



Safeguarding Policy for Children and Adults

November 2018

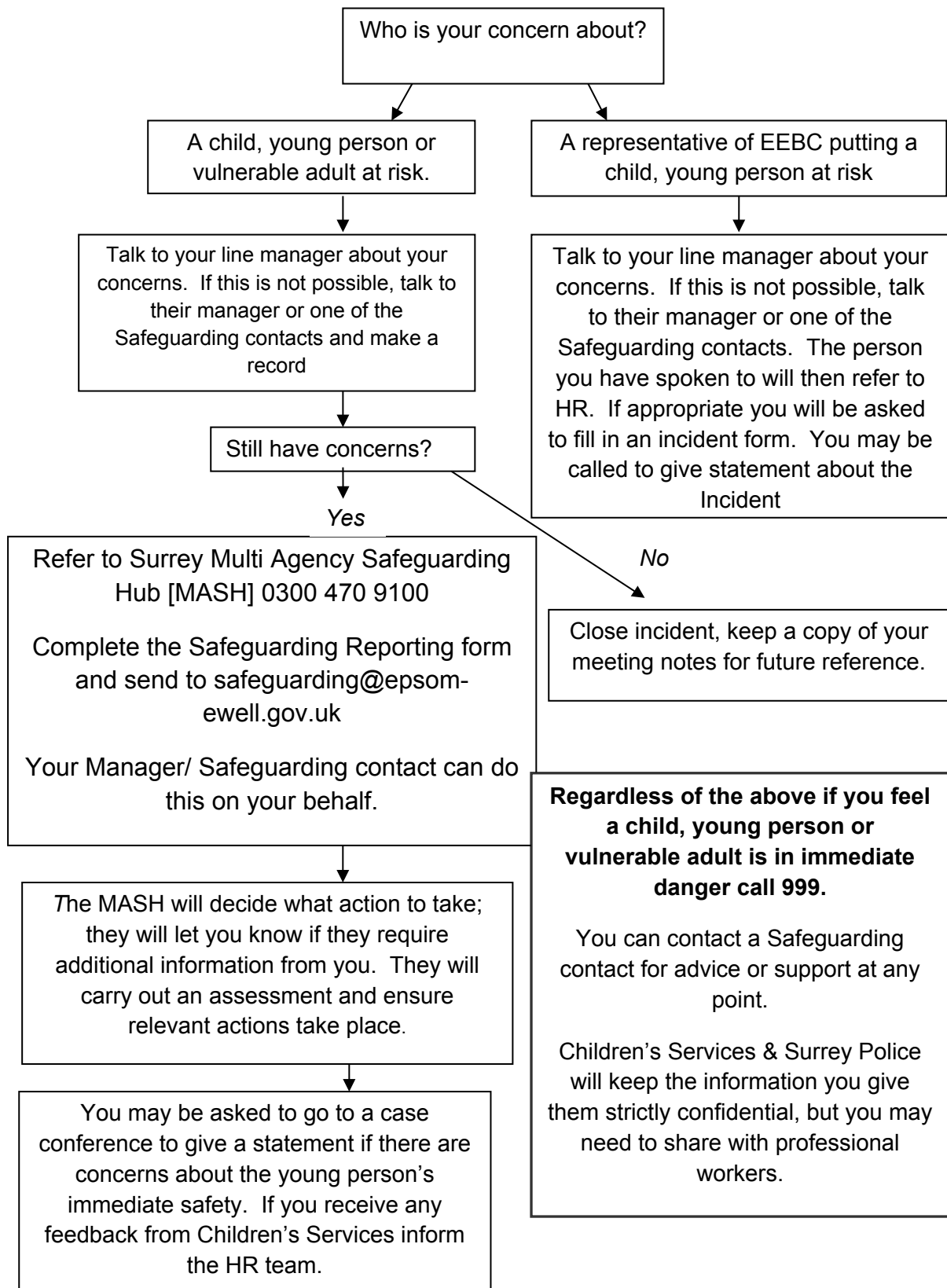
Safeguarding Contacts

Name	Job title	Extension Number
Rod Brown	Head of Housing & Community	2546
Currently vacant	Community Safety & Projects Officer	2133
Annette Snell	Housing Services Manager	2530
Rachel Jackson	Licensing, Grants and Home Improvement Agency Manager	2449
Sam Beak	Leisure Development Manager	2460
Claire Beesly	Assistant Solicitor Legal Services	2142
Linda Rendell	Venues and Facilities Manager	2804
Katayoun Thurlow	Venues and Facilities Manager	01372 720563
Linda Scott	Community Services Manager	2418

To discuss any issues surrounding the Safeguarding policy please contact one of the Safeguarding contacts or email:

safeguarding@epsom-ewell.gov.uk

Reporting Concerns relating to Children, Young People and Vulnerable Adults



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Foreword

The objective of safeguarding is to prevent and reduce the risk of harm to adults and children from abuse or other types of exploitation and impairment of development, while supporting individuals to maintain control over their lives and enabling them to make informed decisions without coercion. Although safeguarding is recognised as a key responsibility of local authorities, safeguarding is still everybody's business, and as neighbours, citizens, and community members we need to be alert to neglect and abuse, and be committed to reporting our concerns.

This policy sets out how the Council will meet its obligations to safeguard children and adults at risk. It applies to staff, agency workers, volunteers and contractors employed by the Council. It is also applicable to Councillors undertaking official duties on behalf of the Council. The policy complements and supports the agreed multi-agency procedures set down by the Surrey Safeguarding Children Board and Surrey Safeguarding Adults Board. (See *Appendix 1: Safeguarding Boards*) The policy is governed by a set of key principles and themes, designed to ensure that people who are at risk experience the process in such a way that it is sensitive to individual circumstances, is person-centred and is outcome-focused. It is vital for successful safeguarding that the procedures in this policy are understood and applied consistently at an individual, managerial, and organisational level.

The aims of safeguarding are to:

- Prevent harm and reduce the risk of abuse or neglect
- Stop abuse or neglect wherever possible
- Prevent impairment of development and enable individuals to have the best outcomes
- Safeguard individuals in such a way that supports them in making choices and having control over how they want to live
- Promote an approach that concentrates on improving life for the individual
- Raising public awareness so that communities as a whole, alongside professionals, play their part in preventing, identifying and responding to abuse and neglect
- Provide accessible information and support to help people understand what constitutes abuse and neglect, and how to respond
- Address what has caused the abuse or neglect

Safeguarding of children and adults at risk are governed by separate Government legislation and separate Surrey County Council safeguarding boards. Therefore the policy will consider the safeguarding of children and adults at risk independently, before addressing where there is overlap between the two safeguarding areas.

How to make a referral relating to children or adults

You have a Safeguarding concern

This could be a suspicion, an allegation, an observation or a disclosure of abuse or risk of abuse

Is there an immediate risk of harm?

Yes

Call **Emergency Services on 999** and following the call to Emergency Services, report the concern to one of the designated safeguarding contacts (See next page)

If you are a member of staff, then also complete an internal reporting form which is on the intranet and send to safeguarding@epsom-ewell.gov.uk

If you are an elected member, call **Emergency Services on 999** and report the concern to one of the designated safeguarding officers (See next page)

No

If you are a member of staff, talk to your Line Manager and if it is decided there is a concern (The Safeguarding contacts can be contacted for advice if needed), report it on the Safeguarding Incident Form and make the referral to the **Surrey Multi Agency Safeguarding Hub (MASH)** on **0300 470 9100** or a social worker if known to social services.

