

1 September, 2021

# SAFEGUARDING POLICY AND PROCEDURE

ACTIVE POLICY

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FAMILY PATHWAY LTD

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## Introduction

### What is the purpose of this policy and its procedures?

Family Pathway as part of its core mission understands the importance to protect its beneficiaries, particularly children and adults at risk, and to respond appropriately when its beneficiaries are suspected or known to be at risk of harm. This policy outlines how we intend to carry out this commitment to safeguard our beneficiaries.

Whilst this policy has been created due to the values and ethical principles of Family Pathway, it is also important that it is in line with current legislation, social policy, best practice and relevant regulations such as but not limited to:

- [Children Act 1989](#)
- [Children Act 2004](#)
- [Safeguarding Children: Working Together Under the Children Act 2004](#)
- [Social Service and Wellbeing \(Wales\) Act 2014](#)
- [Rights of Children and Young Persons \(Wales\) Measure](#)
- [United Nations Convention on the Rights of the Child](#)
- [All Wales Child Protection Procedures 2008](#)
- [United Nations Principles for Older Persons](#)
- [United Nations Convention on the Rights of Persons with Disabilities](#)
- [Local Protocols of the Cardiff and Vale Safeguarding Board](#)

Further best practice can be taken from local and national protocols for safeguarding, these can be found on [the Local Safeguarding Children's Board](#) and the [Local Safeguarding Adults Board for Cardiff and Vale](#) website. Here are links to some of the protocols:

- [All Wales Flowchart for Practitioners when dealing with a disclosure or concern identified of Forced Marriage](#)
- [All Wales Practice Guidance for Safeguarding Children Who May Have Been Trafficked](#)

### Who is this policy for?

Everyone in the organisation is responsible for working towards safeguarding, be that paid or unpaid staff (volunteers), trustees and partner organisations.

## Key definitions

'Child at risk'<sup>1</sup> – This refers to a person who is:

- Under the age of 18
- Is at risk or is known to be experiencing abuse, neglect or other harm

'Adult at risk'<sup>2</sup> – This refers to a person who is:

1. Aged 18 or above
2. Experiencing or at risk of abuse or neglect or harm
3. Has needs for care and support

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<sup>1</sup> As covered in the Social Service and Wellbeing (Wales) Act 2014

<sup>2</sup> As covered in the Social Service and Wellbeing (Wales) Act 2014

4. As a result of those needs is unable to protect themselves from the abuse, neglect or harm, or risk of it

Abuse<sup>3</sup> - means harm through 'physical, sexual, psychological, emotional or financial abuse'

Safeguarding disclosure - information that explicitly reveals suspected or known abuse or neglect

Safeguarding Concerns – a person's belief or claim that abuse or neglect has happened, usually based on signs or symptoms of that abuse or neglect

Allegation – A disclosure, accusation or suspicion that highlights a perpetrator of abuse or neglect that has not yet been verified.

Neglect – a failure to meet a person's basic physical, emotional, social or psychological needs, which is likely to result in an impairment of the person's well-being

Well-being as defined by the Social Service and Wellbeing Act, 2014 is:

- Physical and mental health and emotional wellbeing
- Protection from abuse and neglect
- Education, training and recreation
- Domestic, family and personal relationships
- Contribution made to society
- Securing rights and entitlements
- Social and economic wellbeing
- Suitability of living accommodation
- Child only
  - Physical, intellectual, emotional, social and behavioural development
  - Welfare as interpreted for the purposes of the Children Act 1989
- Adult Only
  - Control over day to day life
  - Participation in work

Harm<sup>4</sup> – in relation to a child means abuse or impairment of either or both:

1. Physical or mental health
2. Physical, intellectual, emotional, social or behavioural development

Cyberbullying – Cyberbullying is bullying that takes place online. Unlike bullying in the real world, online bullying can follow the person wherever they go, via social networks, gaming and mobile phone. This can take form of:

- sending threatening or abusive text messages
- creating and sharing embarrassing images or videos
- 'trolling' – the sending of menacing or upsetting messages on social networks, chat rooms or online games
- excluding people from online games, activities or friendship groups
- shaming someone online
- setting up hate sites or groups about a particular person

