safeguarding vulnerable adults. It is normal practice for the board to comprise of people from partner organisations who have the ability to influence decision making and resource allocation within their organisation.

The Police

The Police play a vital role in Safeguarding Adults with cases involving alleged criminal acts. It becomes 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.

13. Complaints Procedure

Inspired Support has a complaints procedure which enables any person to raise concerns or complaints. Complaints are respected by Inspired Support as they can serve to draw practice or standards to our attention so that they can be rectified, modified and improved.

Complaints will be monitored so that we can identify patterns of concern, training needs etc.

14. Holidays, Trips and Activities

Before any trip out with customers, a robust risk assessment must be produced in relation to the specific activity and the individuals and workers involved (see risk assessment policy for further information).

15. Health and Safety

Inspired Support has a Health and Safety Policy which sets out in a separate document the actions taken to ensure that all of our customers and workers occupy safe and well managed premises. The Policy addresses all aspects of health and safety including the storage of toxic substances, Fire Precautions etc. The Health and Safety Policy is reviewed on an annual basis.

16. Behaviour

Inspired Support has a written Positive and Proactive Support Policy which sets out the service's framework for supporting behaviours of concern.

17. Medication

The Medication Policy sets out expectations around the safe storage and administration of drugs. The Policy must be read and understood by all workers involved in the administration of prescribed or non-prescribed drugs (see medication policy for further information).

18. Equality, Diversity and Inclusion

Inspired Support has a written Equality, Diversity and Inclusion policy which contains further information about its duties under the Equality Act 2010.

Appendices

- Appendix 1 – Definition of abuse and neglect
- Appendix 2 – Safeguarding internal alert (whistle blowing) notification
- Appendix 3 – Safeguarding internal alert (whistle blowing) discussion record
- Appendix 4 – Safeguarding report
- Appendix 5 – Local Safeguarding Authority contact details
- Appendix 6 – Internal Procedure for Safeguarding

Appendix 1 – Table of Contents	Page Number
Physical Abuse	18-19
Domestic Abuse	19-20
Sexual Abuse	20
Psychological Abuse	21
Financial or Material Abuse	21-22
Scams	22
Modern Slavery	22-23
Discriminatory Abuse	23-24
Institutional Abuse	24
Neglect and Acts of Omission	24-25
Self Neglect	25
Exploitation	25-26
Sexual Exploitation	26
Criminal Exploitation	26
Organised Crime and County Lines	27

Cuckooing	27
The context of Criminal Exploitation	27-28
Vulnerable groups at risk	28
Signs of Criminal Exploitation	28-29
Signs of Cuckooing	29

Appendix 1

Definitions of Abuse and Neglect

Defining abuse or neglect is complex and depends on many factors. The term “abuse” can be subject to wide interpretation. It may be physical, verbal or psychological, or it may occur where a person is persuaded to enter into a financial or sexual transaction to which they have not consented or cannot consent to.

Incidents of abuse may be one-off or multiple and affect one person or more. Professionals and others should look beyond single incidents or individuals to identify patterns of harm. Repeated instances of poor care may be an indication of more serious problems and of what we describe as organisational abuse. In order to see these patterns, it is important that information is recorded and appropriately shared.

Abuse or neglect may be the result of deliberate intent, negligence or ignorance. Exploitation can be a common theme in the experience of abuse or neglect. Whilst it is acknowledged that abuse or neglect can take different forms, the Care Act guidance identifies the following types of abuse or neglect:

- Physical abuse.
- Domestic violence.
- Sexual abuse.
- Psychological abuse.
- Financial or material abuse.
- Modern slavery.
- Discriminatory abuse.
- Organisational abuse.
- Neglect and acts of omission.
- Self-neglect.

Since the Act came into force in 2015, however, other types of abuse have since been recognised, including criminal and sexual exploitation and cuckooing.

Physical abuse

Physical abuse includes assault, hitting, slapping, pushing, kicking, misuse of medication, being locked in a room, inappropriate sanctions or force-feeding, inappropriate methods of restraint, and unlawfully depriving a person of their liberty.