If you are an elected member, report the concern to one of the designated safeguarding officers (See next page)

If further information or action is required from you, the MASH will contact you.

You may not find out the outcome of the alert you raised as information is only provided on a need to know basis.

For further information on the Surrey Multi Agency Safeguarding Hub (MASH), see Appendix 2.

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Raising Alerts

To ensure timely response to Safeguarding concerns, alerts should be made by telephone to **Surrey Multi Agency Safeguarding Hub (MASH)**:

The team of multi-agency staff are based at Guildford Police Station, working hours 9am to 5pm Monday to Friday.

Monday to Friday 9am to 5pm **MASH phone number: 0300 470 9100**

MASH Email: mash@surreycc.gov.uk

MASH Secure email: mash@surreycc.gcsx.gov.uk

MASH team

Surrey Police

PO Box 101

Guildford

GU1 9PE

Other useful contacts

The Caldicott Guardian for Surrey Adult Social Care

Toni Carney – Email: toni.carney@surreycc.gov.uk

A Caldicott Guardian is a senior person responsible for protecting the confidentiality of people's health and care information and making sure it is used properly. All NHS organisations and local authorities which provide social services must have a Caldicott Guardian.

[UK Caldicott Guardian Council](#)

Child Sexual Exploitation, Modern Slavery and Prevent referrals should be made to Surrey Police on **101** unless it is an emergency in which case call **999**

Crimestoppers 0800 555 111:

Adult Social Care – Emergency Duty Team 01483 517898

General, non-safeguarding queries or existing open cases for Children

Surrey County Council's Children's Services

Telephone: **0300 123 1610**

Safeguarding children

Introduction

Epsom and Ewell Borough Council has a legal duty to work together with other statutory and voluntary agencies to safeguard and promote the welfare of children. For the purposes of this document children are considered as between 0 -18 years of age.

Safeguarding and promoting the welfare of children is defined as:

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

Children need to be loved and valued and be supported by a network of reliable and affectionate relationships. If children are denied this, they are at an increased risk of an impoverished childhood, and at an increased risk of disadvantage and social exclusion in adulthood. Abuse and neglect pose particular problems.

When safeguarding children, *Working Together to Safeguard Children (See Appendix 4: Legal Framework)* requires that the focus should be to promote children's wellbeing and welfare through supporting families. It recommends that safeguarding must address the needs of a child as much as the risk to a child in order to give children and families positive outcomes.

The Epsom and Ewell Borough Council Safeguarding Policy for Children and Adults has been developed in accordance with Surrey County Council guidance regarding:

- the safeguarding training programme
- recruitment procedures that will safeguard children and promote welfare – for example: Disclosure and Barring checks for specified employees and thorough selection procedures
- details of the designated safeguarding officers
- the procedures that staff must follow if they believe a child or young person may be at risk

- The use of the Early Help Assessment (*See Appendix 7: The Early Help Pathway*) If there is a concern about children, but the child is not at risk of significant harm, this needs to be dealt with via the Early Help Assessment process. Most enquiries about children’s welfare are to do with concerns regarding children with additional needs. These needs may require a multi-agency response. The Early Help Assessment will help to clarify the child’s specific needs and in collaboration with parents, ensure appropriate actions including the identification of a lead professional to continue to assist the family if necessary. (*See Appendix 7 for more details*).

It is a statutory duty under the Children Act 2004 (*See Appendix 3: Legal Framework*) for each local authority to have a Safeguarding Board. Government guidance: *Working Together to Safeguard Children* (*see above*) added further duties. The Surrey Safeguarding Children Board is led by Surrey County Council. All Borough Councils are partner agencies of the Board along with other statutory and voluntary agencies. For details of the Surrey Safeguarding Children Board, see Appendix 1.

Key principles

Effective safeguarding arrangements in every local area must be underpinned by two key principles:

- Safeguarding is everyone’s responsibility: for services to be effective each professional and organisation must play its full part
- A child-centred approach: for services to be effective they must be based on a clear understanding of the needs and views of children

Safeguarding is everyone’s responsibility

‘Safeguarding is everyone’s responsibility’ is the founding principle of safeguarding children. It asserts that everybody has a role to play in protecting children from harm and keeping them safe. If a person comes into contact with a child whom he or she has concerns about, he or she must take action to safeguard the child. It is unlikely that a single individual’s insight into a child’s situation will form a complete picture and by raising concerns, however small, and sharing information, it will allow for more informed decision making and decisive action to be taken.

A Child Centred Approach

Effective safeguarding of children can only be achieved by putting children at the centre of the system, and by every individual and agency playing their full part, working together to meet the needs of vulnerable children.

Children have clearly expressed what they want from the safeguarding process:

Vigilance

To have adults notice when things are troubling them

Understanding and action

To understand what is happening; to be heard and understood; and to have that understanding acted upon.

Stability

To be able to develop an on-going stable relationship of trust with those helping them

Respect

To be treated with the expectation that they are competent rather than not

Information and engagement

To be informed about and involved in procedures, decisions, concerns and plans.

Explanation

To be informed of the outcome of assessments and decisions and reasons when their views have not met with a positive response

Support

To be provided with support in their own right as well as a member of their family

Advocacy

To be provided with advocacy to assist them in putting forward their views.

Good Practice when working with children

When working with children it is important to follow the good practice outlined below:

- Adults should not behave in a manner which would lead any reasonable person to question their suitability to work with children, or act as a role model.
- Adults must not work on their own with children. If a situation occurs when this arises, due to sickness or an emergency, always inform colleagues or parents/carers to ensure that someone can be present or nearby.
- It is inappropriate to offer lifts to a child or young person. There may be occasions where the child or young person requires transport in an emergency situation or

where not to do so may place a child at risk. If circumstances permit, the parent/carer or line manager should be informed before the lift is provided.

- The event must always be recorded and reported to a senior manager and parents/carers.
- Physical contact is discouraged and should only take place only when it is absolutely necessary and in a safe and open environment i.e. one easily observed by others.
- Always report any accidents/incidents or situations where a child becomes distressed or angry to a senior colleague.

What to do if a child or third party makes an allegation

If a child or third party makes an allegation or discloses information which raises concern about significant harm, the initial response should be to listen carefully to what the child or third party says so as to:

- clarify the concerns
- offer reassurance about how the child will be kept safe and
- explain that what they say cannot be kept in confidence and will be passed to Children's Services and/or the police

If the allegation is raised by a child, the child must not be pressed for information, led or cross examined or given false assurances of absolute confidentiality. Such well-intentioned actions could prejudice police investigations, especially in cases of sexual abuse. An interpreter should be used if necessary.

If the child can understand the significance and consequences of making a referral to Children's Services, he or she should be asked his or her view by the referring professional. Although the child's view should be considered, it remains the responsibility of the professional to take whatever action is required to ensure the safety of that child and any other children.

Professionals should generally seek to discuss any concerns with the family and where possible, seek their agreement to making referrals to Children's Services, but there will be some circumstances where professionals should not seek consent if it could:

- place a child at increased risk of significant harm
- place an adult at risk of serious harm

- prejudice the prevention or detection of a serious crime
- lead to unjustified delay in making enquiries about allegations of Significant Harm

Professionals should record in writing, on the referral form, whether they have discussed the referral with the family. They should also record the reasons if they decide not to inform the family of these matters.

The procedure below is designed to help professionals to understand what to do if they have concerns about a child who has additional needs and what to do if a child has been or is likely to be significantly harmed.