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<sup>3</sup> As covered in the Social Service and Wellbeing (Wales) Act 2014

<sup>4</sup> As defined in the Social Service and Wellbeing (Wales) Act 2014

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- encouraging people to self-harm
- voting for or against someone in an abusive poll
- creating fake accounts, hijacking or stealing online identities to embarrass a person or cause trouble using their name

Digital Safety – This is a term used to refer to actions taken to protect people from abuse, neglect or bullying through a range of technological means, including but not limited to; text messaging, social media/networking apps or sites, websites, email, online gaming platforms and dating apps or sites.

## Designated Safeguarding Officers at Family Pathway

Within Family Pathway there are a number of key staff who take lead for the safeguarding of people we as an organisation come into contact with. Typically these people are called Designated Safeguarding Officers (DSO). It is the duty of these safeguarding officers to be the main ports of call for the organisation.

The DSO for Family Pathway are:

- Elsa Torres – Board DSO
- Mariana Gomes – Staff Deputy DSO
- MASH team – Cardiff Council

Simon English is the Board of Director's lead DSO. Simon's role is to take concerns regarding staff allegations, to lead on policy and procedure changes with Family Pathway. Simon is also responsible for reporting the status of safeguarding back to the board.

Email: [hypnotherapycardiff@yahoo.co.uk](mailto:hypnotherapycardiff@yahoo.co.uk)

Phone: 07833665978

Elsa is the staff DSO and therefore is the first port of call for safeguarding issues in most cases. She is also responsible for raising awareness of safeguarding with staff via training and other methods.

Email: [elsa@familypathway.co.uk](mailto:elsa@familypathway.co.uk)

Phone: 07891819522

Mariana is the Deputy DSO meaning that in cases where Elsa is not available she is your point of contact regarding safeguarding.

Email: [mariana@familypathway.co.uk](mailto:mariana@familypathway.co.uk)

Phone: 07306238927

Safeguarding Team at Cardiff Council:

MASH team at Cardiff Council – 02920536490 followed by option 3

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## Safer Recruitment

As part of our commitment to safeguarding, Family Pathway will endeavour to request appropriate background checks for new and continuing members of staff. For further information on this please see the Safer Recruitment and DBS Policies and Procedures.

## Commitment to Training & Development

### Internal procedure

As part of Family Pathway's commitment to safeguarding, all staff and directors will undergo regular safeguarding training as part of their induction process and at regular intervals of at least 18 months, but will always strive towards annual completion of this training to maintain current knowledge and retention of information.

Within this structure there are training requirements for safeguarding, the level of which corresponds to the person's involvement with the public and their role in the organisation. Please see



Appendix A for how jobs roles would correlate to different minimum training requirements.

### Internal self-audit

This should be carried out by the board of directors with the guidance and support of the DSOs to review progress made, plan for future developments and ensure a high level of standards based on good practice is maintained.

### Collaborative work, Joint Endeavours and Outreach Procedure

In projects that operate out of the centre, but are not directly operated by the Family Pathway, our terms of hire shall contain a clause to either demonstrate that the organisation, group or individual is appropriately taking safeguarding precautions or that they agree to fall in-line with our own. For joint endeavours, a partnership agreement should incorporate a specific safeguarding procedure for that project. For outreach work at another organisations premises, safeguarding procedures of that organisation should be followed and preferably a copy should be obtained prior to a visit, if at all possible. Should a staff member feel that as part of the outreach work the host organisation has not appropriately reported the safeguarding concerns to the relevant agencies, then they should follow these procedures and include information regarding their reason for the concern that the other organisation has not taken appropriate action.

### Confidentiality & Information Sharing

As part of Family Pathway's ethical and legal requirements there is an importance to protect people's information, but we must also meet our ethical and legal requirements to safeguard the welfare of our beneficiaries and the legal duty discharged through our partnership with the Local Authority. To ensure legal compliance Family Pathway will endeavour to seek consent from a service user where it is possible before sharing information with relevant authorities, where this consent is refused but the concerns or disclosure of information would either put a child-at-risk or adult-at-risk, then we shall carry out our legal obligation to report this information. For further information please see the Family Pathway Data Protection Policy.