Possible indicators of physical abuse are:

- Unexplained or inappropriately explained injuries.
- An adult exhibiting untypical self-harm.
- Unexplained cuts or scratches to mouth, lips, gums, eyes or external genitalia.
- Unexplained bruising to the face, torso, arms, back, buttocks, thighs, in various stages of healing.
- Collections of bruises that form regular patterns which correspond to the shape of an object or which appear on several areas of the body.
- Unexplained burns on unlikely areas of the body (e.g. soles of the feet, palms of the hands, back), immersion burns (from scalding in hot water or liquid), rope burns, or burns from an electrical appliance.
- Unexplained or inappropriately explained fractures at various stages of healing to any part of the body.
- Medical problems that go unattended
- Injuries that remain untreated.
- Sudden and unexplained urinary and/or faecal incontinence.
- Evidence of overusing or underusing medication.
- The adult flinches or shy's away from physical contact.
- The adult appears frightened or subdued in the presence of particular people.
- The adult asks not to be hurt.
- The adult may repeat what the person causing harm has said (e.g. 'Shut up or I'll hit you').
- Reluctance to undress or uncover parts of the body.
- The adult wears clothes that cover all parts of their body or specific parts of their body.
- Changes in the adult's behaviour.

Domestic abuse

The Home Office offers the following definition of domestic abuse: "An incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse [...] by someone who is or has been an intimate partner or family member regardless of gender or sexuality. It includes psychological, physical, sexual, financial, emotional abuse, so-called 'honour-based' violence, Female Genital Mutilation and forced marriage. Age range is 16 years old and above."

Coercive and controlling behaviour in intimate and familial relationships was introduced into the Serious Crime Act 2015. The offence will impose a maximum 5 years imprisonment, a fine or both.

Many people think that domestic abuse is restricted to abuse between intimate partners, but it also extends to other family members. Family members are defined as: mother, father, son, daughter, brother, sister and grandparents, whether directly related, in-laws or step-family.

Domestic violence and abuse includes any incident or pattern of incidents of controlling, coercive or threatening behaviour or 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 honour-based violence, female genital mutilation and forced marriage.

Indicators of domestic violence include:

- Evidence of physical or sexual assaults.
- Verbal and psychological abuse and humiliation in front of other people.
- Low self-esteem.
- Belief that the abuse is somehow their fault.
- Fear of others and unwillingness to engage with outside intervention.
- Damage to home or property.
- Isolation, from friends, family and the wider community.
- Not having enough money for daily life because there is limited access to money.
- Missing appointments without notice or explanation.

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

- Physical and sexual assault; including threats, humiliation and intimidation.
- A person being punished.
- Making a person fearful.
- Keeping the adult away from their friends, family and sources of support.
- Limiting access to resources or money.
- Preventing the person from leaving or escaping abuse.
- Regulating everyday behaviour and activities including what they can wear, where they can go, how to behave and who they see.

Sexual abuse

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

It includes penetration of any sort, incest and situations where the person causing harm touches the abused person's body (e.g. breasts, buttocks or genital area), exposes his or her genitals (possibly encouraging the abused person to touch them) or coerces the abused person into participating in or looking at pornographic videos or photographs. Denial of a sexual life to consenting adults is also considered abusive practice.

Any sexual relationship that develops between adults where one is in a position of trust, power or authority in relation to the other (e.g. a day centre worker, social worker, residential worker, health worker etc.) may also constitute sexual abuse.

Possible indicators of sexual abuse are:

- The adult has urinary tract infections, vaginal infections or sexually transmitted diseases that are not otherwise explained.
- The adult appears unusually subdued, withdrawn or has poor concentration.
- The adult exhibits significant changes in sexual behaviour or outlook.

- The adult experiences pain, itching or bleeding in the genital/anal area.
- The adult's underclothing is torn, stained or bloody.
- The adult is fearful of contact.
- The adult's behaviour changes.
- The adult becomes introverted and does not want to talk when otherwise they are quite sociable.
- A woman who lacks the mental capacity to consent to sexual intercourse becomes pregnant.

Psychological abuse

Psychological abuse includes emotional abuse and takes the form of threats of harm or abandonment, deprivation of contact, humiliation, rejection, blaming, controlling, intimidation, coercion, indifference, harassment, verbal abuse, including shouting or swearing, cyber bullying, isolation or withdrawal from services or support networks.

Psychological abuse is the denial of a person's human and civil rights, including choice and opinion, privacy and dignity and being able to follow one's own spiritual and cultural beliefs or sexual orientation.

It includes preventing the adult from using services that would otherwise support them and enhance their lives. It also includes the intentional and/or unintentional withholding of information, such as information not being available in different formats, languages, etc.