When to refer

It is important that employees make a referral if it is believed or suspected that:

- A child is suffering or likely to suffer significant harm (*see Appendix 5: Safeguarding children from abuse*) or
- A child's health or development may be impaired without the provision of services or
- With the agreement of the person with parental responsibility, a child would be likely to benefit from family support services

There are a number of categories of abuse that could be defined as significant harm and they are set out in Appendix 5.

Allegations against staff, carers and volunteers

An investigation is required if there is an allegation or concern that any person who works with children, in connection with his or her employment or voluntary activity, has:

- behaved in a way that has harmed a child, or may have harmed a child
- possibly committed a criminal offence against or related to a child
- behaved towards a child or children in a way that indicates s/he is unsuitable to work with children

Although some behaviours may not constitute a criminal offence, consideration will need to be given as to whether they may indicate unsuitability to work with children. These include concerns relating to inappropriate relationships between members of staff and children such as:

- having a sexual relationship with a child under 18 in a position of trust in respect of that child, even if consensual
- `grooming' i.e. meeting a child under 16 with intent to commit a relevant offence
- other `grooming' behaviour giving rise to concerns of a broader child protection nature - for example: inappropriate text/email messages or images, gifts, socialising etc.
- possession of indecent photographs/pseudo-photographs of children

Any allegations or concerns about a member of staff, councillor or volunteer should be immediately referred to the Head of Housing and Community who should act in accordance with the Surrey Safeguarding Policy. If the allegation concerns a councillor, then the Monitoring Officer should also be informed. If the alleged behaviour harmed a child, is a possible criminal offence or the behaviour indicates that they are unsuitable to work with children, the **Local Authority Designated Officer (LADO)** at Surrey County Council must also be informed within one working day of the allegation. If allegations are made directly to the police and if an organisation removes an individual (paid worker or unpaid volunteer) from work such as looking after children (or would have, had the person not left first) because the person poses a risk of harm to children, the organisation must make a referral to the Disclosure and Barring Service. It is an offence to fail to make a referral without good reason.

The Local Authority Designated Officer is responsible for advising on and monitoring such allegations and can be contacted on 01372 833321. For further details, see Appendix 9.

The actual process for making a referral is set out under *How to make a referral relating to children or adults at risk* (page 5)

Safeguarding Adults at Risk

Introduction

Epsom and Ewell Borough Council has a legal duty to work together with other statutory and voluntary agencies to safeguard and promote the welfare of adults at risk and treat them with dignity and respect. At the same time the Council will protect its staff and elected members from the risk of unfounded allegations. We will seek to ensure that any adult at risk receiving services from the Council can access council services in safety without fear of abuse.

This policy is designed to work in conjunction with Surrey Multi-Agency Adult Protection Procedures which is available on Surrey County Council's website:

[Surrey County Council](#)

The Council will seek to implement its policy on the protection of adults at risk by:

- ensuring that all staff who have regular, direct and unsupervised contact with adults at risk are carefully selected. They must provide two written references. Staff and appropriate elected members should complete a Disclosure and Barring check. Staff and appropriate elected members will receive basic training, accredited where necessary. All elected members must understand the adult protection process
- ensuring that all Council contractors who have regular, direct and unsupervised contact with adult at risks have effective policies and procedures in place
- ensuring that organisations that apply for grant aid for programmes that include adults at risk (funding or premises) have effective policies and procedures in place
- giving all the parties involved and the general public information about what they can expect from the council in relation to protecting and safeguarding adults at risk
- ensuring that there is a clear complaint procedure in place that can be used if there are any concerns
- sharing information about concerns with appropriate agencies and involving adults at risk and their carers as appropriate

Who is an adult at risk?

The term adult at risk refers to anyone aged 18 and over who:

- is or may be in need of Community Care Services by reason of mental or other disability, age or illness; and
- is or may be unable to take care of himself or herself, and/or:
- is unable to protect themselves against significant harm or exploitation

Whether or not a person is vulnerable in these cases will depend upon surrounding circumstances, environment and each case must be judged on its own merits

Key principles

The Care Act 2014 (See *Appendix 4: legal Framework*) introduced six principles of safeguarding which are listed below.

Empowerment

Presumption of person-led decision making and informed consent

Prevention

Take action before harm occurs

Proportionality

Take the least intrusive response appropriate to the risk presented

Protection

Provide support and representation for those in the greatest need

Partnership

Local solutions through services working with their communities

Accountability

Ensure there is accountability and transparency in safeguarding practices

In view of the above, the following principles have been adopted by all agencies and professionals working together to protect adults at risk.

- All adults at risk have a right to be protected and their decisions respected even if that decision involves risk.
- The prime concern at all stages will be the interests and safety of the adult at risk.
- The aim will be to give a professional service to support and minimise the distress of any adult at risk.

- Everyone will be treated sensitively at all stages of the investigation.
- The importance of professionals working in partnership with the adult at risk and others involved will be recognised throughout the process.
- All services will be provided in a manner that respects the rights, dignity, privacy and beliefs of all the individuals concerned and does not discriminate on the basis of race, culture, religion, language, gender, disability, age or sexual orientation.
- Adults who have been abused need the same care and sensitivity whoever the alleged abuser.
- The responsibility to refer the adult at risk rests with the person who has the concern.
- All agencies receiving confidential information in the context of an adult at risk investigation will make decisions about sharing this information in appropriate circumstances.
- Procedures provide a framework to ensure that agencies work together for the protection of the adult at risk. They are not a substitute for professional judgement and sensitivity
- Adults at risk have the right to have an independent advocate if they wish, at any stage in the process.

Making Safeguarding Personal

Making Safeguarding Personal (MSP) is a shift in culture and practice in response to what we now know about the effectiveness of safeguarding from the perspective of the person being safeguarded.

MSP promotes conversations about how we might respond in safeguarding situations in a way that enhances involvement, choice and control as well as improving quality of life, wellbeing and safety, and seeing people as experts in their own lives and working alongside them. It is a shift from a process supported by conversations to a series of conversations supported by a process.

The key focus is on developing a real understanding of what adults at risk wish to achieve and agreeing, negotiating and recording their desired outcomes, working out with them (and their representatives or advocates if they lack capacity) how best those outcomes might be realised and then seeing, at the end, the extent to which desired outcomes have been realised.

The Wellbeing Principle

The Care Act 2014 introduces a duty to promote wellbeing when carrying out any care and support functions in respect of a person. This is sometimes referred to as *The Wellbeing Principle* because wellbeing is put at the heart of care and support.

The wellbeing principle applies in all cases where care and support is being carried out, or decisions are made, or safeguarding is exercised. When safeguarding adults it applies equally to adults with care and support needs and their carers.

Promoting wellbeing means actively seeking improvements at every stage in relation to the individual, and where applicable their carer. It is a shift from providing services to the concept of meeting needs. In promoting wellbeing it should be assumed that individuals are best placed to judge their own wellbeing. Their individual views, beliefs, feelings and wishes are paramount and individuals should be empowered to participate as fully as possible.

What is abuse?

Abuse is a violation of an individual's human and civil rights by any other person or persons or organisation. Abuse may consist of a single act or repeated acts. It may be physical, verbal or psychological, it may be an act of neglect or omission to act or it may occur where a vulnerable person is persuaded to enter into a financial or sexual transaction to which he or she has not consented, or cannot consent.

Any act of abuse, repeated or singular, is a violation of the adult at risk's human and civil rights

Context

Abuse of adults at risk can occur in any setting or any situation and can be a complex area. Abuse may occur in:

Domestic settings: including the adult at risk's own home, or another person's home

Institutional settings: including day care, residential care, nursing homes and hospitals

Public settings: including in the street, any public area or social or work environment

Abuse of adults at risk occurs in all cultures, all religions and at all levels of society.