### Managing Risks for activities

For the management of activities, it is important that staff appropriately risk assess their planned activities. This should be done in-line with the organisations Health & Safety Policy.

### Ratios of service users to staff

#### Youth provisions

In the youth provisions the staff to young person ratio should be 1:10 unless where additional needs make up more than 50% of the demographic of the young people attending, which then the staff ratio should be 1:8. In this calculation there should always be at least 2 members of staff (inc. volunteers and students on placement). When working out the calculation if a person is receiving designated one-to-one or two-to-one support then these members of staff must not be included in the ratio. These must be recorded on session sheets to be used as part of our annual reporting.

#### Adult services

These services shall maintain a 1:15 ratio, unless the service is targeted to those with additional needs due to; disability, which then a ratio of 1:10 should be maintained. When working out the calculation if a person is receiving designated one-to-one or two-to-one support

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then these members of staff must not be included in the ratio.

### Risk Assessments

Each project should have an individual risk assessment designed for the make-up of the group it works with. All risk assessments should be approved by Elsa Torres.

### Cyberbullying and digital safety

Workers have duties to safeguard children and adults they work with from not only in the physical world but also to assist in their safety in the digital one. It can be sometimes difficult navigating a safe response to emerging technologies without disempowering the service user and preventing them from engaging in the potential benefits of socially focussed technology. Family Pathway believe that it is within the best interest of the beneficiaries it works with to empower them through an educative response to help them safeguard themselves as much as is possible and to work with them in the cases where they struggle with this or where those safeguards have been breached.

Should a person disclose that they are a victim of cyberbullying then some guidance for staff would include:

1. Reassuring the victim that they have done the right thing in their disclosure to the worker
2. Showing empathy for the person's situation
3. Reiterating that the victim has the right to feeling safe and that the behaviour of the bully is inappropriate
4. Suggesting that the victim keep a record should this need to go further to police or other services
5. That the staff member where possible will facilitate them speaking to friends, family, or other significant individuals or specialist agencies about this
6. Advising the victim not to reply or if they do feel compelled to reply that this is done non-aggressively but assertively enough that the message is clear. They will also be reminded how to prevent the bully from contacting them such as; blocking them on social media apps/sites, adding them to a block list in their contacts, changing their number or temporarily deactivating their account.

### Youth Provisions and Adult Services

In youth and adult service settings where the environment or activity is hosted and/or organised by us, the safe use of technology should be done as part of developing group codes of conduct. Articles on this agreement could include but not limited to; only using phones on downtime, not posting other group members photos without consent, defining and prohibition of inappropriate websites and apps such as those used for porn, not to use social media to troll people and to not add staff on social media.

As part of digital safety, staff must get written consent around whether a service user can be featured in materials posted using Family Pathway social media outlets and the Family Pathway website. In addition to the written consent staff are also advised to clarify this consent verbally before images or otherwise other potentially sensitive information can be posted about the service user such as disclosing they attend provisions that may reveal that they are LGBTQ+ or that if the post relates to overcoming a personal struggle.

### Identifying Abuse and Neglect

To be able to adequately identify abuse and neglect there are some associated risk indicators that are useful to know to help staff and trustees to be more critical about their interactions with vulnerable children and adults to help identify abuse and neglect. You can find printable handouts in Appendix D for the main forms of abuse and neglect.<sup>5</sup>

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<sup>5</sup> These are taken from the handouts based on the All Wales Safeguarding Awareness pack

## Reporting a Concern

### Assessment

When a safeguarding concern has been raised it is the duty of the Designated Safeguarding Officer to provide advice on the course of action as either a signposting, early intervention or child/adult-at-risk response is required.

### Early intervention/signposting

If a need for early intervention is identified, then a plan should be created detailing how that need is to be met. This could be done internally or through referrals and signposting to other agencies. A list of what kinds of services someone could be referred to can be found in appendix C. If they are assessed at this level of support then the approach to support the individual should always be one with their involvement in that discussion.