Possible indicators of psychological abuse are:

- Untypical ambivalence, deference, passivity, or resignation.
- The adult appears anxious or withdrawn, especially in the presence of the alleged abuser.
- The adult exhibits low self-esteem.
- Untypical changes in behaviour (e.g. continence problems, sleep disturbance).
- The adult is not allowed visitors and/or phone calls.
- The adult is locked in a room or in their home.
- The adult is denied access to aids or equipment (e.g. glasses, dentures, hearing aid, crutches, etc.).
- The adult's access to personal hygiene and the toilet is restricted.
- The adult's movement is restricted by use of inappropriate furniture or other equipment.
- Bullying via social networking internet sites and persistent texting.

Financial or material abuse

This includes theft, fraud, internet scamming, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

Possible indicators of financial abuse are:

- Lack of heating, clothing or food.
- Inability to pay bills and/or unexplained shortage of money.
- Lack of money, especially the day after receiving money, such as benefits.

- Inadequately explained withdrawals from accounts.
- Unexplained loss/misplacement of financial documents.
- The recent addition of authorised signatories on an adult's accounts or cards.
- Disparity between assets/income and living conditions.
- Power of attorney obtained when the adult lacks the capacity to make this decision.
- Recent changes of deeds/title of house or will.
- Recent acquaintances expressing sudden or disproportionate interest in the adult and their money.
- Service-user not in control of their direct payment or individualised budget.
- Mis-selling/selling by door-to-door traders/cold calling.
- Illegal money-lending.

Scams

These can arise from contact by email, letter, or telephone, or in person, and involve making false promises to con victims out of money.

There are many types of scams but some of the most common are:

- fake lotteries;
- deceptive prize draws or sweepstakes;
- clairvoyants;
- computer scams; and
- romance scams.

Individuals or gangs attempt to trick people with official-looking documents or websites or convincing telephone sales. They have the aim of persuading people to send a processing or administration fee, pay postal or insurance costs, buy an overvalued product, transfer savings from their bank accounts or make a premium rate phone call.

Doorstep Scams are crimes carried out by bogus callers, rogue traders and unscrupulous sales people who call, often uninvited, at a person's home under the guise of legitimate business or trade.

Modern slavery

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

A large number of active organised crime groups are involved in modern slavery. However, it is also committed by individual opportunistic perpetrators.

There are many different characteristics that distinguish slavery from other human rights violations. However, only one needs to be present for slavery to exist.

Someone is in slavery if they are:

- forced to work - through mental or physical threat;
- owned or controlled by an 'employer', usually through mental or physical abuse or the threat of abuse;

- dehumanised, treated as a commodity or bought and sold as 'property'; or
- physically constrained or have restrictions placed on his/her freedom of movement.

Modern slavery takes various forms and affects people of all ages, gender and races.

Human trafficking involves an act of recruiting, transporting, transferring, harbouring or receiving a person through a use of force, coercion or other means, for the purpose of exploiting them. Trafficking can be domestic or it can involve trafficking adults into the UK.

If an identified victim of human trafficking is also an adult with care and support needs, the response will be coordinated under the adult safeguarding process. The police are the lead agency in managing responses to adults who are the victims of human trafficking.

There is a national framework to assist in the formal identification of victims and help to coordinate the referral of victims to appropriate services. This is known as the National Referral Mechanism.

Signs of various types of slavery and exploitation are often hidden, making it hard to recognise potential victims. Victims can be any age, gender or ethnicity or nationality. Whilst by no means exhaustive, some common signs that may indicate modern slavery are:

- An adult is not in possession of their legal documents (passport, identification and bank account details) and they are being held by someone else.
- The adult has old or serious untreated injuries and they are vague, reluctant or inconsistent in explaining how the injury occurred.
- The adult looks malnourished, unkempt, or appears withdrawn.
- They have few personal possessions and often wear the same clothes.
- The clothes they do wear may not be suitable for their work.
- The adult is withdrawn or appears frightened, unable to answer questions directed at them, or speak for themselves and/or an accompanying third party speaks for them. If they do speak, they are inconsistent in the information they provide, including basic facts such as the address where they live.
- They appear under the control and influence of others, rarely interact or appear unfamiliar with their neighbourhood or where they work. Many victims will not be able to speak English.
- They are fearful of people in general and the authorities in particular.
- The adult perceives themselves to be in debt to someone else or in a situation of dependence.
- The adult lives in inappropriate or unduly cramped accommodation.

Discriminatory abuse

This includes discrimination on the grounds of race, faith or religion, age, disability, gender, sexual orientation and political views, along with racist, sexist, homophobic or ageist comments or jokes, or comments and jokes based on a person's disability or any other form of harassment, slur or similar treatment.