The abuser may be anyone, including a member of the family, friend, neighbour, partner, carer, stranger, care worker, manager, volunteer, another service user or any other person who comes into contact with the adult at risk.

Good Practice when working with Adults at Risk

To help prevent abuse occurring and false allegations arising, the following basic guidelines will help safeguard both the adult at risk and members of staff.

You must:

- treat all service users with dignity and respect
- provide an example of good conduct you wish others to follow
- Challenge unacceptable behaviour - e.g. bullying, and report all allegations/suspicions of abuse
- Be identifiable and wear a name badge at all times

You must not:

- have unwarranted contact with an adult at risk
- make any comments, which may have a sexual connotation.

There may be exceptional circumstances where it is necessary to restrain the adult at risk to prevent him or her from damaging himself or herself or others. Only the minimum reasonable force necessary may be used. All incidents of physical restraint must be recorded on an incident form and be submitted to a nominated officer and the Health and Safety Officer

When to be concerned about possible abuse

It is not the role of Epsom and Ewell Borough Council to decide if an adult at risk is being abused or not, but it is our job to pass on any concerns. *Appendix 6: Adults at Risk: forms of abuse and indicators of abuse* provides a list of types of abuse and examples of behaviours associated with each type of abuse. This list is not exhaustive, and there may be other indicators.

Responding to a person who discloses a concern of abuse

- In an emergency ring 999.
- Do ensure the safety of the individual and others if in immediate danger, and contact the relevant emergency service.
- Do not be judgemental or jump to conclusions.
- Do listen carefully.

- Do provide support and information to meet the individual's specific communication needs.
- Do use open questions.
- Do tell them that the individual did a good or right thing in telling you.
- Do tell the individual you are treating the information seriously.
- Do tell them it was not their fault.
- Do ask them what they need to keep themselves safe.
- Do not make promises you cannot keep.
- Do not promise to keep secrets.
- Do seek consent to share the information with your lead for safeguarding; however, lack of consent should not prevent you from reporting your concerns.
- Do explain that you have a duty to tell your lead for safeguarding.
- Do not confront the person alleged to have caused the harm as this could place you at risk, or provide an opportunity to destroy evidence, or intimidate the person alleged to have been harmed or any witnesses.
- Do explain that you will try to take steps to protect them from further abuse or neglect.
- Do support and reassure the person.
- Do preserve any forensic or other evidence.

Action after the concern of abuse has been recognised:

To be taken as soon as possible or within 4 hours

- Report concerns to one of the Council's Safeguarding contacts (for details, see page 6).
- Record your concerns and how they came to light, any information given by the person, information about any witnesses, the individual's wishes, actions taken, who was present at the time, dates and times of incident(s).

- Record details of the person alleged to have caused harm.
- Do record any concerns about the person's capacity to make any decisions and the reasons for the concerns.
- Do record whether the person is aware that the concerns have been reported.
- Do record their perspective.
- Do record any previous concerns about the person.
- Do not breach confidentiality for example by telling friends or other work colleagues.
- Do use Whistleblowing Procedures if you feel that you will not be believed, taken seriously or believe that your manager or lead for safeguarding may be causing the risks of abuse to the adult or child.

The actual process for making a referral is set out under *How to make a referral relating to children or adults at risk* (page 5)

The Council's roles and responsibilities in safeguarding children and adults at risk

The policy has considered children and adults at risk independently as they are the subject of different legislation. However, there are areas where safeguarding children and adults at risk overlap, and these are set out below:

The Council as an Organisation

The Council is committed at senior officer and member level to safeguarding children and adults at risk. The Council recognises its responsibilities under the Care Act 2014, The Children Act 2004, and Working Together to Safeguard Children 2015. Safeguarding is a Council priority and this is clearly demonstrated by:

- representation at the Surrey Safeguarding Adults Board and the completion of standard returns for this board
- representation at the Surrey Safeguarding Children Board and the completion of Section 11 returns for this board
- appointment of a Lead Epsom and Ewell Borough Council Member for Safeguarding Children and Adults at Risk
- appointment of Safeguarding Officers across the Council, to be formally approved by the Chief Operating Officer
- sign up to protocols and policies

The Council as an Employer

In its role as an employer the Council incorporates safeguarding measures in its recruitment procedure and provides mandatory safeguarding training for all employees.

Recruitment Procedures

Epsom and Ewell Borough Council is committed to safer recruitment. Where it is necessary, new members of staff are required to undergo a Disclosure and Barring Service (DBS) check to obtain a Basic Disclosure Scotland certificate. Basic disclosures verify identity and show details of all convictions considered to be unspent under the Rehabilitation of Offenders Act 1974 or state that there are no such convictions. New employees who are taking up a position which involves working closely with children or adults at risk (in a voluntary or paid capacity) will be required to acquire an Enhanced DBS Disclosure. Enhanced DBS Disclosures provide additional detail about unspent and spent convictions, cautions, reprimands, final warnings plus any additional information held by the police.

Training

All employees will be required to undertake safeguarding training and become familiar with the Safeguarding Policy as part of their induction. Training will be provided at three levels:

Citizen level: This training is designed for all members of staff to give them an awareness of what safeguarding is, forms of abuse, and how to report any concerns they may have.

Advanced level: This training is aimed at those employees who have a role that involves direct contact with children and adults at risk.

Safeguarding Officer level: The leads for safeguarding, Safeguarding Officers, will undertake additional training as organised and recommended by the Surrey Safeguarding Adults Board and Surrey Safeguarding Children Board to ensure their knowledge is up to date and is reflected in the council's policies and procedures.

The Council as a Licensing Authority

The Council is a licensing authority for services such as taxi drivers, public events, alcohol and entertainment, charity collections, gambling, animal licensing, boot fairs, Sunday and street trading and other licences such as fireworks.

The Council needs to ensure that all relevant checks are carried out prior to issuing licences and if a safeguarding concern is raised at any time during the process, the Council's safeguarding policy and procedure must be followed, including the notification of other government or national bodies.

Contracts

Safeguarding is referenced in the general conditions of contact for suppliers. If a supplier breaches the contract, the legal team will follow its processes in addition to following the Council's Safeguarding Policy for Children and Adults at Risk.

Record keeping

Good record-keeping is an essential part of the accountability of organisations to those who use their services. Maintaining proper records is vital to individuals' care and 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 agencies have a responsibility to keep clear and accurate records. It is fundamental to ensure that evidence is protected and to show what action has been taken, what decisions have been made and why.

A guide to making a record

As soon as possible on the same day, a written record should be made of what has been seen, been said and any other concerns. It is important to make sure anyone else who saw or heard anything relating to the concern also makes a written report.

Epsom and Ewell Borough Council has designed a **Safeguarding Report Form**. It is to be used as soon as possible after the incident or disclosure to capture the safeguarding information including any actions taken. The form can be used for concerns about an adult or child.

When the form has been completed it must be sent to safeguarding@epsom-ewell.gov.uk.

The report will be kept on file securely with the centrally held Safeguarding Monitoring Register as a means of reference. It will also aid in the relaying of information to the Multi Agency Safeguarding Hub (MASH), and other organisations such as the police if and when required.

The form can be found at: [Insert link]

Also see Appendix – Safeguarding report Form.