### Child/Adult-at-risk

If a person is considered to be at potential or known risk of abuse then it is important that the DSO handling the concern to pass this on to the appropriate Local Authority. This should be done in writing within 48 hours but can be done over the phone or such as soon as possible. If the person is in immediate danger then it is appropriate to call the police on 999.

### Considerations for Trans\* service users

One key aspect of working with trans\* service users is that they may be not currently “be out” to everyone in their life meaning they may present with a different name to that which they may be recognised by other agencies such as the Local Authority. For trans\* children, we recognise the need to register young people according to their preferred name to respect their identity but also the need to have appropriate data to help identify them to other agencies should a safeguarding issue arise. Given this staff are to hold dual records for young people, a Family Pathway membership and a Cardiff County Council (Youth Service/Adult Services/Children’s Services) membership, our records shall record their legal name and preferred and a request for Unique Learner Numbers or other key identifier from the council shall be requested for our records at entry to better highlight the young person when making a safeguarding referral. This would be requested as standard to be sure not to identify the service user as trans\*. It is staff professional judgement to decide whether there is a need to disclose trans\* status in regard to safeguarding. For example, if a service user is in a domestic abuse situation but they are vulnerable because the perpetrator is using the fact that a service user is “not out” and used to control them, then this would be a valid need for disclosing trans\* status.

### Allegations against staff in Family Pathway

When a concern about a member of staff is raised, you should contact either the Staff DSO (not the deputy DSOs) or the board DSO as a matter of urgency. Should neither of these two be viable due to concerns involving them, then you should contact a member of the management board. If the situation arises where you are unable to contact any of those parties, then it is important to still pass on the concern. At which time, a staff member or trustee should seek guidance on how to proceed from one of the following places:

- Cardiff Council’s Adult Services – 02920 338439 or for out of hours 02920 788570
- Cardiff Council’s Children Services – 02920536490 or for out of hours 02920788570
- NSPCC – 0800 800 5000
- Children’s Commissioner - 01792 765600 (ask to speak to Investigation and Advice Team)
- Multi Agency Safeguarding Hub - 02920 338439

### When to report to the Education Workforce Council

As part of Family Pathway's work, a number of staff undertake regulated activities that require them to register to the professional bodies such as the Education Workforce Council (EWC). We as an employer are 'responsible for referring cases of alleged unacceptable professional conduct, serious professional incompetence and conviction of a relevant offence to the Educational Workforce Council (EWC)<sup>6</sup>. Therefore, as part of the professional conduct of registrants, they must ensure they actively safeguard learners<sup>7</sup>, and if we as an employer have terminated their employment or might have should they resign before this, then we have a duty to refer this on to the EWC.

In such incidents it is the duty of the referrer, which would be the appropriate DSO who led on the safeguarding concern to seek and follow the advice of the EWC to meet this duty. They should be mindful to appropriately redact information sent to the EWC for the purposes of safeguarding the service users or staff members in cases of appeal to the EWC.

### When to report to DBS

As a regulated activity provider, we have the legal responsibility to refer if we believe that a staff member who undertakes regulated activity has committed acts of relevant conduct or has passed the harm test.

A flow chart has been attached in Appendix B which gives an overview of when you might refer to the DBS. For further information please refer to the DBS policy and procedure.

## Related Policies

- Safer Recruitment and DBS Policy & Procedure

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<sup>6</sup> EWC Fitness to Practice Guidance - <https://www.ewc.wales/site/index.php/en/documents/fitness-to-practice/199-discipline-guidance-for-employers.html>

<sup>7</sup> <https://www.ewc.wales/site/index.php/en/fitness-to-practise/code-of-professional-conduct-and-practice-pdf/file.html>

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- Recruitment, Induction and Training Policy
- Data Protection Policy and Procedure
- Health & Safety Policy
- Code of Conduct
- Whistleblowing
- Complaints