Hate crime can be viewed as a form of discriminatory abuse, although it will often involve other types of abuse too. It also includes not responding to dietary needs and not

providing appropriate spiritual support. Excluding a person from activities on the basis they are 'not liked' 'is also discriminatory abuse.

Possible indicators of discriminatory abuse

Indicators for discriminatory abuse may not always be obvious and may also be linked to acts of physical abuse and assault, sexual abuse and assault, financial abuse, neglect, psychological abuse and harassment, so the indicators listed above may also apply to discriminatory abuse.

An adult who is suffering discriminatory abuse may also:

- Reject their own cultural background and/or racial origin or other personal beliefs, sexual practices or lifestyle choices.
- Make complaints about the service not meeting their needs.

Institutional abuse

Institutional abuse is the mistreatment, abuse or neglect of an adult by a regime or individuals in a setting or service where the adult lives or that they use. Such abuse violates the person's dignity and represents a lack of respect for their human rights.

Institutional abuse includes neglect and poor care practice within an institution or specific care setting, such as a hospital or care home, or where care is provided within an adult's own home. This may range from one-off incidents to ongoing ill-treatment. It can occur through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

Institutional abuse occurs when the routines, systems and regimes of an institution result in poor or inadequate standards of care and poor practice, which affect the whole setting and deny, restrict or curtail the dignity, privacy, choice, independence or fulfilment of adults with care and support needs.

Neglect and acts of omission

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

Neglect and poor professional practice may take the form of isolated incidents or pervasive ill treatment and gross misconduct. Neglect of this type may happen within an adult's own home or in an institution. Repeated instances of poor care may be an indication of more serious problems. Neglect can be intentional or unintentional.

Possible indicators of neglect are:

- The adult has inadequate heating and/or lighting.
- The adult's physical condition or appearance is poor (e.g. ulcers, pressure sores, soiled or wet clothing).

- The adult is malnourished, has sudden or continuous weight loss and/or is dehydrated.
- The adult cannot access appropriate medication or medical care.
- The adult is not afforded appropriate privacy or dignity.
- The adult and/or a carer has inconsistent or reluctant contact with health and social services.
- Callers/visitors are refused access to the adult.
- The adult is exposed to unacceptable risk.

Self-neglect

Self-neglect entails neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding. It is also defined as the inability, intentional or unintentional, to maintain a socially and culturally accepted standard of self-care with the potential for serious consequences to the health and wellbeing of the individual and sometimes to their community.

Self-neglect may not prompt a section 42 enquiry, and an assessment will be made on a case by case basis. A decision on whether a response is required under safeguarding will depend on the adult's ability to protect themselves by controlling their own behaviour. However, there may come a point where they are no longer able to do this without external support.

Indicators of self-neglect may include:

- Living in very unclean, sometimes verminous circumstances;
- poor self-care, leading to a decline in personal hygiene;
- poor nutrition;
- poorly healing sores;
- poorly maintained clothing;
- isolation;
- failure to take medication;
- hoarding;
- neglecting household maintenance; or
- portraying eccentric behaviour/lifestyles.

Poor environments and personal hygiene may be a matter of personal or lifestyle choice or other issues, such as insufficient income.

Exploitation

Abuse of adults with care and support needs often occurs within a context of exploitation.

Exploitation can be seen as an act where someone will use another person for profit, labour, sexual gratification or some other personal or financial advantage. As such, exploitation can take many forms and result in different types of harm, such as financial, emotional/psychological or sexual. These types of abuse have been covered in the sections above, but some forms of criminal exploitation are explained in the paragraphs below.

Sexual Exploitation

The sexual exploitation of adults with care and support needs involves exploitative situations, contexts and relationships where adults with care and support needs, or a third person or persons, receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money, attention, understanding, company) as a result of performing sexual activities, and/or having others performing sexual activities on them.

Sexual exploitation can occur through the use of technology without the person's immediate recognition. This can include being persuaded to post sexual images or videos on the internet or send them on a mobile phone with no immediate payment or gain, or being sent such an image by the person alleged to be causing harm. In all cases, those exploiting the adult have power over them by virtue of various factors, including their age, gender, intellect, physical strength, and/or economic or other resources.

Criminal Exploitation

Criminal exploitation occurs where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child, young person or an adult, including those with care and support needs, into any criminal activity:

- (a) In exchange for something the victim needs or wants, and/or
- (b) For the financial or other advantage of the perpetrator or facilitator, such as to support serious organised crime and/or terrorism, and/or
- (c) Through violence or the threat of violence to ensure compliance.