More information about recording keeping can be found at:

<http://www.surreycc.gov.uk/social-care-and-health/safeguarding-boards/surrey-safeguarding-adults-board/surrey-safeguarding-adults-board-information-for-professionals/protocols-forms-and-guidance>

Information sharing

Information sharing is vital to safeguarding and promoting the welfare of children and adults at risk. A key factor in many cases where children and adults have been harmed has been the failure to record information, to share it, to understand the significance of the information shared and to take appropriate action. Often it is only when information from a number of sources has been shared that it becomes clear that a child or adult at risk might be suffering harm.

Professionals who have contact with children, families and adults at risk should always share any concerns with the MASH where they have reasonable cause to suspect significant harm. For more information on the MASH, see Appendix 3.

All information sharing should be in line with the agreed set of principles about sharing personal or confidential information in the Surrey Multi-Agency Information Sharing Protocol (MAISP). Further information can be found at:

<http://www.surreycc.gov.uk/social-care-and-health/safeguarding-boards/surrey-safeguarding-adults-board/surrey-safeguarding-adults-board-information-for-professionals/protocols-forms-and-guidance>

Appendix 1

Safeguarding Boards

In Surrey, the statutory Safeguarding Children's Board and Safeguarding Adults Boards are responsible for providing local agencies with guidance and holding agencies to account for their actions.

Representation on Safeguarding Boards

The Children Act 2004 and Care Act 2014 together with associated statutory guidance sets out which organisations are required to sit on both boards and comprises all relevant statutory and key voluntary agencies.

The 11 Surrey Borough and District Councils have a single representative nominated by the Surrey Chief Executives Group to represent them on each board. Other borough and district council officers may attend the boards or the various sub groups that deal with the operational arrangements and ensure effective practice throughout the County.

Performance and Quality Assurance

Organisations on the boards are responsible for ensuring that they provide any data that is required by the boards for their respective Performance and Quality Assurance Frameworks. Likewise, they are expected to complete any returns and comply with any audit requirements.

Surrey Safeguarding Children Board (SSCB)

The overall role of the SSCB is to coordinate local work to safeguard and promote the welfare of children and to ensure the effectiveness of what the member organisations do individually and together by developing interagency policies and procedures for safeguarding and promoting the welfare of children, including:

- the action to be taken where there are concerns about a child's safety or welfare
- training of those working with children and/or families or in services affecting the safety and welfare of children
- investigation of allegations concerning persons working with children

It is very important that local safeguarding arrangements are strongly led and promoted at a local level, specifically by:

- a strong lead from local authority members, and the commitment of chief officers in all agencies, in particular the Director of Children's Services and Lead Member for Children's Services at Surrey County Council; and

- effective local coordination and challenge by the Local Safeguarding Children's Boards

Borough and District Councils have a crucial role to play in the safeguarding of children in their areas. The Surrey Safeguarding Board Procedures Manual specifically refers to the duty of housing authorities to share information that is relevant to safeguarding. They should promote the welfare of children and the duties of leisure services departments and leisure contractors to ensure that their leisure facilities safeguard children. All casual and temporary members of staff must be aware of safeguarding children issues and know how to report concerns.

Section 11 of the Children Act 2004 places duties on a range of organisations and individuals to ensure their functions, and any services that they contract out to others, are discharged having regard to the need to safeguard and promote the welfare of children.

Each Surrey Borough and District Council completes Section 11 forms to be returned to the Surrey Safeguarding Children Board by the Lead Safeguarding Officer.

The Surrey Safeguarding Children Board has five core objectives to enable it to deliver its responsibilities as set out in *Working Together 2015*. These are:

- to optimise the effectiveness of arrangements to safeguard and protect children and young people
- to ensure clear governance arrangements are in place for safeguarding children and young people
- to oversee Serious Case Reviews (SCRs), Partnership Reviews and Child Death (CDOP) processes and ensure learning and actions are implemented as a result
- to ensure a safe workforce and that single-agency and multi-agency training is effective and disseminate good practice
- to raise awareness of the roles and responsibilities of agency and community roles and responsibilities in relation to safeguarding children and young people

In addition, the Board:

- coordinates what is done by each person or body represented on the Board for the purposes of safeguarding and promoting the welfare of children in the area
- ensures the effectiveness of what is done by each such person or body for those purposes

The functions that support these objectives are to:

- develop policies and procedures
- communicate and raise awareness
- monitor and evaluate the effectiveness of partners individually and collectively
- participate in the planning of services
- undertake reviews of all child deaths and serious case reviews and disseminate the learning
- commissioning and delivery of multi-agency training
- evaluate of single agency and multi-agency training

Additional Priorities

In addition to the delivery of core business the SSCB has identified four targeted priorities on which to focus:

- To monitor and challenge the effectiveness of Early Help and to ensure that the voice of children and young people is heard
- To ensure professionals and the current child protection processes effectively protect those children identified as in need of protection and who are looked after
- To ensure children and young people at risk of Child Sexual Exploitation (CSE) are protected
- To monitor and challenge the effectiveness and impact of the Domestic Abuse Services in reducing the incidences of Domestic Abuse and protecting children and young people from harm

Surrey Safeguarding Adults Board (SSAB)

The Surrey Safeguarding Adults Board (SSAB) helps and protects adults in Surrey who have care and support needs and who are experiencing, or are at risk of, abuse or neglect.

Representatives from carers' groups, disability groups and older people's groups are members of the board.

The Board ensures the voices of adults at risk, their families and their carers are heard and guarantees there are effective processes in place to prevent and respond

to abuse and neglect. The board also raises awareness of the importance of safeguarding through publicity campaigns and has a multi-agency training programme in place to give staff the right skills to safeguard adults.

The SSAB has three core duties:

- to publish a strategic plan that sets out how it will meet its main objective and what the members will do to achieve this
- to publish an annual report detailing what the SSAB has done during the year to achieve its main objective and implement its strategic plan
- to conduct any safeguarding adults reviews in accordance with the Care Act 2014

The functions that support its objectives and duties are to:

- develop a framework of multi-agency policies , protocols and procedures
- require member agencies to provide assurance on their safeguarding activities
- quality assure the safeguarding of member agencies
- implement a multi-agency Competency Framework and training programme
- undertaking Safeguarding Adults Reviews and learning lessons from them
- learn lessons from other reviews including Domestic Homicide Reviews
- undertake activities to raise awareness of safeguarding and to support the prevention of abuse and neglect

Appendix 2

Surrey Multi Agency Safeguarding Hub (MASH)

What is the MASH?

The Surrey Multi-Agency Safeguarding Hub (MASH) is the single point of contact for reporting concerns about the safety of a child, young person or adult. It aims to improve the safeguarding response for children and adults at risk of abuse or neglect through better information sharing and high-quality and timely responses.

The Surrey MASH achieves this by co-locating agencies. It brings together Surrey County Council social care workers for children and adults, early help services, health workers and police as well as other partners across Surrey. Its aim is to identify need, risk and harm accurately and to facilitate the most appropriate and timely intervention.

The MASH partners

The Surrey MASH comprises representatives from Adult Social Care, Children's Social Care, Health and Surrey Police. There is also a virtual team of partners who support the MASH via information sharing.

This includes Education Workers, Independent Domestic Violence Advisers, Youth Support Services, Probation Service, Ambulance, Hospitals, Surrey Fire and Rescue Service, Trading Standards, schools and colleges, a Data Analysis team as well as four Early Help Co-ordination Hubs.

Because of closer partnership working, there is clearer accountability and less duplication.

How does the MASH work?