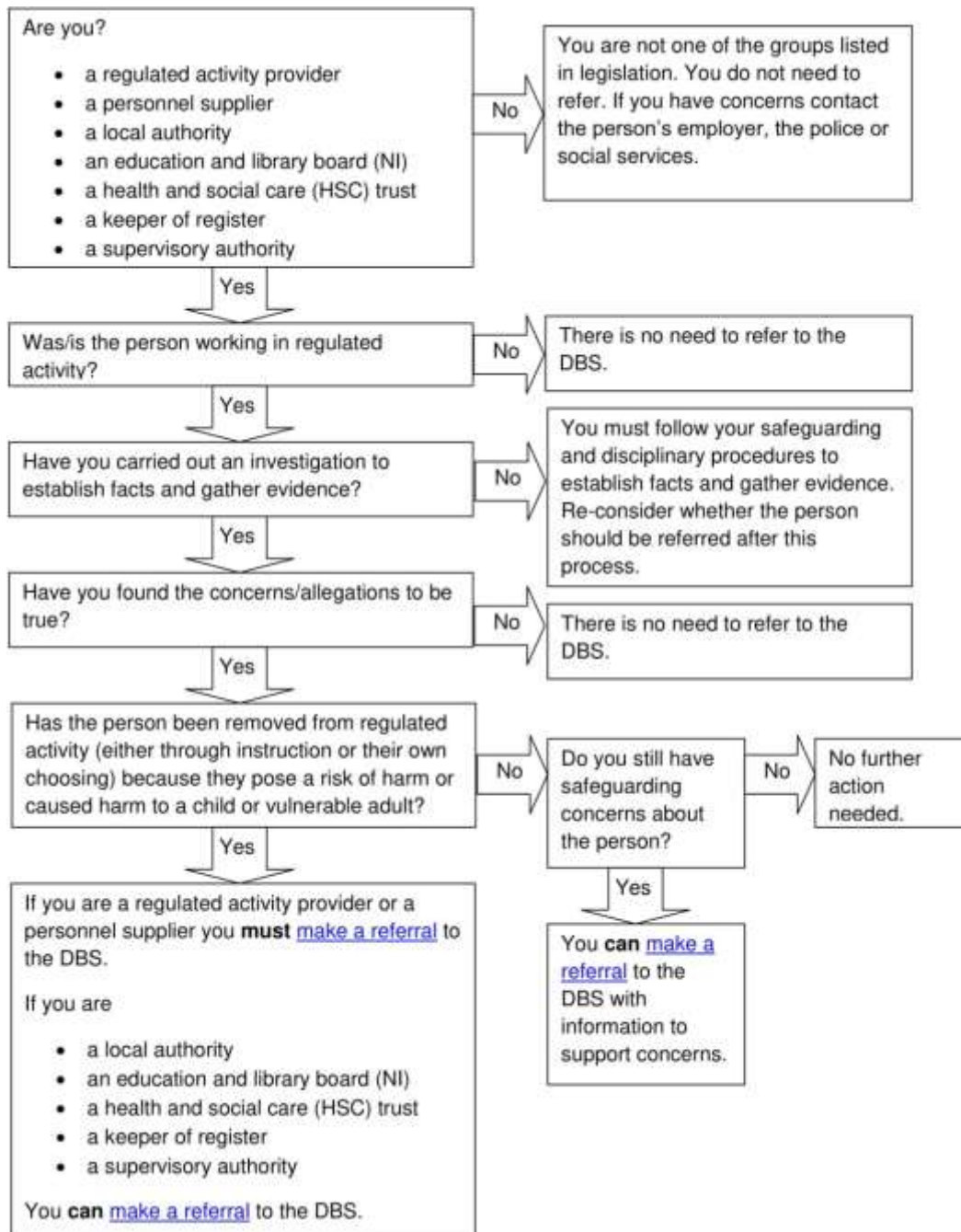
## Cited Internal Policies and Procedures

- DBS Policy & Procedure
- Data Protection Policy
- Health & Safety Policy & Procedures
- Safer Recruitment Policy & Procedures