Because they are more likely to be easily detected, individuals who are exploited are more likely to be arrested and criminalised for criminal behaviour, than those individuals or groups who are exploiting them.

Individuals who are being criminally exploited can be involved, linked to or considered to be, by themselves or others, as part of a "gang" (taken from research and publication by Factor et al: 2015). It is important when children or adults, including those with care and support needs, identify or are identified as being affected or involved with gang-related activity that involves the use of actual or threatened violence and/or drug dealing, that professionals also consider that they may be victims of criminal exploitation.

Criminal exploitation is broader than, but often part of, organised crime and county lines.

Organised Crime and County Lines

Organised crime is "serious crime planned, coordinated and conducted by people working together on a continuing basis. Their motivation is often, but not always, financial gain." Organised crime groups are "organised criminals working together for a particular criminal activity or activities."

County lines is a term used to describe gangs and organised criminal networks involved in exporting illegal drugs into one or more importing areas within the UK, using dedicated mobile phone lines or other forms of “deal lines”.

They are likely to exploit children and adults, including those with care and support needs, to move, locally supply and store the drugs and money. They will often use coercion, intimidation, violence (including sexual violence) and weapons.

Cuckooing

The term ‘cuckooing’ is “named after the nest stealing practices of wild cuckoos. It describes the situation where a county lines dealer ‘takes over’ accommodation located in the provincial drugs market, using it as a local dealing base.” (Coomber and Moyle: 2017).

An individual or group can do this by taking over the homes of local adults and families, including children and adults with care and support needs, through an abuse of power or vulnerability by coercion, control and/or force so that they can provide a base for the supply of drugs into the local community. This places the adult and/or families at an increased risk of eviction if they are in social or privately rented housing, and isolation from their communities due to the anti-social activity it can create. Cuckooing often forms part of wider ‘county lines’ activity and is also a form of criminal exploitation.

The Context of Criminal Exploitation

Criminal exploitation, including cuckooing, can include several different types of abuse. The types of abuse that can often be present, or relied upon for the purposes of power, include:

- Modern slavery and trafficking.
- Domestic abuse.
- Sexual abuse, including sexual exploitation.
- Physical abuse.
- Psychological abuse.
- Financial abuse.
- Neglect, including self-neglect.
- Emotional abuse.

Criminal exploitation can involve complex and organised abuse involving one or more abusers and several children and/or adults, including those with care and support needs.

Criminal exploitation can take place outside of the family or home environment. It is often a combination of the interplay between the relationships and circumstances both inside and outside of the family/home environment that can lead to a child or adult being criminally exploited.

It is now recognised that it is crucial to have a multi-agency contextual safeguarding approach and also look at the victim’s surrounding environment. An approach should be adopted which considers and addresses the individual needs, risks and protective factors within, including the needs and capacity of parents/carers, and outside, including the impact of social conditions, of the family/home. This approach should also be taken

when a child or adult, including those with care and support needs, is being considered as a potential perpetrator.

Vulnerable Groups at Risk

As with other types of exploitation, individuals, both adults and children, who fall into the following vulnerable groups are more likely to be at risk of being criminally exploited. Individuals or families who fall into more than one of the groups, and show the signs of criminal exploitation or cuckooing as outlined below, should be considered at the greatest risk if they:

- are teenage children and young adults;
- have previously or are currently experiencing abuse or other Adverse Childhood Experiences (ACEs);
- lack a safe/stable home environment, now or in the past (e.g. due to domestic violence, parental substance misuse, mental health issues or criminality);
- are homeless or have insecure accommodation status;
- are exposed to violent crime, gang-related activity and deprivation;
- are socially isolated, lonely or experience social difficulties;
- are economically vulnerable;
- are migrants;
- have a physical or learning disability;
- experience mental health issues or substance misuse.

Signs of Criminal Exploitation

There are several signs that indicate that an individual may be subject to criminal exploitation. The more signs that are present for an individual, the greater the level of risk.

Below are some signs that may indicate an individual is vulnerable to exploitation. Note that this list is in order, so signs listed at the top are most concerning in respect of risk:

- Persistently going missing from home and/or being found out-of-area.
- Unexplained acquisition of money, clothes or mobile phones.
- Excessive receipt of texts or phone calls and/or having multiple handsets.
- Relationships with controlling or older individuals or groups.
- Leaving home without explanation.
- Suspicion of physical assault or unexplained injuries.
- Parental/carer concerns.
- Carrying weapons.
- Gang association or isolation from peers or social networks.
- Self-harm or significant changes in emotional wellbeing.
- Refusal, resistance to or significant reduction in attendance and/or engagement with services or professional sources of support.
- Secretive behaviour.