The MASH will consider all matters that come to its attention and decide on the best level of support or most appropriate service. If there is not enough information to make this decision, the MASH will ask other agencies for information such as police, health and schools, in order to make that decision and establish the right course of action. By offering advice from social workers from both adult and children services, the MASH can take a whole family centred approach: adults look after children/young people and vice versa; concerns/risks often affect both adults and children. For example, an adult at risk who is experiencing abuse could also be a parent and the abuse they are experiencing could impact on their child. A MASH which covers both adults and children can look at the risks for both adult and child and come up with a holistic plan that supports the family.

When should the MASH be contacted?

The Surrey MASH should be contacted if you would like to report a concern about the safety of a child, young person or an adult. The MASH is for new contacts not existing open cases. If it is an existing case, contact the appropriate social worker or locality team.

Situations where you would call a different number instead of the MASH

If you have already been in touch with adult social care or children's social care services, please contact your allocated social worker or family support worker directly.

Data Sharing in the MASH

Any data or information in the MASH is shared using a secure IT system. Only information that is 'lawfully' relevant to each case will be shared. The data will be used to inform the decision on the most appropriate service by gaining a better understanding of risk and need. All other information that is not relevant, necessary or proportionate to the need or risk of that individual case will not be shared and will not be accessible to any third parties.

For further information about the MASH:

<https://www.surreycc.gov.uk/social-care-and-health/contacting-social-care/contact-childrens-services/about-the-multi-agency-safeguarding-hub>

Appendix 3



Safeguarding Reporting Form

Epsom and Ewell Borough Council Safeguarding Reporting Form

1. Referral taken by	
Job Title:	Telephone:
Date of referral:	Time:

Referrer details	
Name	Job title
Place of work - address incl postal code	
Telephone	Email

2. Person details	
Last name	First Name
Date of Birth	Male/Female
Ethnicity (see code)*	Religion
Adult /Child	
Address	

3. Household details					
Last Name	First Name	Date of Birth	Male/Female	Ethnicity	Relationship to person
If known or appropriate please state principal carer and/or those with parental responsibility if appropriate and address if different:					

Telephone number:

Mobile number:

Please state if person referred has a disability or special needs?

4. Other professionals involved (to include GP and school details) where known

Name	Job Title	Address	Telephone

5. Please state, if person is a child, whether the Early Help HUB has been contacted and any advice given

6. Has an Early Help Assessment (EHS) been completed.

Yes	No	Don't know	Please attach if yes.

7. Reason for referral

What are your safeguarding concerns for this person?

What are these concerns based on? (What information have you gathered)

What services have already been offered by EEBC and/ or other agencies and what were the outcomes?

8. Please state who at EEBC you have discussed the case with?

9. Please state if you have made a referral to any of the following agencies:			
Children's Services	Yes/ No	Adult Social Care	Yes/ No
Community Mental Health	Yes/ No	Police	Yes/ No
Chapter 1 (Domestic Abuse Outreach)	Yes/ No		
Other (please specify)			

Have you emailed your completed Safeguarding Referral Form to:

safeguarding@epsom-ewell.gov.uk ?

Appendix 4

Legal Framework

This Safeguarding policy is underpinned by a range of legislation including, but not limited to:

The Children Acts 1989 and 2004

The *Children Act 1989* and *Children Act 2004* along with the statutory guidance, *Working Together to Safeguard Children 2015* provide the current framework for safeguarding children.

This legislation places an overarching responsibility on Surrey County Council, as the lead authority for children, for safeguarding and promoting the welfare of all children in their area, but makes clear that other agencies also have a role to play.

Section 11 of the Children Act 2004 places a statutory duty on various agencies, including districts and borough councils, to make arrangements to ensure that their functions are discharged taking account of the need to safeguard and promote the welfare of children. This includes any services or function they contract out.

This Act led to the establishment of the Surrey Safeguarding Children's Board and required Surrey County Council to secure the co-operation of partners in setting up arrangements to improve the well-being of children in Surrey.

Working Together to Safeguard Children

This replaced the Area Child Protection Committee and sets out how organisations and individuals should work together to achieve this using the key principles:

Safeguarding is everyone's responsibility: for services to be effective each professional and organisation should play their full part.

The approach must be child-centred: in order to be effective, there needs to be a clear understanding of the needs of the child.

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419595/Working_Together_to_Safeguard_Children.pdf

The Care Act 2014

The Care Act 2014 sets out the legal framework for how local authorities and other statutory agencies, including district and borough councils, should protect adults with care and support needs who are at risk of abuse or neglect. It consolidates existing law and puts similar arrangements in place to those safeguarding children.

The Act required Surrey County Council, as the lead authority for vulnerable adults, to establish a Safeguarding Adults Board to bring together the key local partners to

focus on safeguarding strategy and practice. The Act also places a duty on Surrey County Council to carry out safeguarding enquiries where it is suspected that someone is suffering or at risk of abuse or neglect conducting Safeguarding Adults Reviews (SARs) where there is a cause for concern about a particular case, to learn lessons for the future.

All these initiatives are designed to ensure greater multi-agency collaboration as a means of transforming adult social care.

This guidance is updated from time to time; therefore the most up to date guidance will apply in relation to the operation of this policy.

Appendix 5

Safeguarding children from abuse

Physical abuse

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

The following are often regarded as indications of concern;

- An explanation which is inconsistent with an injury
- Several different explanations provided for an injury
- Unexplained delay in seeking treatment
- The parents/carers are uninterested or undisturbed by an accident or injury
- Reluctance to give information or mention previous injuries.

If you notice that a child or young person has injuries such as bruising, bite marks, burns and scalds, or scars and are concerned about the cause, it should be reported using the procedures set out in ***How to make a referral relating to children or adults at risk (page 5)***

Emotional Abuse

Emotional abuse is a form of significant harm which involves the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development.

It may involve conveying to children that they are worthless or unloved, inadequate or valued. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may also feature age or developmentally inappropriate expectations being imposed on children.

These may include interactions that are beyond the child's developmental capabilities, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another, serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children.

Staff must also be aware and report concerns relating to domestic abuse The definition of domestic abuse was changed by Government in September 2012 and is now defined as:

Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family member regardless of gender or sexuality. This can encompass, but is not limited to the following types of abuse:

- Psychological
- Physical
- Sexual
- Financial
- Emotional

Sexual Abuse

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

Staff must also be aware of **Child Sexual Exploitation** as an emerging, high priority concern. CSE is defined as:

...involving exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of their performing, and/or another or others performing on them, sexual activities. It can occur through the use of technology without the child's immediate recognition; e.g. being persuaded to post sexual images on the internet/mobile phones without immediate payment or gain. In all cases, those exploiting the child have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child's limited availability of choice resulting from their social/economic and/or emotional vulnerability.

Sexual exploitation can have a serious long term impact upon every aspect of a child or young person's life, health and education. It also damages the lives of families and carers and can lead to families breaking up.

It is a multi-agency responsibility of partner agencies to identify those children and young people at risk of exploitation, to protect them and safeguard them from further risk of harm and to prevent children from becoming victims of this form of abuse.

County Lines

County Lines refers to urban gangs supplying drugs to suburban areas and market and coastal towns using dedicated mobile phone lines or *deal lines*. This criminal activity often involves child criminal exploitation (CCE) as gangs use children and vulnerable people to move drugs and money.

New guidance has been developed by the Home Office to support frontline staff – particularly those who work with children, young people and potentially vulnerable adults – in identifying potential victims of this type of criminal exploitation. It sets out the signs to look for in potential victims, and what action staff should take so that potential victims get the support and help they need. The document supplements an organisation's existing safeguarding policies.