## Appendix A

Departments	Level	Brief Description	Job Roles
Core Services,	1	This training will contain all components as mentioned in the basic all Wales safeguarding training as put together by Social Care Wales, with context examples for indirect contact with young people or vulnerable adults with reference to our internal procedures	Elsa and Mariana
Children, Young People, Vulnerable Adults	2	This training will contain all the components as mention in the basic all Wales safeguard training put together by Social Care Wales, with examples appropriate for direct work with children and vulnerable adults	Elsa and Mariana
Children, Young People, Vulnerable Adults	3	This Training will incorporate the learning from Level 2, it will then cover some of the key regional and national protocols and assessment processes related to those protocols for more simple safeguarding issues	Elsa and Mariana
Safeguarding	4	This is bespoke to the organisation at the time of writing incorporating all the parts of the previous levels	Designated Safeguarding Officer, Deputy Safeguarding Officer, Director (Safeguarding Lead)

## Appendix B – DBS Referral<sup>8</sup>



<sup>8</sup> Taken from a DBS document



## Appendix C – Signposting

The Staff DSO supported by the Board DSO and the Health and Safety (inc. safeguarding) Committee are to maintain this list of agencies.

Topic	Organisation	Help Offered	Contact process
Housing	Shelter Cymru	Legal advice and guidance	0345 075 5005 – Helpline (Mon-Fri 9.30am-4pm) 02920 556120 – Local Advice Surgery
	Cardiff Housing Option Service	Homelessness applications, housing related advice	Housing Options Centre Hansen Street Cardiff  Opening times Monday - Wednesday 9am - 4.30pm Thursday 11am - 4.30pm Friday 9am - 4pm Office Hours: 029 2057 0750 Out of hours: 029 2087 3141
Legal	Citizen Advice	Legal help relating to: <ul style="list-style-type: none"> <li>• Benefits</li> <li>• Work</li> <li>• Debt &amp; money</li> <li>• Family Concerns</li> <li>• Housing</li> <li>• Immigration</li> <li>• Health</li> </ul>	2 <sup>nd</sup> Floor, Central Library, The Hayes, Cardiff, CF10 1FL  Mon-Wed & Friday: 9am-6pm Thursday: 10am-7pm
Advocacy and guidance	Meic		
	NewLinks Wales		
Substance Abuse	Inroads		
Domestic Abuse	Dyn Project		
Domestic Abuse	Live Fear Free		
Domestic Abuse	Women's Aid		

## Appendix D – Signs and Indicators of Abuse

Below

### Emotional/psychological

#### Activity 5: Indicators of abuse / harm / neglect

## Category of Abuse: Emotional / Psychological Abuse

Threats of harm or abandonment, coercive control, humiliation, verbal or racial abuse, isolation or withdrawal from services or supportive networks (coercive control is an act or pattern of acts of assault, threats, humiliation, intimidation or other abuse that is used to harm, punish or frighten the victim).

#### INDICATORS

##### Physical

- self-harm / Injury
- sleep disturbances
- change in appetite, weight loss
- isolation in a room
- inappropriately or oddly dressed by carer

##### Emotional

- passivity
- agitation
- confusion
- resignation
- fearfulness
- depression
- suicidal ideation
- helplessness
- tearfulness
- low self esteem

##### Behavioural

- insomnia
- recoiling from the approach of carer(s)
- avoidance of eye contact
- cowering
- head banging, hand biting
- running away, not wanting to go home

##### Social

- an air of silence when the abuser is present
- overtly subservient or anxious to please
- excessive and inappropriate craving for affection
- anxiety / stress / fearfulness around a particular person or place
- social activities and friendships controlled by the abuser
- age-appropriate peer interaction (e.g. on-line) prevented
- unwilling to allow visitors into home

#### WHERE MIGHT THIS HAPPEN?

- person's own home
- residential care home
- nursing home
- hospital
- school / college
- daycare
- nursery
- childminders
- sheltered accommodation
- relative's home
- public place

#### WHO MIGHT BE INVOLVED OR CAUSING THIS?

- domiciliary carer
- residential carer
- relative / parent / child / spouse / other carer
- support worker
- professional

## Physical

### Activity 5: Indicators of abuse / harm / neglect

# Category of Abuse: Physical Abuse

Hitting, slapping, over or misuse of medication, acts of undue restraint, or inappropriate sanctions.