Any sudden changes or presence of the signs should be discussed with the individual, where possible, in the first instance to explore with them the reasons behind the behaviour and try to improve their own understanding of the potential risks.

Signs of Cuckooing

Cuckooing not only has an impact on the individual or family whose home has been taken over, but also the neighbours and neighbourhood of the property that has been cuckooed.

Therefore, signs of cuckooing may be more evident to neighbours than professionals in the first instance. This means that comments and reports from neighbours must be noted and considered by professionals working with individuals or families.

Cuckooing can take place in rented or social housing, including multiple occupancy housing provision. However, individuals who own their own homes, particularly those in the vulnerable groups listed above, may also be targeted.

The following signs may indicate that an individual or family's property has been cuckooed:

- Unknown people frequently staying at/moving into the property; often described by the individual or families as "friends".
- The individual or family moving out or regularly staying away from the property while the unknown individuals remain.
- New vehicles regularly parking or remaining outside the property. • An increase in the number of comings and goings throughout the day and/or night, including people/vehicles that have not been seen before. • An increase in anti-social behaviour, such as property damage, littering, regular loud music or 'parties', or evidence of verbal or physical aggression, in and around the property. • The individual/family refusing entry or restricting access to certain parts of the property to neighbours, friends or professionals, particularly if they have allowed it before.

As with all areas of exploitation, referral to the relevant agencies in a timely manner is essential. Such options could include:

- Police involvement and intervention.
- Ongoing support from social services and mental health services.
- Housing providers.
- Any physical health services.
- Community services and resources.

SAFEGUARDING INTERNAL ALERT NOTIFICATION (Whistle blowing)

Name of Alerter:	Workplace:
Date:	Format of Information received:
Alleged perpetrator(s):	Alleged victim(s):

Details (facts only, exact words used, no interpretation):

Alert passed on to:

Signed (Alerter):	Date:
--------------------------	--------------

Signed (Responsible person):	Date:
-------------------------------------	--------------



Appendix 3

**SAFEGUARING INTERNAL ALERT
DISCUSSION RECORD**

Interviewer(s):	Date:
Worker:	Time:

Record of Discussion:

Action taken:

Record agreed by (name/designation):	Date:



INSPIRED SUPPORT

Appendix 4

SAFEGUARDING REPORT

Name:	Date of Birth:
Date:	Carefirst ID:

Identification of risk:

Details of the safeguarding incident:

Who is at risk?	
What is the foreseeable risk?	

Action taken to minimise the risk of harm and safeguard the individual:

--

Was the incident reported to Social Services or other professional body?

Yes	No	Date	Name/Contact details

Is there carer involvement and were they informed of the incident?

Yes	No	Date	Name/Contact details

--	--	--	--

Signed: _____

Appendix 5

LOCAL SAFEGUARDING AUTHORITY CONTACT DETAILS

Newcastle:

0191 278 8377 (Monday-Friday, 8am-5pm)
0191 278 7878 (Evenings and Weekends)
Text: 07968474891 (Monday-Friday, 8am-5pm)
Email: scd@newcastle.gov.uk
Online: <https://mycarenewcastle.org.uk/form/SAIE?latest=true#!/>

Gateshead:

0191 433 7033 (24 hours)
Online: <https://www.gateshead.gov.uk/article/10277/Safeguarding-concern>

Northumberland:

Onecall: 01670 536 400
Text phone: 01670 536 844
Email: safeguardingreferrals@northumberland.gov.uk

North Tyneside:

0191 643 2777 (office hours)
0330 333 7475 (Evenings and weekends)
Online: <https://mycare.northtyneside.gov.uk/web/portal/pages/safeguardingreport#assess>

South Tyneside:

0191 424 6000 (Monday to Thursday - 8.30am to 5pm, Friday - 8.30am to 4.30pm)
0191 456 2093 (Outside of the above office hours)
Online: https://www.southtyneside.gov.uk/13750?_ga=2.214015575.1377370728.1664281287-2138004532.1664281287&_gl=1*yiwqh1*ga*MjEzODAwNDUzMjY0Mjg3*_ga_DNGKJ1HWT8*MTY2NDI4MTI4Ny4xLjEuMTY2NDI4MTUxMC4xNi4wLjA

INSPIRED SUPPORT

INTERNAL PROCEDURE FOR SAFEGUARDING