Any practitioner working with a vulnerable person who they think may be at risk of county lines exploitation should follow their local safeguarding guidance and share this information with local authority social care services.

If you believe a person is in immediate risk of harm, you should contact the police.

The guidance is available here:

<https://www.gov.uk/government/publications/criminal-exploitation-of-children-and-vulnerable-adults-county-lines>

Neglect

Neglect is a form of significant harm which involves the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development.

Neglect may involve a parent or carer failing to:

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- Protect a child from physical and emotional harm or danger
- Ensure adequate supervision (including the use of inadequate care-givers)
- Ensure access to appropriate medical care or treatment
- It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

If physical, emotional, sexual or neglect significant harm is suspected, or you have any other concerns regarding significant harm, it is important to report them immediately using the referral method outlined below. A piece of information, no matter how small, could mean that a child at risk is identified. Several small pieces of information from different agencies have in the past identified horrific cases of abuse that would not have been identified by one single agency.

Appendix 6

Adults at Risk: forms of abuse and indicators of abuse

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

- Unexplained or inappropriately explained injuries

- 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/liquid), rope burns, 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
- Sudden and unexplained urinary and/or faecal incontinence. Evidence of over/under-medication
- Flinches at physical contact
- Appears frightened or subdued in the presence of particular people
- Asks not to be hurt
- 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
- Wears clothes that cover all parts of their body or specific parts of their body
- An adult with capacity not being allowed to go out of a care home when they ask to
- An adult without capacity not being allowed to be discharged at the request of an unpaid carer/family member

Note: The NHS defines capacity as *the ability to use and understand information to make a decision, and communicate any decision made. A person lacks capacity if their mind is impaired or disturbed in some way and this means the person is unable to make a decision at that time.*

Domestic abuse

Domestic abuse includes psychological, physical, sexual, financial, emotional abuse, and so called 'honour' based violence.

In 2013, the Home Office announced changes to the definition of domestic abuse:

- 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
- Includes: psychological, physical, sexual, financial, emotional abuse, so called 'honour' based violence, Female Genital Mutilation, forced marriage
- Age range extended down to 16

Many people think that domestic abuse relates to intimate partners, but it is clear that other family members are included and that much safeguarding work that occurs at home is, in fact is connected with domestic abuse. This confirms that domestic abuse approaches can be considered safeguarding responses in appropriate cases.

Family members are defined as: mother, father, son, daughter, brother, sister and grandparents, whether directly related, in-laws or step-family.

Forced marriage is a term used to describe a marriage in which one or both of the parties are married without their consent or against their will. A forced marriage differs from an arranged marriage, in which both parties consent to the assistance of their parents or a third party in identifying a spouse.

In a situation where there is concern that an adult with care and support needs is being forced into a marriage they do not or cannot consent to, there will be an overlap between action taken under the forced marriage provisions and the adult safeguarding process. In this case action will be co-ordinated with the police and other relevant organisations. The police must always be contacted in such cases as urgent action may need to be taken.

The Anti-social Behaviour, Crime and Policing Act 2014 means it is now a criminal offence to force someone to marry. In addition, the Forced Marriage (Civil Protection) Act 2007 may be used to obtain a Forced Marriage Protection Order as a civil remedy.

Honour-based violence is a crime, and referring to the police must always be considered. It has or may have been committed when families feel that dishonour

has been brought to them. Women are predominantly (but not exclusively) the victims and the violence is often committed with a degree of collusion from family members and/or the community. Many of these victims will contact the police or other organisations. However, many others are so isolated and controlled that they are unable to seek help.

Safeguarding concerns that may indicate honour-based violence include domestic violence, concerns about forced marriage, enforced house arrest and missing person's reports. If a safeguarding concern is raised, and there is a suspicion that the adult is the victim of honour-based violence, the matter should be referred to the police as they have the necessary expertise to manage the risk.

Female genital mutilation (FGM) involves procedures that intentionally alter or injure female genital organs for non-medical reasons. The procedure has no health benefits for girls and women. The Female Genital Mutilation Act (FGMA) was introduced in 2003 and came into effect in March 2004. The Act makes it illegal to practise FGM in the UK or to take girls who are British nationals or permanent residents of the UK abroad for FGM whether or not it is lawful in another country. It also makes it illegal to aid, abet, counsel or procure the carrying out of FGM abroad.

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, 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 where one person is in a position of trust, power or authority in relation to the other (e.g. day centre worker/social worker/residential worker/health worker etc.) may also constitute sexual abuse (see section on position of trust).

Possible indicators

- Urinary tract infections, vaginal infections or sexually transmitted diseases that are not otherwise explained
- Appears unusually subdued, withdrawn or has poor concentration

- Exhibits significant changes in sexual behaviour or outlook
- Experiences pain, itching or bleeding in the genital/anal area
- Underclothing is torn, stained or bloody
- A child or a woman who lacks the mental capacity to consent to sexual intercourse becomes pregnant

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) as a result of performing sexual activities, and/or 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 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 individual have power over them by virtue of their age, gender, intellect, physical strength, and/or economic or other resources.

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 a person from using services that would otherwise support them and enhance their lives. It also includes the intentional and/or unintentional withholding of information (e.g. information not being available in different formats/languages etc).

Possible indicators

- Untypical ambivalence, deference, passivity, resignation
- Appears anxious or withdrawn, especially in the presence of the alleged abuser

- Exhibits low self-esteem
- Untypical changes in behaviour (e.g. continence problems, sleep disturbance)
- Not allowed visitors/phone calls
- Locked in a room/in their home
- Denied access to aids or equipment (e.g. glasses, dentures, hearing aid, crutches etc.)
- Access to personal hygiene and toilet is restricted
- Movement is restricted by use of 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

- Lack of heating, clothing or food
- Inability to pay bills/unexplained shortage of money
- Lack of money, especially after collecting Benefits
- Inadequately explained withdrawals from accounts
- Unexplained loss/misplacement of financial documents
- The recent addition of authorised signatories on 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 person and their money
- Service user not in control of their direct payment or individualised budget
- Miss-selling/selling by door-to-door traders/cold calling
- Illegal money-lending.

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. But 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 by 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'
- physically constrained or has restrictions placed on his/her freedom of movement

Contemporary 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 that person.

If an identified victim of human trafficking is also an adult with care and support needs, the response will be co-ordinated under the adult safeguarding process. The police are the lead agency in managing responses to the victims of human trafficking. There is a national framework to assist in the formal identification and help to coordinate the referral of victims to appropriate services, known as the National Referral Mechanism.

Possible Indicators

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. Although by no means exhaustive, some common signs follow.

Persons may:

- not be in possession of legal documents (passport, identification and bank account details) and they are being held by someone else
- have old or serious untreated injuries and they are vague, reluctant or inconsistent in explaining how the injury occurred
- look malnourished, unkempt, or appears withdrawn
- have few personal possessions and often wear the same clothes
- what clothes they wear may not be suitable for their work
- be withdrawn or appear 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
- appear under the control/influence of others, rarely interact or appear unfamiliar with their neighbourhood or where they work. Many victims will not be able to speak English
- Exhibit fear of the authorities
- perceive themselves to be in debt to someone else or in a situation of dependence

Environmental indicators

- **Outside the property:** there are bars covering the windows of the property or they are permanently covered on the inside. Curtains are always drawn. Windows have reflective film or coatings applied to them. The entrance to the property has CCTV cameras installed. The letterbox is sealed to prevent use. There are signs the electricity may have been connected from neighbouring properties or directly from power lines.
- **Inside the property:** access to the back rooms of the property is restricted or doors are locked. The property is overcrowded and in poor repair.