#### INDICATORS

##### Physical

- injury incompatible with its explanation
- injury which has not been properly cared for
- cuts, scratches, lacerations, weal marks
- puncture wounds
- bruises or skin discoloration
- sprains
- bite marks
- fingertip and pinching marks
- burns and scalds, including friction burns
- any fracture without a satisfactory explanation of accident
- carpet burns
- restraint injuries
- excessive repeat prescriptions; under / over use of medication

##### Emotional

- confusion
- fearfulness
- low self esteem
- unexplained paranoia or terror

##### Behavioural

- signs of hair pulling
- significant loss of weight or appetite
- insomnia
- flinches at physical contact
- excessive drowsiness
- varying or inconsistent accounts of injury by carer
- management by restraints, physical restrictions, or force
- bedwetting
- disturbed sleep pattern
- asks not to be hurt

##### Social

- unacknowledged or hidden injuries (e.g. covered by clothes)
- unlikely or varying explanations of an injury by the person
- uncharacteristic behaviour or withdrawal
- cruelty by a child towards more vulnerable children, animals or in play
- fearfulness around a particular person or place
- running away or not wanting to go home

#### WHERE MIGHT THIS HAPPEN?

- person's own home
- residential care home
- nursing home
- hospital
- school / college
- daycare
- nursery
- childminders
- sheltered accommodation
- relative's home
- public place

#### WHO MIGHT BE INVOLVED OR CAUSING THIS?

- domiciliary carer
- residential carer
- relative / parent / child / spouse / other carer
- support worker
- professional
- family friend / neighbour
- stranger

## Financial

### Activity 5: Indicators of abuse / harm / neglect

# Category of Abuse: Financial Abuse

- having money or other property stolen;
- being defrauded;
- being put under pressure in relation to money or other property;
- having money or other property misused.

Financial abuse in relation to children and young people could include:

- child workers without pay
- EMA taken by family without child's consent
- child's belongings sold or missing
- benefit claims for the child, which are not real and fabricated illness
- misusing allowances/grants for children's care
- inappropriate cars that have been supported by allowances and Motability
- children looked after payments being spent, but not to the benefit of the child, by foster carer or kinship carer.

#### INDICATORS

##### Physical

- pension or benefits are cashed but the individual has no money, especially when the person needs assistance to spend money.
- unexplained or inappropriate withdrawals from bank accounts.
- unpaid bills or overdue rent when another person has taken responsibility.
- creation / changes to enduring power of attorney, will or insurance beneficiaries when the person is incapable of making such decisions.
- entry into residential / nursing home care is prevented by relatives concerned about losing inheritance of property.
- disappearance of financial documents, e.g. bank / building society records, payment / order books, or benefits papers.
- financial signatures, e.g. cheques, unlike the person's signature, or when they cannot write.
- missing personal belongings such as silverware, jewellery, or other valuable items.

- lax financial recording / monitoring in a care setting.
- online transactions when the person does not have necessary skills.

##### Emotional

- confusion, distress or fear when financial anomalies are discussed.
- person expresses worries about theft, threats, coercion, or disappearance of possessions.

##### Behavioural

- unusual concern by abuser that too much money is being spent on the care of the person.
- vulnerable person echoes the abuser's unlikely explanations.

##### Social

- deliberate isolation by abuser / carer from friends or family, resulting in them taking financial control.
- lack of normal amenities such as tv, appropriate clothing, personal grooming items.
- prevention by abuser / carer from spending money on cultural / social activities
- unreasonable use of social benefits e.g. motability car, by abuser / carers.

#### WHERE MIGHT THIS HAPPEN?

- person's own home
- residential care home
- nursing home
- sheltered accommodation
- relative's home

#### WHO MIGHT BE INVOLVED OR CAUSING THIS?

- domiciliary carer
- residential carer
- relative / parent / child / spouse / other carer
- support worker
- professional
- family friend / neighbour.