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 will often involve other types of abuse as well. 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.

The government has recently published a four year plan for tackling hate crime: *Action Against Hate*. The plan is available via: www.gov.uk/government/publications

Possible Indicators

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 all the indicators listed above may apply to discriminatory abuse.

A person may reject his or her own cultural background and/or racial origin or other personal beliefs, sexual practices or lifestyle choices, or make complaints about the service not meeting his or her needs.

Organisational abuse

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

Organisational 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 the individuals.

It can include 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 a person's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

Organisational abuse can occur in any setting providing health or social care. A number of inquiries into care in residential settings have highlighted that organisational abuse is most likely to occur when staff:

- receive little support from management

- are inadequately trained
- are poorly supervised and poorly supported in their work
- receive inadequate guidance

Or where there is:

- unnecessary or inappropriate rules and regulations
- lack of stimulation or the development of individual interests
- inappropriate staff behaviour, such as the development of factions, misuse of drugs or alcohol, failure to respond to leadership
- restriction of external contacts or opportunities to socialise

Neglect and acts of omission

These include ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, social care or educational services, and the withholding of the necessities of life such as medication, adequate nutrition and heating. 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 a person'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

- Inadequate heating and/or lighting
- Physical condition/appearance is poor (e.g. ulcers, pressure sores, soiled or wet clothing)
- Malnourished, has sudden or continuous weight loss and/or is dehydrated
- Cannot access appropriate medication or medical care
- Not afforded appropriate privacy or dignity
- Has inconsistent or reluctant contact with health and social services

- Callers/visitors are refused access to the person
- Person is exposed to unacceptable risk

Self-neglect

Self-neglect covers a wide range of behaviour, neglecting to care for one's personal hygiene, health or surroundings including behaviour such as hoarding. Self-neglect is also defined as the inability (intentional or non-intentional) to maintain a socially and culturally accepted standard of self-care with the potential for serious consequences to the health and well-being of the individual and sometimes to his or her community.

Possible indicators

- Living in very unclean, sometimes verminous, circumstances
- Poor self-care leading to a decline in personal hygiene
- Poor nutrition
- Poor healing/sores
- Poorly maintained clothing
- Long toenails
- Isolation
- Failure to take medication
- Keeping large numbers of pets
- Neglecting household maintenance
- Portraying eccentric behaviour/lifestyles

NOTE: Poor environments and personal hygiene may be due to personal or lifestyle choice or other issues such as insufficient income.

Where does abuse take place?

Abuse can take place anywhere. For example:

- The person's own home, whether living alone, with relatives or others

- Day or residential centres
- Supported housing
- Work settings
- Educational establishments
- Care homes
- Clinics and hospitals
- Prisons
- Other places in the community

Who might abuse?

Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the child or adult with care and support needs. A wide range of people may harm others. These include:

- a spouse/partner
- an adult with care and support needs
- other family members
- Neighbours
- Friends
- local residents
- people who deliberately exploit adults they perceive as vulnerable to abuse
- paid staff or professionals
- Volunteers
- Strangers
- Gangs - small groups of people known to each other

Appendix 7

The Early help Pathway

[Surrey Early Help Assessment Form](#)

[Early Help Pathway – a guide for practitioners](#)

Appendix 8

Other relevant policies and strategies

Prevent Strategy

The purpose of the Prevent Strategy is to stop people becoming terrorists or supporting terrorism. It aims to identify individuals at risk of radicalisation and being drawn into extremist activity. The Community Safety Board has overall governance of the Prevent Strategy with the Multi-Agency Prevent Partnership Group established to review trends and developments as well as provide a 'quality assurance' overview around Prevent delivery across Surrey.

The Surrey Community Safety Partnerships have identified Prevent as a priority and each District and Borough has developed a local Prevent Action Plan. Workshops have been held to raise awareness.

Domestic Abuse

Domestic abuse can be any incident of threatening behaviour, violence or abuse between adults who are, or have been, intimate partners, family members or members of the same household regardless of gender or sexuality. Domestic abuse is not limited to violent abuse; it can be physical, psychological, sexual, emotional or financial. Children's health and wellbeing can be seriously affected by living in households where there is any form of domestic abuse. The county-wide Domestic Abuse Management Board has overall responsibility for the development and implementation of the DA Strategy. Epsom and Ewell Borough Council is represented on this Board by the Community Safety and Enforcement Officer. More information including contacts for agencies that can offer support and practical advice can be found on www.surreyagainstda.info

Child Sexual Exploitation

Child Sexual Exploitation (CSE) is the sexual abuse of a child or young person aged under 18 by an adult who involves them in inappropriate sexual activities either with themselves or another person. The activity often takes place in exchange for money,

alcohol, drugs, food, accommodation or presents. Online grooming is a type of CSE that impacts both boys and girls across Surrey. This area of work is led by specialist police officers working closely with partners such as local Councils, social services, youth services, housing providers and the voluntary sector.

[Details to be confirmed]

A Surrey meeting Missing and Exploited Children Conference (MAECC) chaired by Children's Services meets monthly to discuss and agree actions to safeguard those young people identified as being at high/medium risk of CSE. District/Borough officers also attend and participate in these meetings.

More information can be found on Surrey Police's website.

Early Help

Early Help co-ordination supports all Surrey agencies, preventing and reducing the repetition of youth and parental crime, schools' pupil absence and exclusion, domestic abuse and or violence, child abuse and neglect, poor family physical and emotional health, substance misuse, homelessness and financial exclusion.

Improved compliance by the safeguarding partnership with provision of help earlier with an audit trail showing outcomes to agencies involved.

Missing Persons Protocol

This is in place to ensure that there is a coordinated response from agencies when a vulnerable adult goes missing. This includes Surrey Police, Surrey & Borders Partnership Trust, and Surrey Care Association, Surrey County Council Adult social Care Services and Surrey Care providers and associated agencies. It provides guidelines to all parties as to what actions should be taken when a person receiving care goes missing. More information can be found on the Surrey Safeguarding Adults Board website.

Surrey Multi-Agency Information Sharing Protocol

The MAISP is an agreed set of principles about sharing personal or confidential information. It enables each organisation signed up to the protocol to understand the circumstances in which it should share information and what its responsibilities are. The MAISP has been developed in partnership with Surrey County Council, all the borough and districts as well as the health services and Surrey Police.

<http://www.surreycc.gov.uk/social-care-and-health/safeguarding-boards/surrey-safeguarding-adults-board/surrey-safeguarding-adults-board-information-for-professionals/protocols-forms-and-guidance>

People in a Position of Trust Protocol

The Care Act 2014 requires that Safeguarding Adults Boards should establish and agree a framework and process for any organisation to respond to allegation against anyone who works (in either a paid or unpaid capacity) with adults with care and support needs. The framework and process in the context is referred to as the *Protocol*. The Protocol applies to all partner agencies of Surrey Safeguarding Adults Board (SSAB) and organisations commissioned to provide services by them, so they respond appropriately to allegations against people who, whether an employee, volunteer or student, paid or unpaid, works with or cares for adults with care and support needs. These individuals are known as *People in a Position of Trust (PiPoT)*. SSAB also requires partner agencies and the service providers they commission to identify a designated PiPoT lead or contact to oversee the delivery of responsibilities in their organisation.

[Surrey Safeguarding Adults Board – Protocol for responding to concerns about a Person in a Position of Trust \(PiPoT\)](#)

Appendix 9

Local Authority Designated Officer

[Surrey Safeguarding Children Board – Process for reporting and managing allegations](#)