## Neglect

### Activity 5: Indicators of abuse / harm / neglect

# Category of Abuse: Neglect

Neglect means a failure to meet a person's basic physical, emotional, social or psychological needs, which is likely to result in an impairment of the person's well-being (for example, an impairment of the person's health or, in the case of a child, an impairment of the child's development). Includes the failure to access medical care or services, negligence in the face of risk-taking, failure to give prescribed medication, failure to assist in personal hygiene or the provision of food, shelter, clothing; emotional neglect.

#### INDICATORS

##### Physical

- lack of personal care or appropriate supervision
- unacceptable management of continence
- excessive dirt or health hazards in the living environment
- rashes, sores, lice
- misuse of medication
- failure to obtain / facilitate use of prosthetics, dentures, glasses, hearing aids, or other required equipment
- home environment not conducive to basic health needs
- inadequate heating, lighting, or bedding
- poor furnishings in the person's room compared to the rest of the house
- lack of appropriate physical contact, warmth, sensitivity or empathy
- lack of help to move around
- careless treatment of possessions, clothing or pets by carers
- injury which has not been properly cared for
- poor skin condition, untreated pressure sores, ulcers, bedsores
- being left in wet or soiled clothing or bedding
- hypothermia, dehydration, malnutrition or significant weight loss
- health deterioration or untreated medical condition
- lack of toys or personal possessions for a child
- excessive repeated prescriptions, or under / over use of medication

##### Emotional

- insomnia
- fearfulness
- low self esteem
- loneliness

##### Behavioural

- withdrawn and disengaged
- dishevelled appearance
- drowsiness
- constant hunger, stealing food, eating waste food

##### Social

- unsuitable clothing for weather conditions
- isolation, no peer / friendship groups
- unwilling to allow visitors into home
- no engagement in social / cultural activities

#### WHERE MIGHT THIS HAPPEN?

- person's own home
- residential care home
- nursing home
- hospital
- daycare
- nursery
- childminders
- sheltered accommodation

#### WHO MIGHT BE INVOLVED OR CAUSING THIS?

- domiciliary carer
- residential carer
- relative / parent / child / spouse / other carer
- support worker
- professional

## Sexual

### Activity 5: Indicators of abuse / harm / neglect

# Category of Abuse: Sexual Abuse

- rape and sexual assault or sexual acts to which the vulnerable adult has not or could not consent and / or was pressured into consenting
- a child under the age of 13 years **cannot** consent to sexual activity

#### INDICATORS

##### Physical

- difficulty in walking or sitting
- torn or bloody underclothing
- semen staining on clothing
- pain, discomfort or itching in genital area
- unexplained genital, vaginal, anal or oral injury
- bilateral bruising to hips, buttocks or inner thighs
- restraint marks on wrists, legs or neck
- recurring urinary tract infections
- tearing of penile fraenum or tissue
- love bites
- pregnancy

##### Emotional

- distress
- tearfulness
- confusion
- fearfulness
- low self esteem
- feeling of guilt, shame
- feelings of worthlessness or being damaged
- withdrawal
- anger

##### Behavioural

- insomnia
- flinches at physical contact
- over-affectionate displays
- overt sexual behaviour / language / play by the person
- signs of incestuous relationships
- bedwetting, aggressiveness, self-injury or fire setting
- disturbed sleep pattern
- fear of medical examinations, or carer blocks examination

- significant weight loss or gain
- alleged abuser encourages age-inappropriate dress or make-up
- attempts to appear unattractive; poor hygiene; odd clothing
- running away or not wanting to go home

##### Social

- isolation, no peer / friendship groups or social / cultural activities
- social activities and contacts controlled by the alleged abuser
- unwilling to allow visitors into home
- fearfulness or silence around a particular person or place
- unexplained gifts, money, jewellery, perfume
- unwillingness to talk about where or with whom they go
- secretive, anxious or unusual on-line activity

#### WHERE MIGHT THIS HAPPEN?

- person's own home
- residential care home
- nursing home
- hospital
- school/college
- daycare
- nursery
- childminders
- sheltered accommodation
- relative's home
- public place

#### WHO MIGHT BE INVOLVED OR CAUSING THIS?

- domiciliary carer
- residential carer
- relative / parent / child / spouse / other carer
- support worker
- professional
- family friend / neighbour
- stranger